

# Together AZ

SEPTEMBER 2019

Inspiring Success on the Road to Recovery

## Finding Purpose through the Ashes

**Y**ou may not know him by name, but you know of his story. Out of the 20 Prescott, Arizona's Granite Mountain Hotshots, Brendan McDonough's life was spared. That fateful summer day in 2013 still can bring haunting memories for Brendan. Ones fraught with depression, despair, post-traumatic stress disorder and one all-encompassing thought: **Why me?**

After the unfathomable loss of his brothers battling the fire, McDonough suffered from seemingly insurmountable bouts of depression and Post-Traumatic Stress. But the light of hope that inspired him to keep living in one of his darkest moments — his daughter who needed him — inspired the firefighter to fight on against depression and inspire others to find their best selves. McDonough's courage to find support at his weakest has inspired others to find their own tribes of support. Building a sense of brotherhood within communities gives McDonough great joy — because it helps this fighter honor the legacy of his 19 lost, but not forgotten, brothers.

When it comes to digging deep in recovery, in work, as a family man, and in faith, Brendan McDonough is living proof that Breaking Down Barriers

leads to success in recovery.

Before becoming a Hotshot, Brendan already had overcome incredible barriers by recovering from a crippling heroin and alcohol addiction, with his then-unborn daughter as inspiration. Staying off of drugs after the emotional trauma of losing his brothers was yet another seemingly insurmountable barrier.

Instead of ultimately succumbing, he faced his addiction and behavioral triggers with grace, and continues to walk a meaningful journey with the memory of his fallen Hotshot brothers compelling him forward. And moreover, believing there to be a powerful reason his life was saved.

Today, Brendan's growing family can be proud of their father, who walks in service of others as they encounter sobriety one day at a time. At CARE, you'll hear how he threads these incredible lessons into the fabric of his life, his work, his family, and most importantly, his faith in his higher power. You won't want to miss Brendan's story first hand.

*Tell us about your life growing up and at what age did you start using drugs (and) drinking?*

I was born in southern California, my mother was a single mom when I



**Brendan McDonough**  
Keynote Speaker at CARE

was two, and didn't meet my father until later in life. My mother and I moved just about every year all around Southern California. I first used marijuana around the age of 12 and started drinking shortly after. I grew up in and out of church, but the relationship with Christ never stuck for me until I was older. I quickly tried to fill the void in my life with drugs and alcohol. My behavior progressed in high school with different party drugs leading to pills and heroin after I had graduated high school.

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*You not only had struggles with addiction, but also trauma, grief and PTSD after the fire. Was there a single moment you when realized you had to get help?*

There were many moments that I knew I needed help, but my brothers had just died, and their families had lost everything, I thought to myself "who I am to complain or be in pain?" I tried to be tough and suck it up, I was a Hotshot, a firefighter, and the "man up" mentality was instilled for generations before me. I honestly thought I was dying because I had no clue what PTSD was. I would get blood work done to make sure I wasn't sick or to ensure something wasn't severely off with my physical health. I would have my doctor check me out and tell me my physical health was fine and that I should probably see a counselor... I would laugh. I spent many nights drinking, sleepless, haunted by nightmares, suicidal, depressed and suffering from PTSD. It wasn't until a little over a year after a national memorial service at a bar in Maryland that my lifeline had walked in.

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## *How We Use Psychodrama in Resolving the Past* **The Grief of the Inner Child**

©Tian Dayton, PhD, TEP

*(Partially excerpted from The Soulful Journey of Recovery, November 2019)*

**O**ne of the problematic issues for adult children is that some if not much of their mourning dates from a time and place in their childhood. Many of them feel too old to let themselves exhibit the kind of grief they actually feel. Some have parents who are now sober with whom they have vastly improved relationships. They don't want to jeopardize their relationship today by releasing their pain, but it still needs to be felt and processed because they still carry it and perhaps live it out. So an adult child might find themselves in a bind. While finally getting what they always wanted, a sober parent and a comfortable relationship with them, the child inside may still be in pain; they may still need to cry and get angry.

The ACoA loves their now-sober parent, and their now-sober parent likely wants to forget about all of those terrible years, at least the half they don't remember anyway. They want to make their amends and have it over with. But for the ACoA, it is far from over, and now they are faced with the complicated task of loving their sober parent while still needing to confront the parent they grew up with. They need to grieve that parent, to get angry at that parent, to call that parent onto the carpet, and tell them how much they have been hurt by them. But

they're afraid to because they got what they always wanted, which is a sober parent. And they, too, want to forget; they don't want to rock the boat.

However, out of sight is not out of mind. The average ACoA will need to grieve these losses to get over them. It becomes important for these adult children to actually speak from the role of their inner child to the parent they had then. Role play makes this very efficient, clear, and healing.

One of the things I try to teach clients how to do is to allow the child or wounded part within them to talk to their "inner adult" before blurring out all of their feelings to the world and then being disappointed that the world

**GRIEF of INNER CHILD** continued page 5







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## Publisher's Note

By Barbara Nicholson-Brown

### My Best Thinking

**"Problems cannot be solved with the same mind-set that created them."** *Albert Einstein*

I heard the quote above when I began my recovery journey, and those words speak volumes.

My best thinking worked something like this:

- "I want to go out tonight; maybe if I eat something first I won't get so drunk."
- "I'm REALLY going to pace myself; I'll have water in between the vodkas."
- "I won't stay out late, then I won't get too loaded."
- "I'll have a few drinks at home, then I won't drink so much at the bar."

I spent hours trying to figure out a formula that would work for me, and nothing did.

There were so many empty promises made to myself, family and friends. My actions and antics were no longer funny or to be taken lightly. As my alcoholism progressed, it took less and less to get me drunk — there were times I was blacked out after one drink. I could not imagine how that was happening. My clever mind told me, "take a day off here and there, wait till it gets it out of your system." That never worked either. None of it does if you're an alcoholic.

As I was closing in on approaching my bottom, alcohol was no longer working for me — not the way it had. I needed it as much as I needed air to breathe. Instead of socializing with others, I was hiding in my clothes closet with a wine bottle or two, alone and pathetic. I passed out many a night, and when the booze wore off wondering how I got in there. That's where my best thinking got me.

"Everyone else is wrong, what I was doing wasn't so bad, I wasn't hurting anyone, and I'll stop tomorrow." My best thinking. Those were the lies I told myself over and over and over again.

I am grateful I live sober today. I was given an opportunity to start over with a fresh slate. All I had to do was ... 1.) Not pick up a drink or drug for 24 hours at a time, 2.) Listen and keep my mouth shut, 3.) Do the work required to amend the past and take it a day at a time, 4.) Ask for help, 5.) Find a power greater than myself, 6.) Become Willing, Honest and Humble.

Slowly my life began to piece itself together, and as I 'came to' from addiction —I came to believe.

*Celebrate Recovery Month* with us at **CARE**, see page 9.

*Barbara*

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# *Real Connection = Fearful or Fantastic!*

By Dr. Dina Evan

**S**uperficial sucks, at least in my world. It's painful and so odd to me to want to be deeply connected to the people I care about and watch any of them run for cover. Don't talk about that. Don't mention this. It is what it is... almost as if landmines were buried beneath truth and being real. In reality what stays hidden is more apt to bite us in the butt in some way we won't like. What is it we are so afraid of?

## *Loneliness, failure...death?*

We are going to experience all of that, along with everyone else, and a meaningful conversation could eliminate much what we fear. Maybe we think we can't change anything, so why talk about it. Or, perhaps we never got the tools in our families of origin. Maybe that's why this is so painful for me. It's an extension of the disconnect I felt as a child and not at all what I expected to experience as an adult.

In my world, connections that are real are holy moments. That precious instant when I get to show you who I am and embrace the truth of who you are...nothing hidden or held back. There is a sacred gift in the center of that connection, and for me it's also a mirror reflection of the connection I feel with Spirit. My heart says don't miss the gift of this person sitting across from you. He or she is here to teach you something, or you are here with a gift to offer. And when we are fully present with all our little or large blemishes, we give permission for the other person to be fully human and not perfect as well. No one is perfect...but oh how we try to pull off the illusion that we are.

Can you imagine a day when we meet each other with, "Hi I am Dina and I am broken how about you? Every challenge I ever had to meet in my life I had to meet alone. So now people think I can still do it all on my own. I want to learn how to change that. Would you be willing to help me?"

And you hear a response that goes like, "Oh gosh yes, I am broken too, I never feel like I am enough so I am always trying to prove I am worthy of love. Are you open to helping me with that one?" And I would say, "Absolutely so here we go, I get to love you and you may not do a single thing for me in order to try to deserve that...deal?" Imagine having that contact with someone who makes the commitment to wake up with you...what a gift.

Here is the truth. You are my teacher and I am yours and this planet and this life is a school and we are missing the gift when we stay superficial with each other. Everyone in our life is here to help us discover the truth of who we are spiritually and emotionally. We cannot know who we are without an other to reflect that back to us. So in essence, everyone in our life is our teacher, even without a single spoken word, because what we feel and think is a direct reflection of how far along our soul work is and what we still need to work on. If we are awake enough to embrace that, it makes this incarnation and this experience on earth very exciting.

So here are some tools for you brave souls who crave going deeper.

- *Look for the ways your partner or friend is unique and comment on how much you appreciate that in him or her.*
- *Call it when you feel either one of you is checked out and talk about what took you away from being present.*
- *Get involved with some activity that asks you to grow and learn, i.e. a book club, a meeting where people go deeper, a creative activity, something you have some fear about doing or have been afraid to do.*
- *Get involved taking care of someone you never thought you'd find yourself caring for. If you are afraid of aging find an elderly person to help. If you are afraid of being sick, find someone who is sick to read to or connect with.*

I am sure you get the point by now. Do something different that pushes your soul forward. Trust me, it's a habit you want to cultivate that will bring you great joy.



Dr. Dina is a Marriage, Family, and Child Therapist and Consciousness Counselor. She has presented nationwide seminars and workshops, written several books and created meditation CDs for couples, individual and mental health professionals. She has also won national acclaim as a human rights advocate. Visit [www.drdinaevan.com](http://www.drdinaevan.com) or call her at 602 571-8228.

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## **Recognized for Excellence Continuum Recovery Center Achieves ACHC Accreditation**

Continuum Recovery Center is excited to announce they were awarded accreditation through the Accreditation Commission for Health Care (ACHC) for Intensive Outpatient Programs (IOP), Outpatient Programs (OP), Partial Hospitalization Services (PHS), and Medication Assisted Treatment (MAT).

### **What does this mean?**

When considering outpatient treatment options for yourself or a loved one, you can trust that Continuum is here for you, delivering only the very highest standards of holistic drug and alcohol treatment and other related services, tailored to support the whole individual in body, mind, and spirit.

Accreditation is a process through which healthcare organizations demonstrate compliance with national standards.

Accreditation by ACHC reflects Continuum Recovery Center's dedication and commitment to meeting standards that enable the very best level of performance and patient care.

"This ACHC accreditation is testament to our mission of providing the very highest caliber of patient care," said Liz Martin, COO of Continuum Recovery Center. "We're thrilled with the recognition for our safe, respectful, and caring environment to those struggling with addiction."

If substance abuse or mental challenges are standing in the way of feeling great and living the life you want, consider speaking with one of our treatment advisors and learn more about how Continuum can support you with our individualized, integrative recovery programs.

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doesn't hear, care, or listen. It is our job to hear ourselves as adults, to be our own good parent, to listen to all that the various parts of ourselves are trying to say to us. Then, to help find the right words for the right feeling so that we have a chance to communicate our feelings with some level of awareness, compassion, and emotional intelligence. When we can do this, we have a pretty good shot at being understood. And when we can listen as someone else attempts to do the same with us, we have the basis for intimacy and success in relationships, whether with friends or in the workplace.

Naturally, we'll have our angry outbursts, our tears, frustrations, and momentary wobbles, but they need to be temporary; we need to find our way back to forgiveness, understanding, and communication.

It is such a shame that we avoid grief because, truthfully, it's the fastest way through what blocks our joy.

And when I say fast, I mean it; if you really let yourself feel pain, you will cry, get angry, feel tossed around, dis-equilibrated a bit and also freed up, relieved, and even exhilarated. And all of this can happen in twenty minutes. It comes in waves. Don't resist it, don't get stuck in it, and you'll see great results.

Hidden and Disenfranchised Losses

Some losses like death are clear. Society recognizes them as significant, and we have rituals of mourning them. We feel free to ask for support, and more often, support comes our way without our even having to ask. But the kinds of losses that surround relational trauma and addiction are not necessarily acknowledged, and they do not necessarily get grieved. Because of this, they often remain what is referred to as "disenfranchised." Disenfranchised losses can lack visibility and clarity. They are split out of consciousness and often remain unseen or misread by others and even by ourselves.

There can even be confusion as to exactly who or what has been lost or whether there is a loss at all.

However, not only do these losses exist, the very fact that they remain buried and unrecognized can create blocks in our process of grieving and recovery. These sorts of losses need our compassion and care. Grieving these kinds of losses can bring about change on the inside that leads to change on the outside.

Some examples of disenfranchised losses are:

- Loss of a connection to self, due to trauma
- The grief of the inner child who lives inside of the adult
- For the addict, the loss of potential or a part of their life
- For the ACoA, the loss of a sober parent or a period of unencumbered childhood
- For the ACoA, the loss of a functional family
- For the spouse of an addict, the loss of a trusted and dependable partner
- Divorce abandonment/visitation changes related to divorce
- Socially stigmatized deaths (AIDS, suicide, murder, DUI, overdose, death)
- Adoption either being adopted or placing a child up for adoption, adoptive

- parents whose child seeks a biological family
- Death of a pet
- Miscarriage, infertility
- Disabling conditions, health issues
- Moving to a new home, job loss, retirement
- Mental illness or cognitive deficit

Concretizing and processing these losses can be what allows us to move on and grow, to free ourselves of haunting shadows. When we deal with a loss, it can trigger recollections or bring up other losses; this is part of what complicates mourning.

I use experiential forms of therapy to concretize, understand, and mourn these kinds of losses and to allow other losses that get "remembered" to emerge and be seen and worked through, too. Through psychodrama, the actual loss we're dealing with can be concretized by putting it into a role or several roles. A part of the self, a time of life, a person, or even a substance can be represented by an empty chair. We can talk to it and reverse roles and talk as it; we can have a spontaneous and honest interchange that connects us to our feelings or parts of ourselves we feel out of touch with. Journaling or letter writing are also good ways to process feelings of sadness and anger and loss; just pour

them out onto the page and let them flow. Mourning a loss of a connection to self or someone significant, to the sober parent, to a period of life, to family addiction and dysfunction is as crucial as mourning a loss to death. Processing these losses experientially provides an alternative form of ritual for the kinds of losses that all too often go unrecognized and unacknowledged. People often feel alone in grieving this kind of loss, but being with a small group of individuals as you are at Mending Heartwounds who are also looking at and dealing with them, can give a sense of permission and freedom in facing them. And concretizing can give them a sense of being real.

Getting Loose of Trauma Bonds: Separating Past from Present

We move through the world in the present but carrying the past. To relieve ourselves of the weight of unfelt, unprocessed emotion, our inner world needs to be somehow made manifest. It needs to come out, and psychodrama makes that very easy because it allows for the full and if desired, cathartic expression of whatever emotions are in there. It lets us express our sadness or anger to the actual person toward whom we feel it through role players. It can be so unsatisfying, to say nothing of detrimental, to express historical pain that is tied to our drunk mother when we were thirteen, or even now, today, as a forty-year-old to that same mother who may be sober. They may have forgotten about what we're talking about or may not want to hear it. But role play allows those historical periods of our lives to come alive for a moment, and we can go full throttle into them. The satisfaction, the release, and freedom can be profound. Because we're reinhabiting that thirteen-year-old and letting her or him speak to the right person at the right time through surrogates. The thirteen-year-old can talk, through using role players, to the parent they had then, the one that hurt them. We can leave the relationship with the mother we have today out of it and address historical issues on the therapeutic stage. It's so much truer and curiously feels more real and is certainly creates less wear and tear on the relationship today that may be working well. Resolving past pain doesn't mean that we no longer remember what happened; it's that in making it conscious it changes in the way that it sits inside of us.

This is the work of recovery.



Dr. Dayton is a Senior Fellow at The Meadows. She is the author of fifteen books including Neuropsychodrama, The ACoA Trauma Syndrome, Emotional Sobriety, Trauma and Addiction, Forgiving and Moving On and The Living Stage. She has developed an approach for incorporating experiential work into treatment programs and group work, Relationship Trauma Repair RTR.

Tian Dayton has a masters in educational psychology and a PhD in clinical psychology and is a board certified trainer in psychodrama, sociometry and group psychotherapy. Dr. Dayton is the director of The New York Psychodrama Training Institute.

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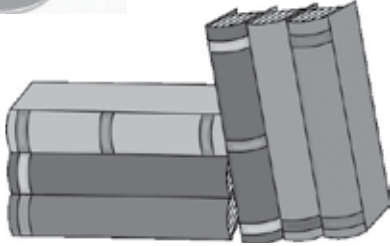
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## Just for Teens



There are many teens who think drinking is considered cool. How can teens turn down a drink when everyone else seems to be doing it?

Teen years can be difficult as there are so many issues associated with growing up. Issues include learning to separate from parents, relationships with peers, school, extracurricular activities, dating, sexual pressures, and pressure to drink and drug. As alcohol is the most commonly used substance for adolescents and teens, looking for ways to refuse drinking is important.

### Best ways to avoid drinking

- Hang out with friends who don't drink
- Leave the situation when drinking starts
- **Refuse the alcohol – no excuses needed.** If your friends are true friends, they will respect your boundaries. They may test you for awhile, but will give up if you continue to say no.

### Reasons not to drink

- Your parents will ground you forever
- Your parents smell your breath or will give you a breathalyzer when you get home

- Drinking is against your own beliefs and values
- You're worried about legal charges such as a minor in possession charge or drunk-driving charge
- You are on medication that makes drinking impossible
- Your privileges at home will be denied such as being banned from using the car or no use of your phone
- You don't like the taste of alcohol
- There is alcoholism in the family
- You're allergic to alcohol (including gluten)
- Your religious/spiritual beliefs do not support drinking
- Your family upbringing is one of no alcohol use and you honor this
- You're on a sports team and can't drink
- You are focusing on school and getting into a good college
- You are afraid of doing stupid things when you drink
- You believe in a healthy lifestyle which includes no alcohol
- Resist the pressure to drink and you will avoid dangerous and unhealthy situations.

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#### FINDING PURPOSE from page 1

That day it was not shots but glasses of whiskey. I had heard their names enough, the bell ringing and the bag pipes haunting me. A counselor who had traveled with us (*the 19 families, fire service members and I*) came up to me at the bar and asked me "How are you doing?"

I thought to myself for a split second should I give her the B.S. answer or the real one. I told her the real answer. The previous week I had a gun to my head, and wanted to end it all. I told her that if I had to live the rest of my life living like this, I couldn't do it. She just listened and asked me if I wanted to get help. I told her if you can find someone to help me, I will trust you and I will go. She told me it was going to be hard and a lot of work. I thought being a Hotshot with 16-hour plus shifts for weeks at a time was tough until I walked into counseling to face my demons, what haunted me at night, and the men I missed so deeply. Nine months after intensive counseling I walked out a changed man, not perfect — but a man of peace, understanding and hope.

***What advice can you give parents if they notice signs pointing towards addiction in their children?***

Educate yourself, reach out for help and don't be ashamed. The disease of addiction is deadly and complex, as well is trauma and other mental health struggles. Reach out for help, you willingly go to a mechanic for your car, a plumber for your pipes, and a doctor for a broken leg. For addiction and mental health you need to go see a professional. I am on a personal mission to break the stigmas associated with addiction so that people can come forward and respectfully get the help so many of us need.

***How do you maintain your sobriety today?***

I maintain my sobriety most importantly by having a relationship with God, taking care of myself, my family, focusing on my purpose and being of service. I have no shame in saying Jesus Christ saved my life and has made me whole again.

***Talk about your passion for recovery and trauma work.***

My passion for recovery and trauma work led me to open Holdfast Recovery Center. It is my true purpose and I am completely honored to be able to walk along side those who struggle with addiction, PTSD, and mental health problems. I know what I was willing to sacrifice as a firefighter for my community and those in need — and I know that I am still willing to sacrifice it today. Not many people will go to the lengths myself and our team are willing to go to help others, it's in my blood and instilled in my life and our program at Holdfast Recovery. Myself and our entire team of professionals at Holdfast are committed to serve and love others and provide them the help they need.

***Do you have an advantage when helping people with shared experiences?***

I have had a lot of different trials and tribulations in my life, or as I like to call them "Scars" as have many of our staff at Holdfast Recovery. We not only have sympathy for those struggling but have true empathy as well. I've abused drugs and alcohol, come from a broken family, been through trauma, lost brothers in a fire and to the disease of addiction. I have had tremendous amounts of experiences in my life and a lot more yet to live. I plan on using those experiences, good and bad to serve and share with others. "Holdfast, Stay True"! <https://holdfastrecovery.com>

For more information on CARE, visit [celebratetheartofrecovery.org](http://celebratetheartofrecovery.org).



National Recovery Month, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), is a national observance held every September to educate Americans that substance use treatment and mental health services can enable those with mental and substance use disorders to live healthy and rewarding lives. This observance celebrates the millions of Americans who are in recovery from mental and substance use disorders, reminding us that treatment is effective and that people can and do recover. It also serves to help reduce the stigma and misconceptions that cloud public understanding of mental and substance use disorders, potentially discouraging others from seeking help.

Now in its 30th year, Recovery Month celebrates the gains made by those in recovery, just as we celebrate improvements made by those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease.

Each September, tens of thousands of prevention, treatment, and recovery programs and facilities around the country celebrate Recovery Month.

Recovery Month also highlights the achievements of individuals who have reclaimed their lives in long-term recovery and honors the treatment and recovery service providers who make recovery possible. Recovery Month also promotes the message that recovery in all of its forms is possible and encourages citizens to take action to help expand and improve the availability of effective prevention, treatment, and recovery services for those in need.

The 2019 Recovery Month theme, "Join the Voices for Recovery: Together We Are Stronger," emphasizes the need to share resources and build networks across the country to support recovery.

#### Arizona Celebrates at CARE - Celebrate the Art of Recovery Expo

For the past 14 years, Recovery Month is celebrated at the Celebrate the Art of Recovery Expo. The mission is to raise awareness about mental and substance use disorders to our community and provide a day of resources to save lives. Though the sharing of stories of recovery, and encouragement others who are still in need of services and support can get inspired. CARE (Celebrate the Art of Recovery Expo) is presented by CBI. Inc. Admission is FREE and everyone is welcome to participate.

#### FOR INFO:

[www.celebratetheartofrecovery.org](http://www.celebratetheartofrecovery.org)

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**KEYNOTE SPEAKER, BRENDAN MCDONOUGH**  
**Addiction & Mental Health Advocate**

*Lone Survivor of Yarnell Hill Wildfire*

Brendan McDonough is living proof that Breaking Down Barriers leads to success in recovery. He knows it is possible to live happy, joyous, and free! He gets real and raw when sharing his own story in recovery and how that fateful summer night in 2013 changed the whole trajectory of his life. Despite all Brendan's trials and tribulations, he is passionate about being an advocate and empowering individuals through their recovery journey.

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## What is Family Therapy for Addiction & How Can It Help MY Family?

By Molly Bobek, LCSW, and Aaron Hogue, PhD, Center on Addiction

You’ve heard of counseling, or psychotherapy, to help someone with an addiction. Family Therapy is just that, except the one going to therapy is not just the individual struggling, but the entire family.

The goal of family therapy is to bring clarity to all relationships, and foster repair and closeness. Many family therapists believe problems exist between people, not within people.

A family therapist explores with the family how substance use is embedded in a cycle of interaction within the family. Many young adults and parents are in what we call a fugitive/detective dynamic. The more a young adult acts like a fugitive (hiding, lying) the more a parent acts like a detective (snooping, chasing) — and visa versa. Family therapists can provide additional education about substance use for the whole family and support family members in reducing their unhelpful behaviors and increasing their effective behaviors.

### **Family therapists help identify new skills and then coach family members in the practice of these new skills.**

Anxiety, anger, frustration and a deep worry often interfere with parents renovating their approach to family life. Family therapists can also put the substance use in a different context by addressing other challenges and highlighting other resiliencies in the family — for example, understanding what is working in the teen’s life, or asking, *“If we weren’t here to talk about this person’s substance use, what would we be talking about as a family?”*

Many research projects demonstrate Family Therapy is very helpful, although there are time-based and/or economic barriers as to why it’s often not offered, implemented or practical. In our work we’ve been engaged in a research project attempting to distill the core elements of family therapy from evidence-based therapies, and have identified four of the most important components of these family therapy models: **Family Engagement, Relational Reframing, Family Behavior Change, and Family Restructuring.**

### **Family Engagement**

Family Engagement, is enhancing family members’ involvement and investment in the therapy of the young adult who is struggling is key.

For a parent who feels reluctant to engage in therapy, a therapist might share something like: “You and I together are trying to help her not go under. This isn’t going to be easy, but I’m going to push you to hear her point of view and you’re not always going to agree. I’m going to help her bring things to you, and to help you hear her.”

For a teen who is feeling unsure about the value of family therapy, a therapist might share something like: “Your mom seems upset about your grades dropping. That’s important and we will spend time talking about it, but I’m just as interested in hearing how you feel things are going for you. I want therapy to be a place where you can talk about what you think is going well, going not so well, and what you would like to be different.” Family Engagement interventions typically take place during the initial phase of treatment, though investment and goal setting are continually revisited.

### **Relational Reframing**

Relational Reframing, consists of interventions designed to move away from individual ways of defining problems and generating solutions, toward an understanding focused on relationships. These interventions also aim to remove

irrational descriptions and attributions for family members’ behaviors, and instead focus on understanding motivations for behavior based on those relationships.

A family therapist may expand a description of a parent from someone who is critical and judgmental to one who is simply worried by sharing, “I take it that when you are yelling at your daughter about her coming home late, you are actually worried about her safety and well-being, rather than just being angry with her.”

A family therapist may also want to transform an understanding of a teen’s substance use from one that blames them to one that’s a more meaningful understanding of their problem by saying something like, “I wonder if because of what has happened in the past, everyone in this family is a little bit anxious, and everyone has different ways of dealing with that anxiety, and a lot of the ways aren’t really working for you. Maybe you are using substances and staying in your room a lot, but I bet you’re all feeling pretty scared.”

### **Family Behavior Change**

Family Behavior Change, aims to shift the behavior of family members. These interventions aim to teach concrete new skills and encourage individual behavior changes that will allow for improved family relationships. New skills that a family therapist might teach a family could include assertive communication skills, enforcing limits, negotiation of rules and boundaries, expressing feelings more effectively, and others.

### **Family Restructuring**

The fourth element, Family Restructuring, aims to change the way the family system is governed; that is, to shift underlying beliefs, premises and family rules.

There may be a trend in the family that when someone is upset, they don’t talk about it and are meant to handle it alone. Therapy helps the family become aware of this premise, and might introduce new beliefs about the value in speaking with each other about difficult feelings.

Even without formal family therapy, parents can begin to think about how they can be resources for their teen, and how relationships could shift in their families to better support a teen who is struggling with substance use. Parents should be curious about their son or daughter and his/her life in a non-judgmental manner.

- **What is your child thinking and feeling?**
- **What is your child hopeful about or worried about?**
- **What does your child think is good about using drugs?**
- **Is there anything your child worries about related to drugs, or about risks of the behavior?**
- **What does your child believe that you do not properly understand or value?**

Engaging in these conversations can be very difficult, so parents shouldn’t be afraid to seek support on their own to do so, or be discouraged if it at first it doesn’t feel successful when they aim to engage in a more skillful conversation with their teen.

The relationship with your child is the most important thing to attend to — don’t lose sight of this core value when you’re legitimately concerned about your son or daughter’s substance use. Stay focused on the positive relationship and your lifelong bond with them, and offer compassion and love. It is truly the most important thing and has the biggest positive influence on their behavior.



# The First Step to Lasting Change

by Olivia Pennelle

Lasting change is what recovery is all about. Quitting alcohol, or your the drug of choice, is only the first step in the needed transformation that will make recovery work now and in the future. In recovery, we talk about the “isms,” the reasons why we drank or used drugs. Some people believe that if you don’t deal with the crux of your disease — or the “ism” — then you will return to use.

## What are the “isms”

As an acronym, “ism” stands for: “I, self, me,” or “I sponsor myself,” or “Internal Spiritual Malady.” The implication being that the recovering person is self-centered, self-absorbed, and maladjusted. Within this philosophy, this catch-all phrase describes the experiences everyone encounters in this life: anxiety, depression, fear, loneliness, feeling inadequate in some way – but without the anesthesia of drugs and alcohol to quell the pain. It also describes certain childish behavior like:

- *Blaming others*
- *An inability to deal with conflict*
- *Having poor boundaries*
- *A tendency to treat other substances, or people, the same way as drugs and alcohol.*

For example, some people believe that developing a problem with gambling, or getting involved in dysfunctional relationships, is an “ism.”

## Lasting change also means addressing our traumas

To some extent, I agree that we need to get to the heart of why we were harming ourselves in way that led to substance use disorder. There was nothing healthy about drowning myself in four bottles of wine a day. The core of why I used alcohol and drugs in that way was that I had:

- *(Undiagnosed) Complex PTSD*
- *Depression*
- *Anxiety, and*
- *Few coping skills for life.*

However, I don’t believe these are “isms,” a spiritual malady, or even flaws of my character. Many of us in recovery have been deeply traumatized by something preceding our addiction or during it. Many of us lacked nurture and emotional support in our childhood. Almost all of us have an inability to cope with stress, and while we were using we didn’t fully develop emotionally. So, it’s only natural that when we recover, we discover more about ourselves that we need to nurture.

## Lasting change occurs when you can regulate your feelings

Recovery has been about recovering my capacity to self-regulate and manage stress. I’ve also learned a host of other lessons around having healthy relationships, setting and maintaining boundaries, learning how to live a healthy life, and how to parent myself. If I focused on the problems that led to these lessons:

- *Having unhealthy relationships*
- *Forming insecure attachments*
- *Seeking to escape through romantic relationships*
- *Overeating*
- *Under-eating*
- *Exercising*
- *Being depressed*

...then I’d have a mindset that I’m broken and defective. I simply don’t see it that way.

## Why we need new life skills

The way I see recovery is that I needed to stop my harmful behavior, and I needed to grow up. I had to learn how to cope with life as a sober person. I needed to develop enough skills and purpose in life to make sure that my life was bigger than the desire to use drugs and alcohol.

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## Why Growing Up In Recovery Is Necessary

When we are acting out with people, or even with food, our body and minds are telling us something is missing. I dealt with incredible loneliness by developing strong social supports and deepening a spiritual practice. My hunger was a message for irregularities in my body that I needed to see a doctor for, and also to feed my mind and spirit.

It’s taken me over six and a half years to get to a place where I see recovery as a process of rebuilding and relearning. No longer do I punish myself for being defective. Instead, I learned to sit with myself quietly and ask what I really need. That isn’t uncovering “isms.” It’s simply self-compassion and growth.

(SOURCE: Reach Out Recovery)

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# The Music Man: Fake it till you make it

The Tony- and Oscar-award-winning Meredith Wilson show, *The Music Man* tells a remarkable story about the transformation of a con man into a true miracle-creating hero. The fraud is one Harold Hill —a pseudonym to hide his bilking of people in other early 20th century Midwestern towns — who claims to be a professor of music but is really nothing other than a professor of lying and cheating, scheming and scamming.

The story takes place in fictional River City, Iowa, where said “professor” embarks on an elaborate con game.

He somehow frightens the townsfolk into thinking they have a serious juvenile delinquent problem — there is nothing but a new pool table installed in the billiard parlor (“Trouble”) — but that’s enough for him to arouse fear in them that can be cured through the development of a boys’ marching band.

And what band doesn’t need expensive uniforms, instruments, and instruction books, which he’ll happily supply despite knowing next to nothing about music.

He hoodwinks just about everyone in town — he tells them, after all, that he’s a graduate of the Gary Conservatory of Music (“Gary, Indiana”) almost causing the mayor to sign up his son until he realizes that he has no son. Such is the power of his persuasive skills.

Hill also inspires His Honor’s wife to form a dance troupe as a way to double his reach. His plan to spread music throughout River City is to woo the local music teacher; but there’s a hitch, as she’s also the librarian, and is highly skeptical of his fast-talking spiels. There’s another hitch that develops that the con man never in a million years could have anticipated—he finds himself falling in love with her, and contemplating getting hitched.

But soon con man turns into a man who can actually inspire genuine confidence. Marian’s very young brother — devastated by their father’s death two years before, resulting in depression and a serious speech defect — has enthusiasm awakened in him to play the cornet in his brand new uniform. And he manages to speak without his

embarrassing lisp when both arrive (“Wells Fargo Wagon”). The con man has become something of a miracle worker.

Knowing next to nothing about music, Hill can’t be bothered to learn how to teach it, except to use the “think system,” which enables anyone to play a melody simply by thinking about it—or so he claims. While the “method” is nothing more than sheer blarney, it does help Barney and other boys actually play something vaguely similar to the Beethoven Minuet in G that their leader has had them practice. The concept that thinking about something can actually make it manifest illustrates the power of Creative Thought that energy flows where attention goes. Although, the show’s creator Meredith Wilson didn’t actually preach this point, there is truth to it, and apparently it does work to some degree.

In time, the town learns that Hill is a complete fraud, courtesy of the testimony of a traveling salesman who has seen the con man’s schemes bilk one town after another. The folks in River City want to tar and feather Hill, but it’s the shy librarian who actually comes to his defense — mostly because she has somehow fallen in love with him, even though she knows that he’s a thief. Love, in Broadway and Hollywood musicals, can be blind. She also helps her neighbors realize that this con man has actually helped transform the town — boys are playing less pool and playing more music. She has fallen in love, as has he, and he mans up and admits his larceny.

If composer/lyricist Meredith Wilson had co-authored the book not with Franklin Lacey but with Aesop, the famous Greek fable writer, he might have left us with a lesson from this musical fable. It might just have been that we can fake it till we make it. (The same theme is found in My Fair Lady where Professor Higgins teaches an uneducated flower seller how to become elegant by faking the speech and behavior of refined women.) That a con man can inspire confidence and even miracles, and love can turn even the worst crook into an honest romantic. [www.carybayer.com](http://www.carybayer.com)

DID YOU KNOW?

Each year, 4,358 young people die in alcohol-related deaths as a result of underage drinking (car crashes, homicides, alcohol poisoning, falls, burns, drowning and suicides). *Source: CDC Center for Disease Control*

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## Risk Factors and Warning Signs

### What leads to suicide?

There’s no single cause for suicide. Suicide most often occurs when stressors and health issues converge to create an experience of hopelessness and despair. Depression is the most common condition associated with suicide, and it is often undiagnosed or untreated. Conditions like depression, anxiety and substance problems, especially when unaddressed, increase risk for suicide. Yet it’s important to note that most people who actively manage their mental health conditions go on to engage in life.

#### Suicide Warning Signs

Something to look out for when concerned that a person may be suicidal is a change in behavior or the presence of entirely new behaviors. This is of sharpest concern if the new or changed behavior is related to a painful event, loss, or change. Most people who take their lives exhibit one or more warning signs, either through what they say or what they do.

Talk	Behavior	Mood
<i>If a person talks about:</i>  Killing themselves Feeling hopeless Having no reason to live Being a burden to others Feeling trapped Unbearable pain	<i>Behaviors that may signal risk, especially if related to a painful event, loss or change:</i>  Increased use of alcohol or drugs Looking for a way to end their lives, such as searching online for methods Withdrawing from activities Isolating from family and friends Sleeping too much or too little Visiting or calling people to say goodbye Giving away prized possessions Aggression Fatigue	<i>People considering suicide often display one or more of the following moods:</i>  Depression Anxiety Loss of interest Irritability Humiliation/Shame Agitation/Anger Relief Sudden Improvement

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Nothing will change out there, in the world, until we change in here, inside each of us. We need to stop waiting for someone else to fix the world for us. We need to step into being the masters we came here to be. Every conscious decision you make is a world event within and that is why now more than ever it’s time to stop playing small and remember who you are and why you are here.

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# Events & Support Groups

**SEPT. 17- PCS Professional Networking Lunch-** 3302 N. Miller Road, Scottsdale. RSVP to pcs@pcsearle.com.

**SEPT. 28- 14th Annual Celebrate the Art of Recovery Expo- Phoenix Convention Center.** FREE TO THE PUBLIC. Visit [www.celebratetheartofrecovery.org](http://www.celebratetheartofrecovery.org) for details. *A day of resources for saving lives.*

**OCT. 7—6:00 - 7:30 p.m. “Safety Fair” by Metro Block Watch** — Free event open to the public covering numerous aspects of “safety.” Some of the confirmed community information table hosts include the American Red Cross, Dave Munsey, FEMA, Phoenix Fire & Police Departments, Sgt. McGruff the Crime Dog. Terrace Ballroom of the “DoubleTree by Hilton”, 10220 N. Metro Parkway East next to MetroCenter Mall. Email: [metroblockwatch.safetyfair@gmail.com](mailto:metroblockwatch.safetyfair@gmail.com). <https://m.facebook.com/metroneighborhood/>

**Rising Phoenix Wellness Services—** MARA (Medication-Assisted Recovery Anonymous) group. Tues 5:30-6:30 pm, 7807 E. Greenway Rd. Suite #5, Scottsdale, **480-427-2290**

**LGBTQ - IOP Program.** Specialty program designed to meet the mental health and substance abuse, treatment needs of the LGBTQ+ population. Mon., Tues., Thurs. 6:00-9:00 p.m. Transportation available. **602-952-3939/602-952-3907.** **Valley Hospital**, 3550 E. Pinchot Ave. Phoenix. [valleyhospital-phoenix.com](http://valleyhospital-phoenix.com)

**DOORWAYS—** Outpatient mental health treatment center providing individual counseling and psychiatric services for teens, young adults ages 13-25 and their families. Groups provided exclusively for 13-18 year old's - Skills groups (DBT 101 and De-Stress) 1x per week, along with 4 Intensive Outpatient Programs (IOP's) 3x per week - Anxiety IOP, DBT IOP, Eating Disorder IOP and Substance Use IOP. **602.997.2880** or [info@doorwaysarizona.com](mailto:info@doorwaysarizona.com).

**SIERRA TUCSON—** Alumni Group. Scottsdale, Tues., 6:00- 7:00 p.m. Valley Presbyterian Church. 6947 E. Mc-Donald Drive, Paradise Valley. 480-991-4267. Counseling Center (Parlor Room). Rob L. **602-339-4244/** [stscottsdalealumni@gmail.com](mailto:stscottsdalealumni@gmail.com).

**SIERRA TUCSON—** Continuing Care Groups—Phoenix. Thurs. —Resident Alumni. PCS, 3302 N. Miller, Scottsdale. 5:30—7:00 p.m. email: [Courtney.Martinez@SierraTucson.com](mailto:Courtney.Martinez@SierraTucson.com).

**FAMILY RECOVERY GROUP—** Facilitator, Brough Stewart, LPC. 5:30-7:30 p.m. Designed to help begin/continue family recovery. **Meadows Outpatient Center**, 19120 N. Pima Rd., Ste. 125, Scottsdale. **602-740-8403**

**TUCSON SLAA—Sex and Love Addicts Anonymous (S.L.A.A.)** University Medical Center - Dining Room “E” - Sunday 10:00am Step Meeting, St. Phillip’s Church - La Parroquia - Mesquite Room Monday 6:00pm Book/The Journal Meeting, Streams in the Desert Lutheran Church - 5360 E Pima St. (West of Craycroft, South side of Pima ) Meeting

Room A, Wednesday 6:30pm Women’s Meeting, St. Phillip’s Church La Parroquia - Mesquite Wednesday 7:00pm Men’s Meeting, Our Savior’s Lutheran Church - East Activity Building, enter from north parking lot off Mabel St. Friday 6:00pm Discussion Meeting. Call **520-261-SLAA(7522)** Email [tucsonslaa@gmail.com](mailto:tucsonslaa@gmail.com). [www.tucsonslaa.org](http://www.tucsonslaa.org)

**PAL (Parents of Addicted Loved Ones)** Phoenix -Teen Challenge, 1515 Grand Ave, Phoenix, Thurs. 6:30-8p.m. 480-745-6978 or [weeksfamily7@gmail.com](mailto:weeksfamily7@gmail.com). Scottsdale, Soul Surgery Addiction & Medical Center, 14362 N. Frank Lloyd Wright Blvd., Suite B113, Scottsdale. Mondays 6:00—7:30 p.m., Rebecca 480-458-8080 /[ra@reagan.com](mailto:ra@reagan.com)

**VALLEY HOSPITAL—**IOP for Chemical Dependency/Co-Occuring. Mon., Tues., Thurs. 6:00-9:00 p.m. **602-952-3939**. 3550 E. Pinchot Ave., Phoenix. [valley-hospital-phoenix.com](http://valley-hospital-phoenix.com)

**Open Hearts Counseling Services** Women’s Group for Partners of Sex Addicts. Comfort, strength and hope while exploring intimacy issues. Cynthia A. Criss, LPC, CSAT 602-677-3557.

**FAMILIES ANONYMOUS—** 12 step program for family members of addicts. Scottsdale Sun. 4:00 p.m., 10427 N. Scottsdale Rd., N. Scottsdale Fellowship 480-225-1555 /602-647-5800

**NICOTINE ANONYMOUS—** Phoenix Sat., 5-6:00 p.m. Our Saviour’s Lutheran Church, 1212 E. Glendale Ave., Glendale, Sun., 9:15-10:15 a.m. Fellowship Hall, 8910 N. 43rd Ave. 480-990-3860 or [www.nicotine-anonymous.org](http://www.nicotine-anonymous.org)

**CHRONIC PAIN SUFFERERS** —“Harvesting Support for Chronic Pain,” 3rd Sat. of month, 12-1:00 p.m. Harvest of Tempe, 710 W. Elliot Rd., Suite 103, Tempe. 480-246-7029.

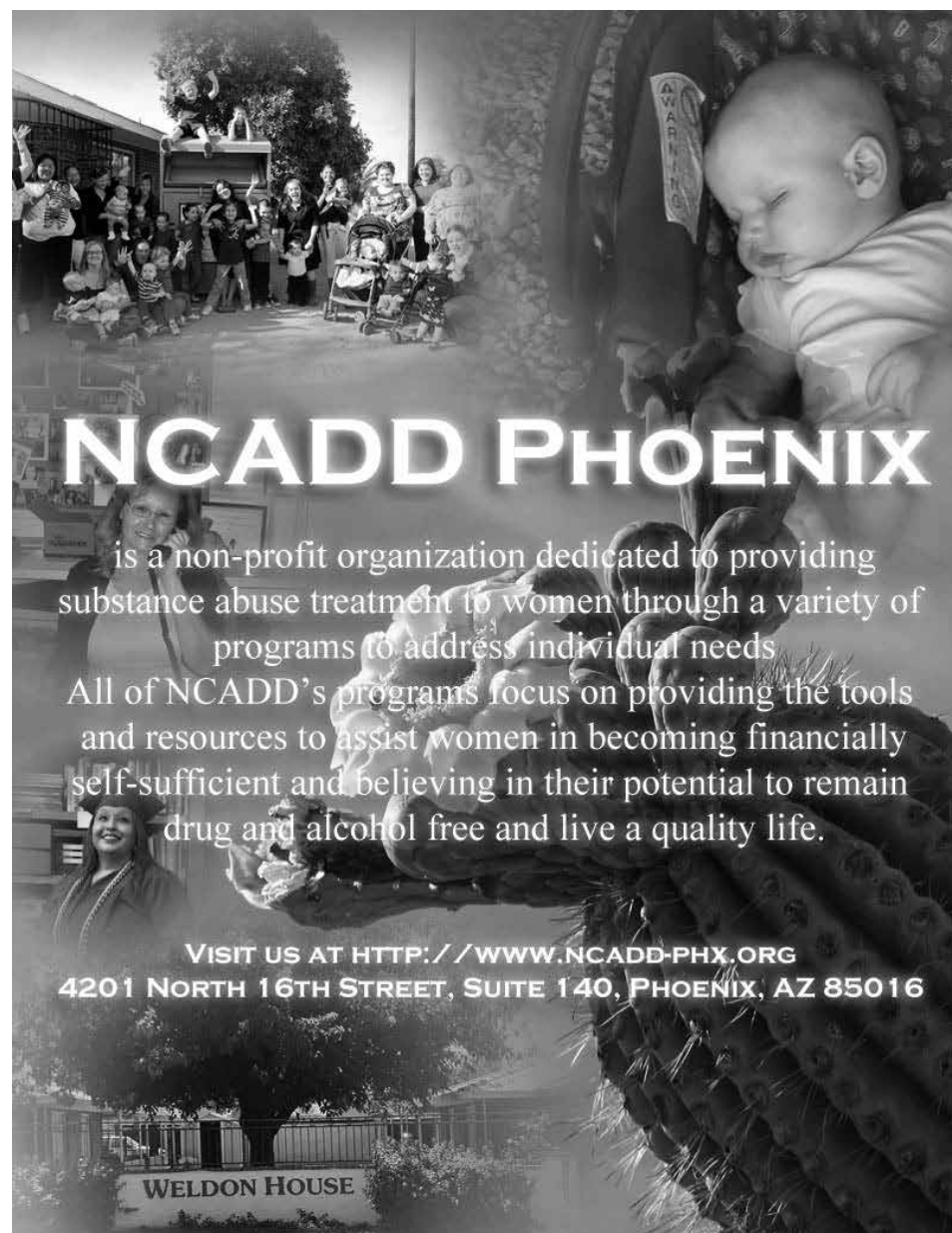
**Jewish Alcoholics, Addicts, Families, Friends.** 1st / 3rd Wed., 7:30 p.m. Ina Levine Jewish Community Campus, 2nd floor. 12701 N. Scottsdale Rd. **602-971-1234 ext. 280**.

**COSA** (12-step recovery program for those whose lives have been affected by another person’s compulsive sexual behavior) Thurs. 11:00 a.m. 2210 W. Southern Ave. Mesa. **602-793-4120**.

**LIVING GRACE SUPPORT GROUP—** Christ centered approach for individuals and families affected by mental illness. Oasis Community Church, 15014 N. 56th St. Scottsdale. 602-494-9557. 2nd & 4th Tuesday 6-8 p.m.

**WOMEN for SOBRIETY** —womenforso-briety.org. Sat. 10-11:30 a.m. All Saints of the Desert Episcopal Church-9502 W. Hutton Drive. Sun City. Christy 602-316-5136.

**CO-ANON FAMILY SUPPORT—** Message of hope and personal recovery to family and friends of someone who is addicted to cocaine or other substances. “Off the Roller Coaster” Thurs., 6:30-7:45 p.m., 2121 S. Rural Rd., Tempe. Our



Lady of Mount Carmel Church. Donna 602-697-9550 /Maggie 480-567-8002.

**ACOA** Thurs., 7:00 p.m., North Scottsdale United Methodist Church, 11735 N. Scottsdale Rd., Scottsdale. [www.aca.arizona.org](http://www.aca.arizona.org)

**ACA.** Tucson. Wed. 5:30-7:00 p.m. Streams In the Desert Church 5360 E. Pima Street. West of Craycroft, Tucson. Room A. Michael 520-419-6723.

**OA—** 12 Step program for addictions to food, food behaviors. 520-733-0880 or [www.oasouthernaz.org](http://www.oasouthernaz.org).

**PILLS ANONYMOUS—** Glendale, Tues. 7-8:00 pm. HealthSouth Rehab 13460 N. 67th Ave. Rosalie 602-540-2540. Mesa Tues. 7-8:00 pm, St. Matthew United Methodist Church. 2540 W. Baseline. B-14. Jim, 480-813-3406. Meggan 480-603-8892. Scottsdale, Wed. 5:30-6:30 pm, N. Scottsdale Fellowship, 10427 N. Scottsdale Rd., Rm 3. Tom N. 602-290-0998. Phoenix, Thurs. 7-8:00 pm. First Mennonite Church 1612 W. Northern. Marc 623-217-9495, Pam 602-944-0834, Janice 602-909-8937.

**GA—** Christ the Redeemer Lutheran Church, 8801 N. 43rd Ave. Sunday, Spanish 7:00-9:00 p.m. Good Shepherd Lutheran Church, 3040 N 7th Ave. Sunday, English 6:00-8:00 p.m. 5010 E. Shea Blvd., Ste. D-202, Sue F. 602-349-0372

**SAA** — [www.saa-phoenix.org](http://www.saa-phoenix.org) 602-735-1681 or 520-745-0775.

**Valley Hope Alumni Support.** Thursdays 6-7:00 p.m., 2115 E. Southern Ave. Phoenix. Tues. 8-9:00 p.m., 3233 W. Peoria Ave. Ste. 203, Open.

**SPECIAL NEEDS** —AA Meetings. Cynthia SN/AC Coordinator 480-946-1384, E: Mike at [mphaes@mac.com](mailto:mphaes@mac.com)

**SLAA—** Sex and Love Addict Anonymous 602-337-7117. [slaa-arizona.org](http://slaa-arizona.org)

**GAM-ANON:** Sun. 7:30 p.m. Desert Cross Lutheran Church, 8600 S. McClintock, Tempe. Mon. 7:30 p.m., Cross

in the Desert Church, 12835 N. 32nd St., Phoenix, Tues. 7:00 p.m., First Christian Church, 6750 N. 7th Ave., Phoenix, Tues. 7:15 p.m. Desert Cross Lutheran Church, Education Building, 8600 S. McClintock, Tempe, Thurs. 7:30 p.m.

**DEBTORS ANONYMOUS—** Mon., 7-8:00 p.m., St. Phillip’s Church, 4440 N. Campbell Ave., Palo Verde Room. Thurs. 6-7:00 p.m., University Medical Center, 1501 N. Campbell. 520-570-7990, [www.arizonada.org](http://www.arizonada.org).

**EATING DISORDER SUPPORT GROUPS—** PHX— Monday 7:00 p.m. 2927 E. Campbell Dr. Ste. 104, (Mt. View Christian Church). Jen (602) 316-7799 or [edaphoenix@gmail.com](mailto:edaphoenix@gmail.com). Wed. 7:00 p.m. Liberation Center, 650 N. 6th Ave, Phoenix. (cross street McKinley). Jennifer (602) 316-7799. Tempe—Thursday 6:30 p.m. Big Book/5:30 - 6:30 p.m. Steps to the Solution. Mountain View Retirement Village, 7900 N. La Canada Drive, Tucson. [leeverholly@gmail.com](mailto:leeverholly@gmail.com). Thurs. 5:30 - 6:30 p.m. EDA Big Book Step Study. Mountain View Retirement Village, 7900 N. La Canada Drive, Tucson. (203) 592-7742 / [leeverholly@gmail.com](mailto:leeverholly@gmail.com). Wickenburg—Wed. 7:15 p.m. and Sunday 7:45 p.m. (N,D/SP,O,) Capri PHP program. (928) 684-9594 or (800) 845-2211. Yuma —Wed. @ 5:00 - 6:00 p.m. 3970 W. 24th St. Ste. 206 Yuma. Alyssa (928) 920-0008 or email [2014yumae.d.a@gmail.com](mailto:2014yumae.d.a@gmail.com).

**CRYSTAL METH ANONYMOUS** [www.cmaaz.org](http://www.cmaaz.org) or 602-235-0955. Tues. and Thurs. Stepping Stone Place, 1311 N. 14th St. Phoenix.

**GODDESSESS & KACHINAS** 12 step, 12 Tradition/12 Promises support group. 480-203-6518.

**AA,NA,CA,CMA,ACA, ALANON** - Would you like to start a meeting? The Northwest Alano Club would like to help. **Free rent and coffee for the first 4 meetings!** 3120 W. Curtis Rd. Tucson (520) 293-2929

**SEND EVENT OR SUPPORT GROUP INFO:**

**[barb@togetheraz.com](mailto:barb@togetheraz.com)**

**Deadline 20th of month prior to printing.**



# Together AZ

## Resources & Helplines

<b>TOGETHER AZ</b>	<b>602-684-1136</b>	<b>Therapists/Interventionists</b>
A Better Today	888-906-0952	Dr. Marlo Archer 480-705-5007
Acceptance Recovery Ctr	844-302-0440	Dr. Janice Blair 602-460-5464
ACT Counseling	602-569-4328	Carey Davidson 928-308-0831
Arizona Addiction	602-737-1619	Dr. Dina Evan 602-997-1200
AZ Center for Change	602-253-8488	Dr. Dan Glick 480-614-5622
AZ. Dept. of Health	602-364-2086	Bobbe McGinley 602-569-4328
Arizona Addiction Recovery	888-512-1705	Julian Pickens, EdD, LISAC 480-491-1554
AZ. Div. Problem Gambling		Stewart Counseling Services 602-316-3197
	800-NEXTSTEP	
Aurora Behavioral Health	877-870-7012	
AzRHA	602-421-8066	
Building Blocks	602-626-8112	
Calvary Healing Center	866-76-SOBER	
CBI, Inc.	480-831-7566	
CBI, Inc. Access to Care	877-931-9142	
Chandler Valley Hope	480-899-3335	
Choices Network	602-222-9444	
Continuum Recovery Ctr.	877-893-896	
Cohn Media	877-640-6529	
Cornerstone Healing Center	480-653-8618	
Cottonwood Tucson	800-877-4520	
Crisis Response Network	602-222-9444	
The Crossroads	602-279-2585	
Desert Drug Dog	602-908-2042	
First Step	866-832-6398	
Fit FOUR Recovery	480) 828-7867	
Gifts Anon	480-483-6006	
Governor's Office of Youth, Faith & Family		
	602-542-4043	
Hunkapi Programs	480- 393-0870	
Lafrontera -EMPACT	800-273-8255	
The Meadows	800-632-3697	
Meadows Ranch	866-390-5100	
Mercy Care	602-222-9444 /800-631-1314	
NCADD	602-264-6214	
PITCH 4 KIDZ	480-607-4472	
Psychological Counseling Services (PCS)		
	480-947-5739	
Recovery in Motion Treatment Center		
	520-975-2141	
Rio Retreat Center	800-244-4949	
River Source	480-827-0322	
Scottsdale Recovery Ctr	888-663.7847	
Sober Living AZ	602-737-2458	
Teen Challenge of AZ	800-346-7859	
TERROS	602-685-6000	
Valley Hospital	602-952-3939	
VIVRE	480- 389-4779	

### Legal Services

Dwane Cates 480-905-3117

### Real Estate

Scott Troyanos 602-376-6086

### TUCSON

ACA	aca-arizona.org
Alcoholics Anonymous	520-624-4183
Al-Anon	520-323-2229
Amity Foundation	520-749-5980
Anger Management	520-887-7079
Behavioral Awareness Center	520 629 9126
Center For Life Skills Development	520-229-6220
Co-Anon Family Groups	520-513-5028
Cocaine Anonymous	520-326-2211
Cottonwood Tucson	800-877-4520
Crisis Intervention	520-323-9373
Desert Star	520-638-6000
The Mark Youth & Family Care Campus	520-326-6182
Narcotics Anonymous	520-881-8381
Nicotine Anonymous	520-299-7057
Overeaters Anonymous	520-733-0880
Sex/Love Addicts Anonymous	520-792-6450
Sex Addicts Anonymous	520-745-0775
Sierra Tucson	800-842-4487
Sonora Behavioral Health	520-829-1012
Suicide Prevention	520-323-9372
Men's Teen Challenge	520-792-1790
Turn Your Life Around	520-887-2643
Workaholics Anonymous	520-403-3559

**Want to be a resource?**  
**Send your request by email to**  
**barb@togetheraz.com**

***If you or a loved one are facing a crisis, we encourage you to call for professional guidance. Every moment counts.***

Alcoholics Anonymous	602-264-1341
Al-Anon	602-249-1257
Adult Children of Alcoholics	aca-arizona.org
Arizona Addiction	602-737-1619
Bipolar Wellness	602-274-0068
Child Abuse Hotline – Support & Information	800-422-4453
Cocaine Anonymous	602-279-3838
Co-Anon	602-697-9550
CoDA	602-277-7991
COSA	480-385-8454
Crisis Help Line – For Any Kind of Crisis	800-233-4357
Crisis Text Line	Text HOME to 741741
Crystal Meth Anonymous	602-235-0955
Debtors Anonymous	(800) 421-2383
Domestic Violence	800-799-SAFE
Families Anonymous	602-647-5800
Gamblers Anonymous	602-266-9784
Grief Recovery	800-334-7606
Heroin Anonymous	602-870-3665
Marijuana Anonymous	800-766-6779
NDMDA Depression Hotline – Support Group	800-826-3632
Narcotics Anonymous/Phoenix	480-897-4636
Narcotics Anonymous/Casa Grande	520-426-0121
Narcotics Anonymous/Flagstaff	928-255-4655
Narcotics Anonymous/Prescott	928-458-7488
Narcotics Anonymous/Tucson	520-881-8381
Nar-Anon Family Groups	(800) 477-6291
National Youth Crisis Hotline	800-448-4663
NCADD	602-264-6214
Overeaters Anonymous	602-234-1195
PAL (Parents of Addicted Loved Ones)	480-300-4712
Parents Anonymous	602-248-0428
Phoenix Metro SAA	602-735-1681
RAINN (Rape, Abuse, Incest National Network)	RAINN.ORG
Rape Hotline (CASA)	602-241-9010
Sexaholics Anonymous	602-439-3000
Sexual Assault Hotline (24/7, English & Spanish)	800-223-5001
Sex/Love Addicts	602-337-7117
Sex/Love Addicts	520-792-6450
Sex Addicts Anonymous	602-735-1681
S-ANON	480-545-0520
Sober Living AZ	602-737-2458
Suicide Hotline	800-254-HELP
US Suicide Prevention Lifeline	800-273-8255

## Together AZ

**www.togetheraz.com**

**602-684-1136**

Email: **barb@togetheraz.com**

**Recovery Together Enterprises, LLC**

**10105 E. Via Linda, Suite A103-#387**

**Scottsdale, AZ 85258**

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<b>PHOENIX TEEN CHALLENGE</b> (Male 12+) 802-211-4084	<b>HOME OF HOPE</b> (Female 18+) Women or Women with Children Casa Grande, Arizona 520-830-5000	<b>SPRINGBOARD</b> Home for Adolescent Girls (Female 12-17) Tucson, Arizona 520-887-8773	<b>PREVENTION</b>  <b>Stay Sharp</b> THINK ABOUT IT! To schedule a Drug Prevention Presentation for your group or school, contact the Public Relations office at 802-211-4084
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# Can Teen Addiction be Predicted?

By Carol Anderson

## Who get addicted and who doesn't?

Teen addiction is fact of life for 15% of high schoolers, and it's important to take any teen use of alcohol and drugs very seriously. But not all experimentation ends in addiction. Many teens do not become addicted even if they have significantly experimented with chemical use. Here's five risk factors that greatly influence addiction.

## Teen Addiction Is Everywhere

Also, there is a pattern of use that may be seen in the teen/college years when teenagers may use fairly heavily but then "age out" of the use once he/she/they focus more on studies and adult behaviors such as relationships and a career. A significant number of teens will become addicted. NIDA (National Institute of Drug Abuse) estimates that 15 percent of teens are already addicted in high school. The problem is you don't know ahead of time whether your teen is one whose use will escalate, or one whose interest in getting high will fade. These five common factors influence addiction.

### 1. It's In The Family

Biological influences including genetics can play a part in teens' becoming addicted. For example, teenagers get addicted much quicker than adults. Their hormones are still developing; they haven't hit all of their biological developmental milestones. Women become addicted quicker than men also because of genetic differences. Having a family history of addiction can also significantly influence the chance of addiction. Further, if there is active and regular substance/marijuana/alcohol/tobacco use in the family, teens can mirror that behavior.

### 2. Social Learning Or Modeling

This influencing factor is especially seen within families where substance/alcohol use is normal. Social influences also include peers, sports groups, all kinds of social clubs, and social media that makes using seem exciting and fun and harmless. A very important negative modeling example is that of the glorifying of use through social media. If your child views using chemicals as normal or fun behavior, they think it's okay to drink or drug. If parents use alcohol responsibly and don't do other drugs, then young people can model healthy patterns even when they get outside messages that drinking is acceptable.

### 3. The Addictive Potential Of The Substance

We also need to understand the addictive potential of each drug itself. Two substances, nicotine and crack cocaine, have highly addictive properties. For example, how many social smokers (may smoke 1- 2 cigarettes and then not smoke again for weeks) do you know – exactly! There are few social smokers because of the addictiveness of the substance. This is the same for other highly addictive drugs and medication, including, marijuana, opiates, stimulants and alcohol (although alcohol dependences takes longer to develop).

### 4. Peer Pressure, Curiosity, Feeling "Grown Up"

As a parent, do not underestimate the influence of peer pressure as during the teen years, peers are exceptionally important. Most teens are curious about what drinking or drugging can do for them. Using can be a lot of fun especially when using with peers; consequences are irrelevant to the developing teenage brain. Also, many teens feel more "grown up" by using as this is an adult thing to do (especially with alcohol).

### 5. Life Stressors, Emotional Pain, Co-occurring Disorders, Trauma

This includes the very stress of just being a teenager, being a thrill seeker, along with other stressors such as anger, boredom, rebellion, low self-esteem, or loneliness and/or a co-occurring psychiatric illness such as:


- Depression
- Abuse/trauma history
- Anxiety
- Bipolar disorder

These conditions may also lead to using drugs and alcohol as a coping skill, self-soothing behavior, or self-medication. Some use the drugs or alcohol to help feel better because it numbs or distracts from the emotional pain. Others crave the instant gratification of good feelings and pleasure that some drugs deliver.

## Make A Prevention Plan

While there can be other influences, these five indicators of vulnerability to teen addiction are some of the most problematic. The problem becomes worse if the teen uses for a variety of these reasons. Don't be left behind. Continue to explore how these reasons may fit for your child and take precautions and discuss addictions with your child or teen. Be willing to look at your own behavior and see if there are negative behaviors that may influence your teen to use. What should you do if you think your kid is using. Finally, if you need help with your child, visit Recovery Guidance(<https://recoveryguidance.com/>) for a free and safe resource to find addiction and mental health professionals near you.


(Source: Reach Out Recovery)




# I HAVE [Set a Limit] POWER

Problem gambling is now recognized as a public health concern. Rates have nearly doubled in the past decade alone, with problem gambling growing fastest among young men. Being more likely to take risks and possessing lower impulse control, men are particularly vulnerable to becoming a problem gambler. If you feel you may be at risk—or know someone who is—please reach out.

**HELP IS HERE 24/7**

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1-800-NEXT-STEP [nextstep.az.gov](https://nextstep.az.gov)

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