Soaring Above Co-Addiction

A
n estimated 22.2 million Americans struggle with addiction. For the countless people who love an addict, their own lives get turned upside down too. Because of the stigma attached to addiction, secrecy, lies, and shame become a normal way of life for these families. For Lisa Espich it took nearly two decades of living through the turbulence of an addictive relationship before finding the strength to make a change. Lisa is an example of a woman who seemed to have it all from the outside (successful career, beautiful son, close family), but behind closed doors struggled to keep the truth hidden.

After years of trying and failing to save her husband from an addiction to crack, Lisa decided finally to get help for herself. Lisa says in her book, Soaring Above Co-Addiction, the turning point came when she found herself chasing a drug dealer through her neighborhood streets. Here is an excerpt from the book:

I came home from work to find my husband, Dean, standing outside of his dealer’s car. I knew it belonged to his dealer because I had seen the car before. I had followed my husband a couple of weeks prior when I suspected he was going to get drugs. The old white Cadillac parked outside my house was suspected he was going to get drugs. The old white Cadillac parked outside my house was suspected he was going to get drugs. The old white Cadillac parked outside my house was suspected he was going to get drugs. The old white Cadillac parked outside my house was suspected he was going to get drugs. The old white Cadillac parked outside my house was suspected he was going to get drugs.

As soon as I started to pull up into the driveway, the Cadillac sped off. I was too curious to let him get away easily. I spun my car back around and took off after him. I knew it was crazy, but my anger had the best of me. I was tired of struggling to pay the bills while this guy took our money.

As he weaved in and out of the neighborhood streets, I stayed right behind him.

Finding Recovery
For gamblers and their families
by Bobbi McGinley

Are you an Advocate for Recovery?

Soaring Above continued page 8
Resisting Reality

I used to think, “These are easy things to fix,” would be a welcomed acknowled-
gement to co-signing into training for those in crisis. However, very often, even as the words wafted from my mouth, instead of a joyful yip-
pee, the response is often a deep breath and an expression of, oh crap. This response made me start to wonder whether it is the truth that we resist, or our attachment to the lies that we believe.

Is it easier?

It’s much easier to believe we are forever broken and in need of constant support and pity—than it is to risk being whole. It is easier to believe that our relationships cannot be fixed, than to accept that we can create a profound connection that might go awry. It is easier to believe we are helpless in a world gone mad than it is to get mad, say our truth and risk being abandoned.

Since we are creating our own reality as we go, of course our beliefs are mirrored back to us with an affirming, “You win, your illus-
ion is absolutely correct and here’s the proof.” Things are as exactly as you believe them to be.

Consequently, if you believe all people will abandon you, when you bring into your life people who are incapable of committing and they ultimately abandon you, sure enough, you stand back and say…hey…see I was right.

Life is tricky

It wasn’t designed to be that way. We just couldn’t conceive of having so much power that we could actually create what we want. But, the moment we said we’d do it, the storm within got too loud, I take a glass too much to stun myself.

I thought about that. How many of us have taken a glass too many—to escape, numb out and stun ourselves?

The Tsumani

Every parent will want to read our feature by Mark Bell, as he takes an in-depth look at the trend of teens, pornography and the new

Dakota

Dakota, an extended-care facility for sexual disorders, provides continued care with a focus on trauma resolution, 12-Step traditions, and the holistic healing of mind, body and spirit.

bookstore@togetheraz.com

Dr. Evan is a life/coach in Arizona working with individuals, couples and corpora-
tions. For more information call 602-997-1200, email her at edchen@attglobal.net or visit www.
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Promises Treatment Centers Launches Detoxification from Suboxone Maintenance Program in Malibu

Many people try to get off long-term Suboxone maintenance on their own, and end up relapsing because they do not have proper clinical support. What they need is a clinically sound detox program to help them taper off maintenance drugs such as Suboxone. Promises is the first treatment center to specifically fill this gap in addiction treatment.

Promises Treatment Centers has announced the launch of their Detoxification from Suboxone Maintenance Program in Malibu. The program began accepting clients in January of this year. Clients may admit for as short as 10 days or as long as 21 days. If they choose to remain longer they can transition into the 31-day Malibu treatment program.

The detoxification program will focus heavily on integrative services, provided in both individual and group formats. These will include Chinese medicine and acupuncture, mindfulness meditation, hypnotherapy, restorative yoga, nutritional wellness groups, massage therapy, hydrotherapy, EEG biofeedback, and other support as needed.

Promises Treatment Centers has long taken the lead in developing effective treatment for drug addiction, being the originator of the Malibu Model which focuses on assessing each individual’s underlying issues then treating those issues that could put them at risk for relapse.

Dr. David Sack, addiction psychiatrist and CEO of Promises, explains, “We will focus on stability of the nervous system. We must address any underlying anxiety or mood disorders that Suboxone might be masking. The truth is, we believe many people have not successfully withdrawn from drugs such as buprenorphine, Suboxone, and Subutex because they did not have sufficient clinical support to manage symptoms upon withdrawal. We intend to fill that gap in addiction treatment.”

Promises decided to launch this program because studies have shown that 60-70 percent of people put on maintenance drugs quit on their own within a year. They quit because the drug still gives them a feeling of intoxication and it can blunt emotions. The problems arising from studies is that many of these people who try to manage their own withdrawal relapse to the original opiate.

Although being a victim of bullying is extremely painful for those who suffer, it is also a significant problem in the treatment world. It’s not unusual for changes in legislative policy to fall under the radar for many Americans. But these results are unsettling in a country where, according to the National Institute of Mental Health, a full quarter of the population has a diagnosable mental health problem, and only 33 percent of them receive treatment. Worse, two-thirds of those who do seek help do not receive adequate care.

“The implementation of mental health parity is a great milestone in recognizing that mental health care is just as crucial to a healthy life as prevention and treatment of physical ailments,” said Katherine Noland, Ph.D., the APA’s executive director for professional practice. “But laws alone have clearly not been enough to put parity into full use. Our survey shows that too few Americans are aware of these new rights.”

Under the law, insurance carriers must extend behavioral health benefits to the 82 million Americans whose states don’t mandate such coverage, and they can no longer charge higher copays and deductibles for mental health services than they do for physical health services. In addition, they can no longer impose a cap on outpatient mental-health visits, since no such limits apply for visits related to physical health.

In the end, the news from the survey wasn’t all bad. Since 56 percent of respondents gave cost as a primary reason they did not seek help for mental health problems, the vast majority supported the changes under the new law.

“We need to communicate more effectively with employers and potential consumers of mental health services so that parity can be fully implemented and people can more easily obtain the services they need,” concluded Noland. The full report, “Your Mental Health A Survey of Americans’ Understanding of the Mental Health Parity Law,” is available online. www.apa.org/news/press/releases/parity-law.pdf.

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Bullying Linked to Depression and Substance Use in Girls

Although being a victim of bullying increases teen depression regardless of gender, a new study found it puts girls at additional risk for substance use, Science Daily reported on Jan. 19.

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Hosted by Women in New Recovery and Recovery Alliance El Paso
Finding Recovery
For Gamblers and their Families
By Bobbe McGinley
Clinical Director/CEO of ACT – Counseling & Education

Finding the Similarities
The similarities between the alcoholic and gambler, (noting that pathological gamblers are known to use the alcohol…to escape from reality). The first inpatient treatment program developed for pathological gamblers, at the Veterans’ Administration Hospital in Brecksville, Ohio, was patterned after programs established for treating alcoholics. Gamblers Anonymous is patterned after Alcoholics Anonymous and uses a similar 12-step approach to reforming addictive behavior. Spouses of gamblers appear to share many of the same feelings and have parallel treatment goals when compared with spouses of alcoholics.

Because pathological gambling impacts the family to such a degree, many practitioners have recognized the importance of involving the non-gambling spouse (and other family members) as a key component. Some studies have utilized the spouse’s assistance in controlling the gambling behavior of their partner. For example, giving control of the finances to the non-gambling spouse, at least for an agreed upon time period, to interrupt patterns of temptation.

Family therapy is often part of institutionally based treatment. Many clinicians view marital couple group therapy as the treatment of choice. The value of working with a couple to help the pathological gambler is to distinguish the separation between the person with the addiction and assist the couple in being able to respectfully speak their feelings, and work out a plan for financial and emotional recovery. Couple’s meetings allow the spouses, both being actively involved in Gamblers’ Anonymous and Gam-Anon, to effectively and bridge the gap between the alcoholic/spouse and (other family members).

Within the field of alcoholism, studies have examined the impact of spousal involvement (usually the wife) on the recovery of the compulsive individual. It has been found that the alcoholic spouse’s involvement, the alcoholic’s sobriety was increased when the spouse also participated in Al-Anon, the counterpart to AA.

When clinicians looked at the relationship between the alcoholic’s abstinence and the spouse’s participation in treatment, there were four different types of spousal treatment to be found effective: outpatient treatment, membership in AA in Al-Anon treatment (along with the alcoholic) at the alcoholic’s inpatient treatment center, and post treatment counseling for the couple. It has been indicated that more alcoholics were abstinent when their spouses had been active in Al-Anon. The more types of treatment a wife received, the more likely the husband was to be abstinent. Of all the predictors examined over the years, membership in AA and the spouse’s membership in Al-Anon had the highest positive correlation with abstinence. In examining the influence of spouses, it has been found that amongst the population for compulsive gamblers, and support by their spouses, both being actively involved in Gamblers’ Anonymous and Gam-Anon, respectively, there was more success in recovery and in the couple’s ability to communicate effectively and bridge the gap between the addiction and successfully continuing their relationship as a couple.

Most studies have focused on the impact of the wife’s support of the gambling behavior of the husband; little information is available on the husbands’ support of the female gambler. This has shown to be the more predominant outcome for any couple dealing with any type of addiction. The bottom line would still appear to be an undeniable fact that a couple that is willing and then actively involved in attending self-help support groups that assist in focusing on their individual needs, is vital to developing and continuing healthy relationships and abstinence.

March 6-12 — National Gambling Awareness Week
Finding Recovery
For Gamblers and their Families
By Bobbe McGinley
Clinical Director/CEO of ACT – Counseling & Education

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What's next after a nude photo? What's the trajectory? Teens are not looking beyond the moment. We now know that youth who use pornography engage more often in oral and anal sex, have more sexual partners, and experience an increase in oral and genital STDs. Where is the awareness or practice of safe sex? With this being the rapid escalation of interaction between the sexes of our youth Dr. Jill Manning asks “What do these teens dream about? How juxtaposed are the scripts being received by youth versus what healthy sex really is?”

Additionally therapists are seeing an increase in anxiety among teens about their body image. This now includes beliefs among teens that there is something wrong with their genitalia; that they don’t perform, respond, sound, or sustain like porn stars do. It can be described as sexual performance anxiety. Dr. Jill Manning, author of What the Brain Knows About Pornography: A Guide for the Internet Generation, speaks about the mainstreaming of pornography as turning it into a “spectator sport.” Modern youth appear to believe that porn stars are exhibiting normal sexual experiences. Unfortunately, their young brains lack the skill to generalize and fully grasp the notion that pornography is a form of entertainment and fantasy that is rarely achieved in reality. Nevertheless, many teens are turning to pornography to fulfill sexual curiosity. The pornography, however, contributes to more anxiety because they can’t say they look or perform like that. This, for many, is creating more of the shame base that is core to addictive processes.

There is another danger

In one review of the top selling pornography videos a few years ago it was discovered that the majority of the videos had violent themes with verbal or physical aggression. However, only a small fraction of the females in those videos demonstrated a negative reaction with the majority demonstrating a positive or neutral reaction to the violence. Consequently, this is relaying to teens that violence in a sexual relationship is normal. Naturally this signifies new concerns about increased risk potential. Possible new trends in marital rape and domestic violence are of concern now as teens couple together and court each other under these contemporary expectations. Research already shows that exposure to violence in dating relationships is related to engagement in sex with a greater number of sexual partners. And more partners equates to increased risk potential. With the mainstreaming of pornography and the overt themes of violence and deviance in them, our youth are getting the message that this is normal behavior. When we cross over that line of condoning such behaviors we have taken a sharp detour from sexual and relational health for an entire generation of youth.

Another current online trend is massive multiplayer online role-playing games (MMORPG). A recent article highlighted that these games are significantly different from traditional computer games. As a type of social networking, the virtual world of these games moves in real time and the game continues even when players log off as characters in them are controlled by real people around the world. Most MMORPGs promote formations of guilds that group together to carry out quests with strong social pressure to be present when other members are playing. Players are prevented from actually winning because MMORPGs also provide endless objectives requiring significant investments of time and a reluctance by the players to walk away. These characteristics make MMORPGs more demanding, socially stimulating, and addictive, while filling social needs unmet in the real world.

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March 2011 www.togetheraz.com
I don't know about you, but I have often fantasized about what I would do if I suddenly came into a large sum of money. Although I don't actually play the lottery or have any rich, elderly relatives, I still find it a fun exercise to imagine what I would do with 10 million dollars, should I suddenly find myself the recipient of some sort of magical gift.

My first thoughts, selfishly, are generally about clearing up my own household debt—paying off my mortgage, my car, my credit card bill. However, I am fortunate that I don't have $100,000 in debt and that a mere $100,000 would easily take care of my outstanding loans, leaving me 9 million, 9 hundred thousand dollars to spend any old which way I wanted.

Continuing on the selfish vein, I would next guarantee that I never had to work for income again. My remaining booty would support me comfortably for about 200 years, so I'd still have about seven and a half million dollars left.

With all my financial needs satisfied for the rest of my life, I begin to think of my loved ones. I would pay off mortgages for my family and friends who are struggling and save money to make a down payment on a house for my aunt who is not only perfectly able to work, but is gainfully employed and not missing any of her mortgage payments.

Well, guess what? I don't actually need $100M to volunteer my services. I can do that today and have volunteered for Red Cross in the past and currently volunteer for the Give an Hour program for U.S. Veterans of the wars in Iraq and Afghanistan. So, rather than waste my time fantasizing about what fun I'm going to have if I win the lottery, which is never going to happen, I can actually reap benefits today by volunteering for those in need, and so can you!

I found a worthy cause and give an hour or more a week to someone in need. The rewards are outstanding!

“Find a worthy cause and give an hour or more a week to someone in need. The rewards are outstanding!”

The End of Sacrifice

Recently, a pilgrimage to the ancient Mayan temples at Chichen Itza and Uxmal in Mexico was most informative by the staggering structures the Mayans created, demonstrating their sophisticated understanding of mathematics and astronomy—and a deep inherent spirituality. At one pyramid our tour guide informed us that the Mayans regularly offered human sacrifices to appease their gods. “The Mayans feared that if they did not make sacrifices to the sun god, the sun would not rise the next morning,” the guide explained. “In times of drought, they sought to appease the rain god with multiple sacrifices.”

While we would regard such offerings as primitive and even abhorrent, the mindset of sacrifice is still very much alive in the modern world. Many of us believe that we must sacrifice something we value to gain something else we want. We believe that struggle, sweat, and sorrow are required to get anywhere in our career; that we must deny our joy so others can have theirs; and, under a “too pain, no gain,” mentality, we believe that if we are not suffering we have it too easy. While we are not sacrificing whole bodies as the Mayans did, we do sacrifice our emotions, our happiness, and often our health.

The sacrifices, however, are not rob us of life in one dramatic moment, as the Mayans experienced, but they rob us of life today in a more subtle fashion. We lose more a week to someone in need. The rewards are outstanding! Our sacrifices do not rob us of life for any length of time they would have to instead look within to examine our core belief of indebtedness. We would thus address the source of the debt rampages and begin to heal our belief in paying blood for what would otherwise come to us by grace.

The Mayans have been in the headlines for the past few years, and will be increasingly spotlighted because their calendar ends in 2012, which has created a lot of hoopla as the supposed end of the world. Not exactly. It’s not the world that will end, but the old world, which, as far as I can see, wasn’t working very well anyway. Even unto the 21st century the belief in psychic self-mutilation still rules the masses. Would it be wonderful if 2012 marked the end of the world of sacrifice? If so, bring it on!

Life takes no joy at your loss; to the contrary, a part of the heart of God cries when you do. If you and I could suspend our belief that death keeps the sun rising, we might find that our blood serves far better in our veins than spilled. Then we shall erect new temples where we deliver to its altar the fruits of our joy, not our tears.

Dr. Marlo Archer is the author of many popular inspirational books, including the metaphysical thriller, Linden’s Last Life. Listen to Dr. Marlo’s weekly radio show Get Real on Hay House Radio at www.hayhouseradio.com, and join him for Life Coach Training beginning in September. For more information about Alan’s books, programs, or his free daily inspirational quotes via email, visit www.alancohen.com, email info@alancohen.com, or phone 1-800-569-3079.

The End of Sacrifice

“Our sacrifices do not rob us of life in one dramatic moment, as the Mayans experienced, but they rob us of life a little bit more each day.”

The assertion that you do not owe is a radical one in a society where debt is one of our most predominant and pressing themes. The jaw-dropping volume of personal and national debt reflects an underlying belief that we must lose in order to get. Rather than working harder to pay off our debts (meaning accumulating more), we might do well to instead look within to examine our core belief of indebtedness. We would thus address the source of the debt rampages and begin to heal our belief in paying blood for what would otherwise come to us by grace.

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MARCH EVENTS


MARCH 4—through APRIL 8—American Hospital Association Lecture and Hope of Arizona are offering a FREE 4-week Bereavement Education and Support Program starting from 6:00pm—7:30pm. Meetings at Thompson Funeral Chapel, 926 S. Litchfield Rd., Goodyear, AZ. Program benefits, gaining perspective and understanding of the grief experience in a safe, comfortable environment surrounded by others who are facing similar challenges. Learn valuable coping techniques. Space is limited, RSVP required. Contact Robin Cohen 602-778-1313, email robin.cohen@americanhospital.com or www.americanhospital.com.

MARCH 18—7:00 p.m.—Changing Hands Books store 4208 S. McClintock Drive, Tempe, 480-720-3005. Lisa Epstein, author of Sealing Above Addiction, will share her family’s story of addiction and recovery. Discussion will include the steps that helped her family heal.

MARCH 21—7:00-8:30 p.m. FREE LECTURE SERIES: The Meadows present—“Coming Out of Shame: Issues Faced by the GLBT Population” with Arnold Lopez, MSW. March 21, 2011.

MARCH 22—12:00 noon—3:00 p.m. Earn 1.5 CEUs with lunch. “Where Recovery Becomes Reality” Five-day retreat designed especially to meet the needs of families impacted by addictions, psychiatric disorders, anger & rage, and trauma. Facilitated by Cottonwood staff. Visit www.cottonwoodtucson.com or call Jana at 520-743-2141 or email jzeff@cottonwoodtucson.com for information and registration.

MARCH 22—1:00-2:00 p.m. Teen support group, activities night open to all teens ages 12 to 21. 480-921-4050 or email zeebies@msn.com. Gilbert location. Incest Survivors Anonymous I.S.A. meeting in Phoenix—Freedom Hall (corner of 12th Street & Highland). Contact Gloria, 602-819-0410.

COTTONWOOD DE TUCSON: On going Alumni meetings: Every Wednesday at 6:30 p.m. 7219 E Shea Blvd, Scottsdale AZ 85260. Contact Sally Hicks 520-743-0411 ext. 2517 or email shicks@cottonwoodtucson.com

MARCH 25—Tucson—Cottonwood Tucson—InnerPath Beginnings & Beyond Retreat. Five-day intensive retreat tailored to meet the needs of those individuals who want to make healthy changes in their lives. Facilitated by Rokelle Lerner. Visit www.cottonwoodtucson.com or call Jana at 520-743-2141 or email jzeff@cottonwoodtucson.com for information and registration.

MARCH 25—1:00-2:00 p.m. Earn 1.5 CEUs with lunch. Aurora Behavioral Health System, Lunch & Lecture Series. “Sexual Addiction Overview.” Learn what sexual addiction is, current trends in behavior, different types of behavior system, how to look for, whether you should attempt to treat the compulsive behavior, or not. Anna Valenti-Anderson, LCSW, LISAC, CSAT 601 SW Peoria Ave. Contact: admin@aurorabehavioral.com.

Every Week—Tucson—Cottonwood Tucson—Workshop. Five-day workshop for families impacted by addiction, psychiatric disorders, anger & rage, and trauma. Facilitated by Cottonwood staff. Visit www.cottonwoodtucson.com or call Jana at 520-743-2141 or email jzeff@cottonwoodtucson.com for information and registration.

APRIL 11—Tucson—Cottonwood Tucson—InnerPath Woman’s Retreat. Five-day retreat has been designed especially to meet the needs of women who are re-evaluating their relationships, their priorities, and their sense of self. Facilitated by Rokelle Lerner. Visit www.cottonwoodtucson.com.

APRIL 9, 8:00-10:00 a.m.—Chandler Christian Church presents: Porn and Pancakes Men’s Breakfast—the greatest men’s breakfast on the planet. Porn and Pancakes is all about the conversation. The morning revolves around Pastor Jake Larson, co-founder of Fireproof Ministries. Great conversation about issues that are dominating our lives. Porn and Pancakes provides the next steps for you to walk away with hope to recover or help those struggling with porn addictions. The breakfast is open to all men and their sons 12 years or up. Cost to attend is $5 per person, $10 for fathers and sons. For more information on how to attend call 480-391-3997 x141 or jlarson@chandlerrc.org.

ON GOING SUPPORT

HAZELDEN’S Phoenix Alumni and Friends MONTHLY MEETING. First Wednesday of month. Best Western Papago Inn, Lloyd’s office, 7017 E McDowell Road, Scottsdale. 6:30pm format. Contact Lorenberg@aarinhc.org or farleyloyd@gmail.com.

PATHWAY presents CHOICES. Teen workshop/support group activities night open to all teens ages 12 to 21. 480-921-4050 or email zeebies@msn.com. Gilbert location.

IN THE MEADOWS Where Recovery Becomes Reality

C H R I S T M A S E V E N T S

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"Run a Mile, Stay a While", Kids Rock Stars Event at the Phoenix Zoo – March 5th

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- 7:30 am – 5th and 6th grade
- 7:45 am – 4th grade
- 8 am – 2nd and 3rd grade
- 8:15 am – Family run
- 8:30 am – Family fun

Interactive family activities include a hockey shootout with the Phoenix Coyotes, refreshments, face painting, and entertaining games. Each runner will receive a prize!

Registration costs are $20 for parents and one child ($25 savings from regular admission), $40 for parents and up to three children ($23 savings for family of 5 from regular admission). To register, visit www.phoenixzoo.com/kidsrockzoo.

Saurin Above from page 1

He finally pulled over to the side of the road and stopped. I overheard my car up in front of him, blocking him from taking off again. My adrenaline had taken over and at that moment I felt invincible. I am not a big woman by any means. I am 5’3” and about 120 pounds, but that didn’t stop me from walking up to the side of his car to confront him.

His window was down, allowing me to get a good look at him. His skin was shiny with perspiration, his head was shaved bald, and his impressively muscular arms were covered in tattoos. Fortunately, I would be intimidated by somebody like this, but I felt no fear. I was surprised by my own aggressiveness.

"Don’t you ever come around Dean or my home again, do you understand me?" I stated in the strongest voice I could force out.

"I don’t know what you’re talking about," he replied. As I looked into his eyes I could sense that he was nervous. I’m sure this was the first time he ever had a crazed wife chase after him.

"Oh, I know who you are. You’re the one who’s been taking all of the money that I work so hard for. I have a son to worry about, and if I ever find out that my husband gives you another cent, you’ll be sorry," I threatened.

I went on to say that his hands up and his palms facing toward me. "I don’t want any trouble from you. I don’t know what you think is going on, but you don’t have to worry about me."

"I know exactly what’s going on. I’m just warning you to stay away from my husband."

"Alright, no problem," he responded.

With that, I turned around and got back into my car. As I pulled away, I pushed the gas pedal to the floorboard, causing my tires to spin and kick gravel up at the Cadillacs. For a brief moment I felt powerful. I was proud of myself for standing up to this seemingly tough man.

Are you an Advocate for Recovery?

Faces & Voices of Recovery is bringing together and mobilizing tens of thousands of people to advocate on behalf of all Americans affected by addiction. Access to treatment, affordable care and long-term recovery are important to the recovery community.

The recovery community is organizing around key priorities—to gain needed resources and to end discrimination against people in or seeking long-term recovery.

The recovery community is organizing around key priorities—to gain needed resources and to end discrimination against people in or seeking long-term recovery.

What Can You Do?

There are many ways that you can take action and be a face and a voice for recovery.

1. **Speak out** as a person in long-term recovery or as a family member. Use our Recovery Messaging or Power of Our Stories video to practice ways of talking about recovery and that it’s meant to guide you. Use our Advocacy with Anonymity brochure to learn how to tell your story without violating the traditions if you are in recovery using a 12-step program. Share your story with friends, neighbors, co-workers and policymakers.

2. **Educate yourself** on addiction, recovery and the issues that are important to the recovery community. We have advocacy tools for you to use for specific campaigns like sample letters, booklets or call Barbara Nicholson-Brown at 602-684-1136.

3. **Educate your community**. We have advocacy tools for you to use for specific campaigns like sample letters, booklets or call Barbara Nicholson-Brown at 602-684-1136.

4. **Educate your community**. We have advocacy tools for you to use for specific campaigns like sample letters, booklets or call Barbara Nicholson-Brown at 602-684-1136.

5. **Join your local, regional or state-wide recovery community organization.** Coming together with others to speak with one voice as an organized constituency increases the effectiveness of your advocacy voice. If there isn’t an organized recovery community organization where you live, we can help you get one started!

6. **Stay in touch with recovery advocates** in your regional through Faces & Voices’ recovery regional listservs. There’s a lot going on around the country and you can learn from one another about new strategies and campaigns to get the word out about actions to take to support long-term recovery.


In Arizona, consider being part of the Arizona Recovery Expo at the Phoenix Convention Center on September 24th. The Expo is one of the largest recovery events in the state. For details visit www.artofrecoveryexpo.com or call Barbara Nicholson-Brown at 602-684-1136.
The 5-Step Integrative approach to Addiction Treatment

To minimize relapses and assist doctors treat the approximately 23.5 million Americans struggling with substance abuse (SAMHSA), Journey Healing Centers Medical Director, Dr. Ravi Chandiramani, releases a unique holistic approach to addiction treatment that can increase recovery success stories and long-term sobriety. Because most medical doctors receive only a few hours of training in these areas, this 5-Step Plan can provide guidance for the addiction community.

Dr. Chandiramani is the only naturopathic physician in the country serving as Medical Director of fully licensed residential drug and alcohol treatment facilities.

This holistic healing program combines conventional medical therapies with lifestyle counseling. This integrative approach is designed to reduce prescription drug use and abuse that impacts more than 50 million Americans (CBS Evening News Report) and focuses on the mind, body, and soil.

A recent CASA (Center on Addiction and Substance Abuse at Columbia University) study revealed that out of 979 doctors, only about 40% received a few hours of training total on prescription drug abuse and addiction in medical school. Most medical practices for addiction treatment are learned on-the-job, in medical school. Most medical practices for addiction treatment are learned on-the-job, in medical school. Most medical practices for addiction treatment are learned on-the-job, in medical school. Most medical practices for addiction treatment are learned on-the-job, in medical school.

In medical school, the thinking around food is among the profound changes made by the recover.

Identify and Treat the Causes — Focus on overall health, wellness and disease prevention versus only the drug or alcohol addiction. Addiction is often only one of many issues the individual faces. Family history and individual goals assist in directing the intermediate and long-term plan to keep that individual sober along with assisting the individual to live a healthy life.

To provide continued support for clients after treatment, Journey Healing Centers also provides Free Aftercare for Life.

Journey Healing Centers operates drug and alcohol rehabilitation centers in Arizona, Utah, and has been featured on MTV’s Gone Too Far, PBS, ABC News 15 Phoenix, Fox 10 Phoenix, ABC 4 Salt Lake City, Army Assistant, NPR on, USA Today, com, Psychology Today and in People Magazine. Journey Healing Centers has supported thousands dealing with addictions through Residential Programs, Intensive Outpatient Programs (IOP), Sober Living, Hires, Aftercare, Sobriety for Life Program and a Free 24-Hour Hotline with Addiction Specialist, www.journeyhealingcenters.com.


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- Homeopathic Remedy: $60
- Herbal Remedy: $60

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News from page 3

Investigators led by Jeremy Luk, a Ph.D. candidate in child psychology at the University of Washington in Seattle, examined cross-sectional data from the 2005-2006 National Survey of Children's Health (NSCH) to examine whether bullying in children and adolescents was linked to bullying in both boys and girls. It also increased the risk for substance use in girls.

"There is a serious problem among adolescents," said Luk. "Previous research has shown that it is associated with loneliness, depression, and suicide. But no previous national studies have identified depression as an explanation for the relationship between victimization from bullying and substance use." If your daughter is a victim of bullying, take it seriously, do all possible to prevent recurrence, and attend to possible depression and substance use, he concluded. The article was published in the December 2010 issue of the journal Prevention Science.

Homeless Outreach Program sends plea to community for cold weather supplies for homeless

Southwest Behavioral Health’s Homeless Outreach, a program to help homeless individuals with mental illness, is requesting donations of cold weather supplies. SBH’s Homeless Outreach is not a traditional shelter or food bank but is a mobile program that delivers mental health resources along with weather-appropriate supplies to the homeless. The program provides blankets, socks, sweaters, shorts, sweatshirts, thermal underwear, and hygiene kits to socks and bottled water.

Donations can be dropped off at the front office of Southwest Behavioral Health, 3450 N. Thad St. in downtown Phoenix, 602-265-8338, or to the Homeless Outreach offices at the Lodestar Day Resource Center, 7 a.m. to 4 p.m., Monday through Friday, 125 W. Jackson, Ste. #448, Phoenix, (602) 391-9930 ext. 3444.

Studies: E-Cigarettes may be effective at helping smokers quit

A new research study from Boston University suggests electronic cigarettes (e-cigarettes) are effective at helping smokers quit. Nearly 67 percent of the respondents reported that they had cut down on cigarettes six months after beginning use of e-cigarettes, 14 percent said they were not using e-cigarettes or other cessation aids that contained nicotine. Other research has shown that around 32 to 18 percent of people who used nicotine patches and nicotine gum report abstinence at six months—nearly half the rate of those who used e-cigarettes in this survey.

“This study suggests that electronic cigarettes are helping thousands of ex-smokers remain off cigarettes,” Siegel said.

The authors of the study acknowledged that the study’s conclusions were limited by the low response rate, pointing out that smokers who had quit or cut down on smoking might be more likely to respond. However, they said it was the best evidence to date on the effectiveness of e-cigarettes, and that the devices “hold promise as a smoking-cessation method and that they are worthy of further study using more rigorous research designs.”

TIME said that at least one earlier study had concluded that e-cigarettes were ineffective at helping smokers quit. Several states are considering prohibiting their use.

“Banishing this product would invariably result in many ex-smokers returning to cigarette smoking,” Siegel said. “Removing electronic cigarettes from the market would substantially harm the public’s health.”

Meanwhile, a second study of e-cigarettes from the John Hopkins Bloomberg School of Public Health reviewed internet searches for smoking alternatives between January and September 2010 and found that e-cigarettes had become far more popular than other options, at least in the United States and the U.K.

“Neither of these two studies provides scientific evidence that e-cigarettes are effective in helping people to quit,” said professor John Pierce of the Moores Cancer Center at the University of California, San Diego. “It’s not clear to me that e-cigarettes aren’t harmful in some way. It’s not clear to the FDA, either.”

Both studies appeared online Feb. 8, 2011 in the American Journal of Preventive Medicine The Boston University study, led by Michael B. Siegel, was titled, “Electronic Cigarettes As A Smoking-Cessation Tool: Results from an Online Survey” (PDF).

The study on the popularity of e-cigarettes conducted by John W. Ayers and his team, was titled, “Tracking the Rise in Popularity of Electronic Nicotine Delivery Systems (Electronic Cigarettes) Using Search Query Surveillance” (PDF).
PILLS–Anonymous—Tues. 7:00 p.m., Glendale Community Church of the Nazarene, 2100 N. 97th Ave. Tuesdays 7:00 p.m. Men. Open Discussion. St. Matthew United Methodist Church, 2540 W. Baseline Road, Tuesdays 7:00 p.m. Men and women dealing with chemical or sexual addictions, co-dependency and other hurts. Hang-ups and Halts. 1825 S. Alma School Rd. Chandler 480-963-2900 Pastor Barry Daily email larrydaily@chandler.org.

CELEBRATE RECOVERY—Chandler Christian Church. Weekly Friday meetings 7 p.m. Room B-206 for men and women dealing with chemical or sexual addictions, co-dependency and other hurts. Hang-ups and Halts. 1825 S. Alma School Rd. Chandler 480-963-2900 Pastor Barry Daily email larrydaily@chandler.org.

Depression/Bipolar Support Alliance peer support groups. 480-593-4630.

GA meeting Sunday night. ACT Counseling & Education. 501 E. She Dr. 202, 6:30 to 9:00. Details call 602-519-4285.


CELEBRATE RECOVERY—City of Glendale pain center, 6535 E. University Dr. 6:00-10:00 p.m. Chapel Blvd 7, City of Grapevine pain center, 9640 N. 19th Ave. Tuesdays 6:30-10:00 p.m. Linda Rinzel 484-464-3916.


Tempe Valley Hope Alumni Support Groups, Thursdays 6:30-7:00 p.m. 2115 E. Southern Ave. Phoenix, Tuesdays 8:30 p.m. 1223 W. Peoria Ave. Suite 203, Open to anyone in recovery.

Special Needs AA Meetings. Contact Cynthia SNAC Coordinator 480-946-1384, email Mike at mnhsc@mac.com.

North Phoenix Visions of Hope center—Recovery center for survivors of incest, located in Flagstaff, 15044 N. Care Center Rd. 42, Phoenix 602-404-1555

Survivors of Incest Anonymous. 12-step recovery group for survivors. Tucson Survivor Meetings: Sundays 6:00 to 7:30p. St. Francis in the Foothills, 4625 E. River Road (west of Swan). Carlos 520-881-3400

OVEREATERS Anonymous—Teen Meeting, Saturdays 9:00 a.m. to 12:30 p.m. 11000 N. 19th Ave, Phoenix 602-601-4144

CLUTTERERS Anonymous—Thurs. 6:30 p.m. North Hills Church, 15016 N. 19th Ave, Phoenix 602-601-4144

SLAA—Sex and Love Addict匿名ous 46th St. 6800 N. 24th Ave. Phoenix 602-601-4144


GAM-ANON, Sun. 7:30 p.m. Desert Cross Lutheran Church, 860 S. McClintock Dr. Tempe. 7:30 p.m., Cross in the Desert Church, 1283 N. 32nd St. Phoenix, Tues 7:00 p.m. First Christian Church, 6750 N. 7th Ave., Phoenix, Tues 7:15 p.m. Desert Cross collects items needed for the Mission Building 8600 S. McClintock, Tempe. Thurs. 7:30 p.m.

DEBTORS Anonymous—Mon., 7-8:00 p.m. St. Philip’s Church, 4440 N. Campbell Ave., Palo Verde Room Thurs. 6:00-7:00 p.m. University Medical Center 1361 N. Campbell. 520-570-7799, www.aztobr.org.

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What is Self-Realization?

To understand what Self-Realization is, it’s essential, of course, to understand what the Self truly is that’s being realized in the first place. It might seem that it would be your individual personality—even though it’s unique—but it’s not. While personalities are largely intact throughout life, they still change, to some extent. And change is the operative word here, because your higher Self is changeless.

Self-Realization is also Self-actualization, as it’s discussed in Humanistic Psychology circles. Humanistic Psychologist Carl Rogers defined self-actualization as “the creative force in psychotherapy—man’s tendency to actualize himself, to become his potentialities—“to express and activate all the possibilities of the organism.”

The psychologist Abraham Maslow, another of the great Humanistic Psychologists, defined it as “the full realization of one’s own potential.” He also referred to it as “the desire to become all that one can be.”

This tendency might seem that it would be your individual personality, but it’s not. While personalities are largely intact throughout life, they still change, to some extent. And change is the operative word here, because your higher Self is changeless.

When you connect with this higher Self on a regular basis, your changing personality becomes infused with this non-changing essence, and you live 24/7 in the non-changing peace of your non-changing higher Self—and it’s your very Being itself—and it’s outside of the field of time and change, in the field of timelessness. It’s outside of the field of doing, it’s outside of the field of speaking, and it’s outside the field of thinking.

The great Persian poet Rumi says it far more beautifully than I have when he wrote:

“Out beyond ideas of wrong-doing, and right-doing there is a field. I’ll meet you there. When the soul lies down in that grass the world is too full to talk about.”

March 2011 www.togetheraz.com
Helping Families Find The Courage To Recover

Recovery from chemical dependency is a process that no one can achieve alone. Seabrook House helps individuals and their families reclaim their lives in a safe, healing environment. Founded by Jerry and Peg Diehl in 1974, Seabrook House is licensed and CARF-accredited to provide a range of programs, including specialized opioid detox.

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Tsunami from page 5

Teens also appear to be lacking traditional social skill development due to excessive exposure to technology. With so much impersonal and static social interaction in today's culture, many modern youth are not learning the social cues critical to interpersonal and relational communication. They are not developing the skills to know how to decode over time the subtleties of socializing and face-to-face interactions, like how to know when someone likes them. Social markers are not being put together in a succinct way. Courtship is being replaced with text. A smiley face or LOL at the end of a text or email is different than seeing people's actual smiles or hearing their actual laughs. Hence we are witnessing the beginnings of a socially backwards generation. The parental barrier is being circumvented via the teen creating an entire world of their own. In their bedroom the teen may have access to their laptop and/or desktop equipped with a webcam and all the critical features for social networking. Teens are usually connected to multiple social networking sites and spending multiple hours a week interacting on them. The teen also has their cell phone with its capacity to "stay connected" to all their "friends" via Facebook, hundreds, even thousands, of texts per month. All of this physical isolation and distraction due to technologically based social networking is undoubtedly coming at a cost.

What do we do about it?

Parents and therapists must become educators and prevention strategy specialists for instructing teens regarding technology issues and cybersex problems. Counseling professionals have encouraged parents to learn online terminology and establish accounts for the most popular social networking venues used by teens to better understand them and to monitor and manage teen internet and technology use around sexuality and pornography. As a culture, though, Americans don't do that good a job of talking to their kids about sex. With the average age of first pornography exposure being 7-13 years old, parents must be challenged to start early with their children. It is well known that by the time kids reach their teens their arousal templates have significant development and already possess some deeply entrenched beliefs and habits regarding their sexuality. However, many parents feel that if they bring up sexual topics they may be encouraging the child to engage in premature sexual experimentation. But offering information about sexuality isn't the same as encouraging early sexual behaviors.

For Every Parent

Though many parents are intimidated by technology and the Internet, every parent needs to be active in educating and monitoring their children around sexuality and technology. Studies show that parenting style is related to teen Internet behavior and that an authoritative parenting style, where limits are set with input from the teenager, has been associated with more responsible teen sexual behavior, less sexual experience, and would help ensure adolescent safety on the Internet and with technology.

Now more than ever, it is imperative we have those conversations with our children while they are still in their youth. As we have all seen, by the time kids reach their teens their arousal templates have significant inertia and they already possess some deeply entrenched beliefs and habits with regards to their sexuality. It is important for parents to not only discuss relevant topics about Internet and technology use but to create modeling opportunities for their children to watch parents engage in critical decision-making and specific behavior skills while online. When parents provide accurate information to their children and monitor them they help set values for sexuality and overall responsible decision-making regarding technology. It is important to note teens are generally the best source of keeping parents updated about the Internet and technology so keeping an open dialog with teens is to any parent's advantage, even if it is awkward or embarrassing.

TERROS helps people recover from substance abuse, mental illness and other behavioral health problems. We provide a wide range of services throughout Maricopa County, including outpatient treatment, mobile crisis intervention, substance abuse and HIV/AIDS prevention, and specialized services to assist persons who have a serious mental illness.

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