TOBER 2019

Inspiring Success on the Road to Recovery

The Bridge Device

By Dan Stickland and Val Carver

s anyone who's been through withdrawal can attest, recovering from an opioid addiction is possible, but not necessarily easy. With relapse rates between 40 and 60 percent, it's clear we don't have all the answers for the best way to quit an addiction. But, we could be getting closer.

One possible answer is the NSS-2 Bridge, a unique medical device system developed by Innovative Health Solutions, designed to dramatically reduce opioid withdrawal symptoms. Resembling a hearing aid and worn behind the ear, the Bridge is being used by VA hospitals and addiction treatment centers like Continuum Recovery Center in Phoenix, AZ to help support patients in the very earliest stages of recovery from opioid withdrawal — a necessary first step to long-term recovery.

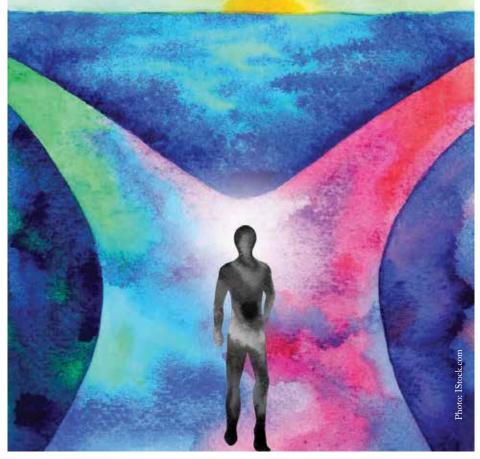
To understand how the Bridge device supports the opioid recovery process, we must first acknowledge the gaps in traditional opioid withdrawal.

Barriers to Conventional Opioid Withdrawal

One of the greatest barriers to opioid rehabilitation is the acute pain associated with discontinuation. The body and brain react to not having opioids in the system, creating intense levels of discomfort, craving, agitation and irritability. In a nutshell, these symptoms make the cycle of opioid addiction fiendishly difficult to break.

For a treatment center like Continuum Recovery Center, the goal of opioid withdrawal is to remove opioids

A Game Changer for Opioid Withdrawal and Treatment?



transition the patient to medication- unsuccessful in completing the process. assisted treatment, or MAT. The Some relapse right away. problem is that patients generally must endure substantial pain for a time without medication. Because this discomfort

from the body, manage symptoms, and is often debilitating, many patients are

The Bridge Supports Opioid Rehabilitation

The Bridge device sends gentle electrical impulses to specific branches of the cranial nerves and occipital nerves, quieting pain signals and relieving the symptoms of opioid withdrawal in as little as 10

minutes. The Bridge is non-invasive and medication-free, making it a great choice for men and women of all ages.

Placing the Bridge is simple

A qualified medical provider inserts small 1.5mm needles into the skin. The needles are attached to a wire, which is

responsible for sending electrical pulses to the brain. The wires are then connected to the small plastic device.

"The Bridge is literally a gamechanger for patients struggling with the pain of opioid withdrawal," said Executive Medical Director at Continuum Recovery Center, Walter Simmons, MD, MPH, FACEP. "In a quick visit to our office, I easily apply the device, which is completely unobtrusive and painless to wear. This technology is extremely effective at helping clients manage the symptoms of getting off opioids and moving into long-term recovery. Quite simply, opioid addicts fear getting clean because they know they're going to get sick. The Bridge makes the process much more tolerable."

The Bridge is worn for up to five days, granting relief during the most difficult hours of opioid withdrawal. After this time, the device can be safely removed. While most of the physical symptoms should be over, it can take months or longer for the psychological symptoms of opioid addiction to subside. So ongoing behavioral therapy, counseling, support groups and medication management aftercare are critical for ensuring long-term patient success.

Bridge Significantly Relieves Withdrawal Symptoms

The Bridge interrupts pain signals and reduces acute pain and discomfort. But, it doesn't stop there. It makes the whole withdrawal process easier by relieving a number of withdrawal symptoms.

Opioid withdrawal effects are generally believed to be unpleasant but not fatal. This is not true. Death can occur, especially when the complications of withdrawal are mismanaged. For example, persistent vomiting and diarrhea can lead to dehydration, elevated blood sodium levels and heart failure. The Bridge may not just decrease withdrawal symptoms but save lives.

The Bridge works best for:

- Anxiety
- Nausea
- Vomiting
- Insomnia
- Sweating Chills

BRIDGE continued page 5

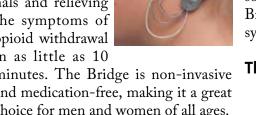
Staying Focused on Recovery

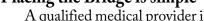
How hard is it to stay focused in recovery? Ask anyone who's been there, and you'll find out that getting sober is just the first step to recovery. So many people hope that giving up their drug of choice will be enough recovery, and they are surprised when sobriety doesn't last or doesn't work.

Sometimes sobriety feels simple and life is easy, but other times, it's a daily epic battle to fight off triggers and cravings. Here are some tips to inspire you to stay focused when you just don't feel like it.

Take it one day at a time

Whether you've been in recovery for days or decades, it's best to take everything one step at a time. Be grateful for every morning you wake up clear-headed and without a hangover and every evening you fall asleep without passing out or the room spinning. When you're creating your goals, think about them in steps. Don't get freaked out by the big picture because it doesn't help to feel overwhelmed. FOCUS continued page 6









Publisher's Note

By Barbara Nicholson-Brown barb@togetheraz.com

Reading, Writing and Recovery

hen I hit bottom from years of drinking and drugging, finally asking for help, I didn't have a clue what would come next. Living a day at a time, committing to showing up to 12 step meetings, being accountable — it was all so foreign to me. Frightened and panicked with fear; I listened to, and followed the suggestions from the gal who took me under her wing. She was a Godsend, understanding, patient, kind and non judgmental. When she told me she had felt the very same way in the beginning of her sobriety, I realized I was not alone, nor the only one on the planet with this disease.

She wanted me to read one particular book, not in its entirety, just a few paragraphs at a time. Then it came to writing and journaling each day. But the real work began when it was time to look deep inside and reveal on paper, my personal inventory. A hard look in the mirror.

It was a difficult task to start because I wanted to blame the outside world and people in it for what I'd become. I wanted to continue my role as victim for the mess of a life I created. So, this inventory was not about them, it was about me. But once I got started on this "homework" the pen flowed on the paper. After sharing it with her, all the bad and ugly of it — that's when recovery began.

Through the years of being sober I've learned so much about myself and know there will always be work to do. I still have character deficiencies that need fixin', but for the most part, I've shed the old skin and stepped into my authentic self.

Sure, getting sober is way more than reading and writing, for me it was a jumpstart to a life I could have never imagined. My outlook before was gloom and darkness, I really didn't care about much, other than myself. It's a blessing not to have to lie and cheat. It's a blessing not to live in fear and shame, drunk or hungover.

Wherever you are on your journey, I cannot emphasize enough to stick with it, attach yourself to people who are strong in their recovery. From them, we learn how to do the next right thing, and become aware of what not to do as well. There is a tremendous power of love and support available from our fellow travelers on this road. Ask for help when you need it and give it to others when you can. In gratitude,



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How Self-Care Differs From Selfishness

By Rachel Fintzy Woods, MA, LMFT

If you fear that self-care means being selfish, you're not alone. This is unfortunately a common misconception that can get in the way of tending to your own physical, emotional, mental, and spiritual needs. Especially in today's world, there is a lot of talk about narcissistic behavior, and most of us would not want to be put into this category.

To set the record straight, there are crucial differences between self-care and selfishness.

First of all, self-care benefits not only you but also those around you. When you're taking good care of yourself, this resonates out into all of your relationships in positive ways. For example, you get sufficient sleep so you can get the kids to school or yourself without being a hazard on the road. You recognize that some nights you may need more sleep than others, and adjust accordingly, taking into account the effect on those important to you as well as yourself. You don't lay about in bed while your family goes unfed, calls go unanswered, and work goes undone.

Secondly, self-care isn't done with an intention to hurt other people. If you have to say no to lunch plans with a friend because you've fallen ill or sustained an injury, you're cancelling in order to rest, recover, and perhaps see that friend when you're in a better space physically. You don't habitually cancel on friends because something "better" has presented itself, you just "don't feel like it", or you're passive-aggressively trying to show the other person they aren't that important to you. Yes, some people do this.

Self-care bolsters your inner strength and self-esteem. Taking good care of yourself comes from a place of knowing that you're neither better nor worse than the next person, and that we all have value. Self-care knows when enough is enough, so you don't overdo it, such as charging thousands of dollars on your credit card for those shoes you just "had to have". On the other hand, selfishness is often an indication that deep down you struggle with low self-esteem and a sense you need "more" to compensate for perceived deficits. Your resultant actions don't truly boost authentic self-regard and might, after a possible initial burst of adrenalin, may leave you feeling even more uneasy about yourself if your conscience is troubled by your choices.

A few quotes to encourage you to take good care of yourself, and to remind you why self-care is essential:

- Of all the judgments we pass in life, none is more important than the judgment we pass on ourselves. (Nathaniel Branden)
- When we self-regulate well, we are better able to control the trajectory of our emotional lives and resulting actions based on our values and sense of purpose. (Amy Leigh Mercree)
- Being extremely honest with oneself is a good exercise. (Sigmund Freud)
- It's good to do uncomfortable things. It's weight training for life. (Anne Lamott)
- Self-compassion is simply giving the same kindness to ourselves as we would give to others. (Christopher Germer)
- If your compassion does not include yourself, it's incomplete. (Jack Kornfield)
- People who love themselves come across as very loving, generous, and kind; they express their self-confidence through humility, forgiveness, and inclusiveness. (Sanaya Roman)
- Knowing how to be solitary is central to the art of loving. When we can be alone, we can be with others without using them as a means of escape. (Bell Hooks)



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- Almost everything will work again if you unplug it for a few minutes, including you. (Anne Lamott)
- The most powerful relationship you will ever have is with yourself. (Steve Maraboli)
- Talk to yourself like you would to someone you love. (Brene Brown)
- The love and attention you always thought you wanted from someone else, is the love and attention you first need to give to yourself. (Bryant McGillns)
- Self-discipline is self-caring. (M. Scott Peck)
- Taking care of yourself doesn't mean me first, it means me too. (L.R. Knost)
- With every act of self-care, your authentic self gets stronger, and the critical, fearful mind gets weaker. Every act of self-care is a powerful declaration: I am on my side; I am on my side; each day I am more and more on my own side. (Susan Weiss Berry)
- Any time we can listen to true self and give the care it requires, we do it not only for ourselves but for the many others whose lives we touch. (Parker J. Palmer)
- Rest and self-care are so important. When you take time to replenish your spirit, it allows you to serve others from the overflow. You cannot serve from an empty vessel. (Eleanor Brownn)
- As you grow older, you will discover that you have two hands, one for helping yourself, the other for helping others. (Maya Angelou)
- Be kinder to yourself. And then let your kindness flood the world. (Pema Chodron)

Self-care honors the child within you that needs internal validation. Thus, you take care of your emotional needs, so you can let go of excessive self-criticism, discontinue emotional neediness in your relationships, and turn your attention to becoming the person you were meant to be. The result is your unique gift to the world.

Rachel Fintzy Woods, M.A., LMFT is a licensed psychotherapist in Santa Monica, California. Rachel counsels in the areas of relationships, the mind/body connection, emotion regulation, stress management, mindfulness, emotional eating, compulsive behaviors, self-compassion, and effective self-care. Trained in both clinical psychology and theater arts, Rachel works with people to uncover and develop their unique creative gifts and find personal fulfillment. For 17 years, Rachel has also been conducting clinical research studies at University of California, Los Angeles (UCLA) in the areas of mind/body medicine and the interaction of psychological well-being, social support, traumatic injury, and substance use. You can read more about Rachel at her website: http://www.rachelfintzy.com Source: (psychcentral.com)

BRIDGE from page 1

- Agitation
- Teary eyes/runny nose
- Restlessness and tremors

A Single but Promising Case Study

The FDA was able to approve the Bridge device thanks to a case study conducted on patients during opioid detox. In the study, clinicians measured the device's effectiveness using the Clinical Opiate Withdrawal Scale (COWS).

The breakdown of the scores are as follows:

- 5-12 = mild withdrawal symptoms
- 13-24 = moderate withdrawal symptoms
- 25-36 = moderately severe withdrawal symptoms
- 36+ = severe withdrawal symptoms

When using the Bridge device, patients reported a significant decrease in withdrawal symptoms such as joint aches, bone pain, sweating, anxiety, body shakes, pupil size and resting heart rate. Within 20 minutes of placement, patients reported their pain went from a 20 to a 5. Ninety percent of patients were able to move onto treatment.

To date, the Bridge has been tested on more than 30,000 patients and is used at a number of addiction treatment centers and VA hospitals across the United States.

Benefits of Using the Bridge Device

When a patient completes opioid withdrawal, they're able to move onto medication-assisted treatment with drugs like methadone, buprenorphine



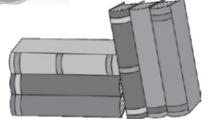
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or naltrexone. However, these drugs cannot be used during the detox process because patients cannot have any opioids in their systems. This is what makes opioid withdrawal so debilitating and intolerable.

The Bridge acts as a "bridge" to MAT, hence its name. Here are the key benefits we do know about it:

- Safe for most individuals. Men and women of any age can safely use the Bridge. This is important to know because addiction does not discriminate. Some adults who have never had addiction problems now struggle after being prescribed opioids.
- Minimally invasive. It takes about 15 minutes to place the Bridge. This must be done by a qualified provider, as the device needs to match up to specific branches in the brain. After five days, the Bridge can be safely removed.
- Low risk. When the device is attached, patients report feeling gentle pulses. They are subtle and easy to tolerate. No adverse reactions have been reported. Because the Bridge is non-medicinal, it can also be used in conjunction with other therapies.
- FDA-approved. The Bridge was approved by the FDA in 2017 after reviewing data from the clinical study with 73 patients. It is available by prescription only.

Best Candidates for the Bridge

The Bridge is safe for almost all men and women struggling with opioid addiction and can offer patients comfort and reassurance as they enter rehabilitation. However, the manufacturer does not recommend the Bridge for people who are pregnant, have a history of seizures or have cardiac pacemakers.

Final Thoughts

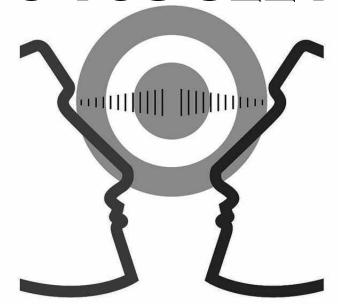
Opioids are killing people at a considerable rate. For the first time, people are more likely to die from an opioid overdose than a car accident. Even for those who make it through withdrawal, only a small fraction of people make it to medical treatment.

The Bridge could be a solution that helps more people make it through the most painful days the process.

Currently, only select addiction treatment centers offer the Bridge. Continuum Recovery Center in Arizona is one of them.

To learn more about the Bridge device and how it's being used to treat our own patients, contact us today. https://www.continuumrecoverycenter.com or call us Your recovery starts with a simple phone call 855-732-3208.

Do You SEE ME?



By Dina Evan, PhD

can't mean anything to you until you see me and seeing me takes emotional courage because if you REALLY see me you'll see my feeling, my frailty, my sadness, my courage and every possible feeling I have...which may also stir up some in you.

Most of us live in denial

We are sold positivity in posters, wall hangings and cute sayings. But this addiction to only that which is cute, and positive is destroying us and our country because we refuse to see what's really happening and we refuse the fullness of our ability to feel everything life offers. It destroyed my early life. My mother took her last drink minutes after I was born and my father left when I was nine and never returned to the place he had never really been.

I left home at age 11 and I became strong. No scary feelings for me! Not when I was raped, not when my mother died, not when my father died and not when I had four children. I focused on food on the table and a roof over their heads — one step in front of the next. I never knew the power of real courage and I lost the emotional connection I should have had with my children.

After years of grief over this, I just realized why my children love me, but they don't like me. They never knew me, and it grieves me to the core to own that. Susan David calls this dilemma the 'Tyranny of Positivity'.

Just push through, don't feel any have cancer. Be positive if you get left, someone else will come along, don't precious to you. grieve too long after a death, it's not good for you.

The cost of that belief is too high. Our greatest emotional teachers and the very source of our emotional courage is being ignored. I forgot.... I never knew vulnerability, tenderness or emotional courage until I went to school to become a therapist. If I was going to ask that of my clients, I damn well had to become that, embrace it myself. And we all need to learn it now.

Our most important emotional teachers are being ignored and the consequence is our emotional courage is going with them. It's time to invite grief, anger, sadness, sorrow, shame, every emotion we run from, in — and ask those emotions what they are here to teach us about ourselves.

When I realized the truth of why my kids love me but they don't like me, I was devastated and I don't even know if I will be able to repair that before I leave the planet.

However, knowing it has pushed me to a place of embracing openness and vulnerability to the fullest extent that I can. Not a bad start for my next life and hopefully with some work I will find a way to show my children I am not just the emotionless woman who put food in their bellies and a roof over their heads. I am the woman who did not have the tools to show them I loved them more than life itself, and would have laid down on the tracks of an on-coming train to give them one more breath of life. This column is letting you see me, my own vulnerability, regret and shame. It is a gift to me and hopefully to you.

The moments sitting with your feelings are gold. When you embrace your own emotions, you are standing in your most important truth, and your true purpose in being here which is ...to find your best self. When you are able to embrace your deepest emotions, you are also able to embrace them in others. negative feelings. Be positive if you You begin to see yourself and see them as well and they become more real and

> This is an opportune time to embrace the whole assignment....right now. That is exactly what all this chaos and drama is about. It is pushing us to wake up. It's time to find our true selves and stand profoundly in that truth. I want to see you. I want you to see you, because you are amazing and the world is waiting for you to take your true place in it.



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 or call her at 602 571-8228.



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FOCUS from page 1

Celebrate the milestones

Made it through the weekend without picking up or picking a fight? Didn't lash out at anyone? Got a job? Reaching the biggest and smallest goals are all cause for celebration. **Remember you're on a journey of change.** Every time you cross a milestone, acknowledge it and celebrate. It's another victory to journal about.

Track your results

Whether you have a journal, calendar, a list, or an app on your phone —track your successes. Looking back will help you stay focused when things get tough. Take in how much time and effort has gone into your recovery and how much it means to you. When you're having an off day check your progress and remember where you started and how far you've come.

Have a plan

Plans are what make things happen. What steps will you take to meet your goals? Who's on the list of people that will help you make it there? What resources will you need? Make plans for how to make new recovery friends, get healthy, learn a new skill, relapse prevention plan, and a plan for anything else you can think of. Need to find a job? Make a plan for how to do that starting with what needs to be done like a resume to what contacts or websites can help you find what you're looking for.

Keep reaching out to your support systems

You've made sober friends at meetings, or through other people. It's important to have phone relationships with these people AND see them in person! You have your sober community to help you through tough times, use them. You may have a therapist. All these resources should be used regularly, but don't forget to use them when the going gets tough. If you're in contact, they'll reach out, too, if they feel worried or sense that something is wrong.

Go to meetings

Tt's so important to have places to go to find help. Meetings make a great distraction to help you get out of your own head, help other people and the opportunity to share what's on your mind. Find a way to talk things out with someone else who you know will listen. Talking things out will help you make discoveries that you may not have when just thinking things through. If you're stuck in your thoughts, they can turn into a merry-go-round of doom.

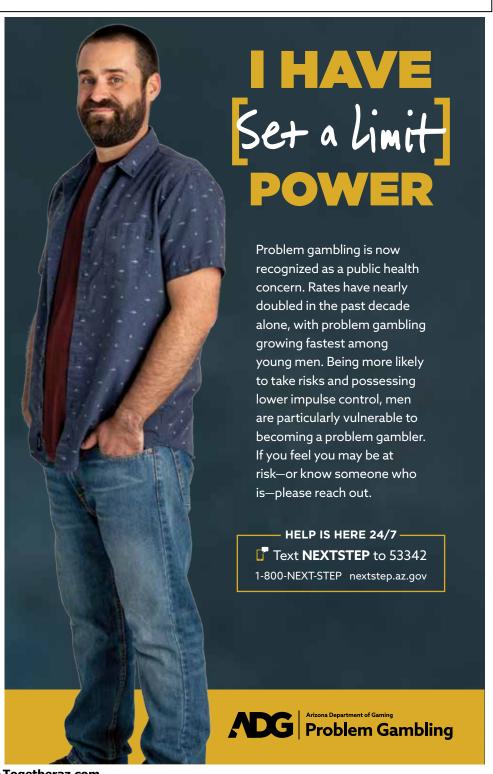
Believe in yourself

You can get yourself out and back on the right path. Relapse is common, so don't beat yourself up over it if it happens and just let yourself stay in those bad, dangerous habits. Try your best to keep from relapsing because returning to those old ways isn't worth it. So, believe in yourself and what you can do. Remember you are not alone.

No matter what you're dealing with that may be causing you to feel like giving up, remember what it was like coming in. Take this disease of addiction seriously and remember **it wants you drinking, using or dead**. As much as it is a disease, there's also the choice of whether or not to treat the disease every day. Remember the positives, use your networks and give yourself the best chance possible to succeed.

Reports of Deaths Related to Vaping

The FDA has alerted the public to hundreds of reports of serious lung illnesses associated with vaping, including several deaths. They are working with the Centers for Disease Control and Prevention (CDC) to investigate the cause of these illnesses. Many of the suspect products tested by the states or federal health officials have been identified as vaping products containing THC, the main psychotropic ingredient in marijuana. Some of the patients reported a mixture of THC and nicotine; and some reported vaping nicotine alone. No one substance has been identified in all of the samples tested, and it is unclear if the illnesses are related to one single compound. Until more details are known, FDA officials have warned people not to use any vaping products bought on the street, and they warn against modifying any products purchased in stores. They are also asking people and health professionals to report any adverse effects. The CDC has posted an information page for consumers. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/ severe-lung-disease.html





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Suicide Deaths — Major Component of the Opioid Crisis that Must Be Addressed

By Joshua Gordon, Nora Volkow

We've heard a lot about the opioid epidemic, and the rising toll it is taking on our communities. In 2017, 47,600 people died from overdoses involving prescription or illicit opioids. But the opioid overdose epidemic is not limited to people with opioid addiction who accidentally take too much of a pain reliever or unknowingly inject a tainted heroin product. Concealed in the alarming number of overdose deaths is a significant number of people who have decided to take their own life.

It can be challenging to discover the true relationship between suicide and drug use. In the absence of a suicide note, it is difficult to assess the intentions of an individual who has died of an overdose, other than circumstantially. Also, the intentions of someone with OUD who overdoses may not always be clear-cut. In a study last year of current and past overdose experiences among patients seeking treatment in a Flint, Michigan emergency department, 39% of those whose worst overdose had involved an opioid or sedative reported wanting to die or not caring about the risks; another 15% reported they were unsure of their intentions.

While we don't know exactly how many opioid overdose deaths are actually suicides, some experts estimate that up to 30% of opioid overdoses may fit this description. The connection between opioid overdose and suicide has appeared to increase over time, with one 2017 analysis of National Vital Statistics data showing significant increases in suicides involving opioids among all age groups except teens and young adults between 1999 and 2014; in those aged 55-64, the rate quadrupled.

A 2017 study using national survey data showed people who misused prescription opioids were 40-60% more likely to have thoughts of suicide, even after controlling for other health and psychiatric conditions. People with a prescription opioid use disorder were also twice as likely to attempt suicide as individuals who did not misuse prescription opioids.

People with substance use disorders also frequently have other psychiatric disorders—for example, they are twice as likely to have mood and anxiety disorders, which are independently associated with increased suicide risk. The reverse is also true. Half of all individuals with a mental illness will — at some point in their life—have a substance use disorder. Mental illnesses are also associated with accidental overdoses of medications and illicit drugs.

Pain is another important factor when considering the complex relationships between opioids, overdose (both suicidal and accidental), and mental illnesses. Individuals suffering from chronic pain conditions — the primary reason people are prescribed opioids, may also have comorbid depression or other mental illnesses, and they may be at increased risk of suicide simply because of their pain. Individuals who take higher quantities of prescribed opioids for pain are also at

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an increased risk of accidental overdose death. With current initiatives to reduce opioid prescribing, many pain patients find themselves either unable to get treatment they need or stigmatized as "addicts" by the healthcare system, compounding their difficulties.

Our Institutes are engaged in research initiatives that address the suicide component of the opioid crisis. NIDA funds research aimed at understanding the complexities of addiction, including co-occurring mental health problems and shared environmental and genetic risk factors for addiction and mental illness. NIMH funds research aimed at understanding the causes of suicide and suicidal ideation and seeks to develop new prevention and treatment interventions specifically targeting suicide.

The opioid crisis and the deaths of despair associated with it demand addressing the larger mental health context of opioid use and misuse. We must fully utilize the effective OUD medications at our disposal in addition to addressing the many risk factors for suicide, particularly co-occurring mental illness and pain, in those who use opioids. This is why the NIH HEAL (Helping to End Addiction Long-term) Initiative is so important. The initiative builds upon well-established NIH research to improve prevention and treatment for opioid misuse and addiction. It also aims to enhance pain management by developing effective but safer substitutes for opioids.

As part of this initiative, participating NIH Institutes will be funding clinical trials of collaborative care models to treat people with opioid use disorder and co-occurring mental illnesses. Collaborative care models, which involve mental health professionals, care managers, and primary care physicians all working together, are already recommended for depression and post-traumatic stress disorder. Recent evidence suggests they could be effective for substance use disorders and for reducing suicide risk. These new grants aim to demonstrate this efficacy definitively and to show how collaborative care can be implemented in community health centers in the areas hardest hit by the twin epidemics of opioid overdose and suicide deaths.

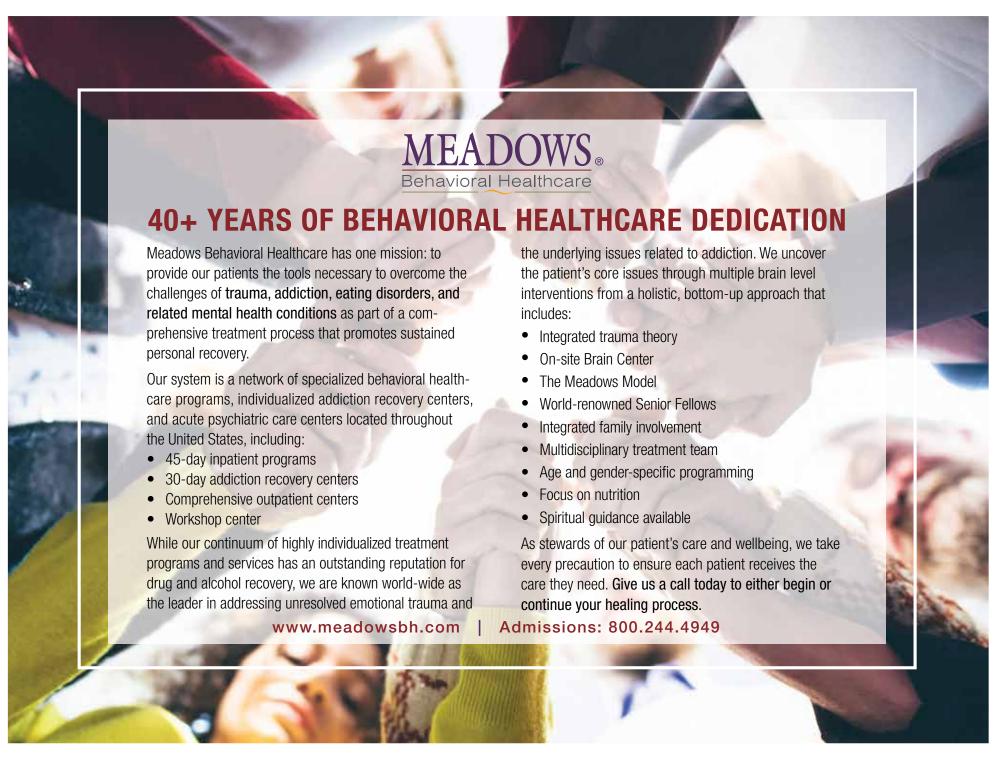
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Meditation in Addiction Treatment

Addictions might appear complex, but having a comprehensive treatment plan that includes rehabilitation programs can help to hasten the recovery process. Most programs often utilize meditation for treating addiction, accompanied by other traditional and evidence-based treatments like individual therapy and group sessions. Meditation provides additional support to addicts during their recovery process. This mind and body practice helps increase the benefits of medical and traditional therapies when they are used together.



What is Meditation?

Meditation is generally referred to as a safe exercise that focuses on the connection between the mind and body with the main aim of inducing relaxation.

Meditation may vary and can be done in various forms which include; focusing on a combination of breath inhaling and exhaling, an idea or word while sitting up or lying down. This process helps you focus on your mindfulness, awareness of various present feelings and your physical sensations.

Individuals recovering from addiction may feel they have lost touch of how their minds and bodies feel since addictions are known to numb and disconnect the affected patient from their mind and body.

Studies and research have pointed out the effect of meditation and yoga on not just the body's natural reaction to stressful and other life-threatening situations, but also how effective they are in addiction treatment and recovery.

How Meditation Works

Meditation is an effective procedure as it rewires the critical pathways in the brain. Research suggests people who meditate for 30 minutes daily have experienced record functional increase in most parts of the brain, which has also resulted in a substantial effect on their learning process, self-awareness, memory, and introspection. By changing how this process works, recovering addicts can correctly evaluate their everyday situations and react more appropriately without the use of drugs or alcohol.

Meditation helps us focus on several things. An addict can easily use it to calm their nerves when they are stressed or anxious. It reduces the negative feelings that often compel drug addicts to reach out for substance.

Individuals may also use meditation to connect with a higher authority, usually through prayers or mantras and this connection to a higher power has also helped

several drug addicts hasten their recovery process.

How to Practice

There are various forms of meditation a recovering addict can practice. These practices are quite useful in pulling the mind away from thoughts that may distract or lead to anxiety. While all forms of meditation may be effective in slowing down an overactive mind, it is advised you find one style that resonates with you.

There are various forms of meditation to

choose from, that can enhance your recovery during addiction treatment. Some of them include:

Meditative Exercises

These involve moving through a series of poses that are designed to increase your strength, flexibility and breathing. These poses can improve your self-confidence and well-being, while breathing techniques can promote relaxation that relieves you from frustrations, stress and other negative feelings.

Guided Meditations

These are usually taught in yoga classes. They involve gazing meditations that encourage you to keep your eyes open and fixed on a given object; these objects may be either an image or something like a candle.

Walking Meditation

This form of meditation involves focusing on each part of your body and the sensory information from the environment while you move. It is best for addicts that need a more active form for addiction recovery.

Mindfulness Meditation

Mindfulness meditation involves focusing on the experience of the present moment rather than the past or future. This type is regarded as the most traditional form of meditation. It is usually done while sitting in a relaxed pose, specifically in a peaceful setting.

MEDITATION continued page 12



What It's Really For

By Alan Cohen

I was stunned to see the long line of customers waiting in front of the rental car desk. As I counted 50 people and just a few agents to service them, I realized I would be here for at least an hour. Never again will I rent from this company.

As I chatted with Tom, a fellow in line behind me, I remembered I had a membership to the rental company's express club. "If I go to the express desk on the lower level, maybe they'll expedite my rental," I thought out loud. Tom told me, "Go ahead — I'll hold your place." Wow, how thoughtful! I told him thanks, and if I didn't return, I would save a seat for him in heaven.

When I found the express desk also glutted, I returned to the regular line where my new friend let me back in as he had promised. As the line slowly advanced, Tom and I got to know each other, laughing and telling stories. The frustration of being in the long queue dissipated and the time went more quickly. When I finally reached the front of the line, I told Tom to go ahead of me. We shook hands warmly and wished each other well.

A Course in Miracles asks us to remember, "I do not know what anything is for." It explains that rewarding relationships provide the express route to healing. While I believed my purpose in that line was to get a rental car, my more meaningful opportunity was to connect with another human being and help each other through a difficult situation. We gave each other a miracle.

Jewish theologian Martin Buber said, "All journeys have secret destinations of which the traveler is unaware."

The ego's destinations are always material. The spirit's destinations run deeper. We believe we are here to get somewhere physically, while we are really here to get somewhere spiritually. Never accept an experience, especially a challenging one, at face value. There is always more going on than meets the eye, a doorway to a blessing.

My friend Nadine had been housesitting at different homes in Hawaii for several years and she yearned to have her own place in the small town of Every situation has only the meaning you give it. If a circumstance feels painful, you are attributing negative purpose to it. When you find another perspective with higher purpose, the problem dissipates and the path clears. Miracles proceed from a shift in perception.

Waimea. One day while Nadine was sunbathing on the beach, a dog who had just frolicked in the ocean came and shook water on her, startling her. Soon the dog's owner arrived and apologized. As the two women began to chat, the lady explained that she had been renting a cottage in Waimea, but she had to move out, and she was looking for someone to take over the lease. When Nadine heard the details, she couldn't believe her ears. The cottage was exactly what she had been looking for. A month later Nadine moved in to her ideal situation. The wet, shaking dog at first seemed to be a nuisance, but turned out to be an angel. Don't be hasty to judge nuisances as bad. They always contain a gift if you are willing to look deeper. A friend told me, "Interruptions are the best part of my day."

The lofty practice of reframing calls us to take the facts of a situation and look at them from a different angle, to reveal an opportunity. Every situation has only the meaning you give it. If a circumstance feels painful, you are attributing negative purpose to it. When you find another perspective with higher purpose, the problem dissipates and the path clears. Miracles proceed from a shift in perception.

In the biblical story, Joseph's jealous brothers sold him into slavery and he was later unjustly thrown into prison. As a result of Joseph's gift of prophecy, he was released and rose to become Pharaoh's top advisor. Years later when a famine befell the region, Joseph's brothers came to Egypt to beg for food, and they found themselves standing before none other than Joseph. When they apologized for their misdeed, Joseph said, "You meant it for evil, but God meant it for good."

So it is with all challenging situations. What starts out as evil can be turned into good. Every minus is half of a plus waiting for a stroke of vertical awareness. As spiritual beings, material experiences alone cannot fulfill us. It is only when we find spiritual purpose that we feel fulfilled.

A teacher posed a question to his students: "Imagine you wake up one morning and you feel like having some French toast. But you don't have any eggs. So you go to the corner mini-mart, pick up some eggs, and have a brief chat with the clerk. Since you know him from your regular visits, you ask him how is kid is doing in his new school. Then you head back and cook your French toast. What was the purpose of your trip to the grocery store?"

The teachers' students answered, "To buy some eggs."

"Not really," the teacher replied. "That was just the excuse to get you into the store to connect with the clerk. Life is more about relationship than eggs."

There is a nobler purpose to every experience than meets the eye. No encounter is by chance. Everything that happens is designed to lead us to spiritual reward and growth. When we realize that life is about connecting more than getting somewhere, we find treasure right where we stand—even in line.



Alan Cohen is the bestselling author of A Course in Miracles Made Easy. Join Alan and musician Karen Drucker in Hawaii, December 1-6, for an extraordinary retreat, "A Course in Miracles: the Easy Path." For more

information about this program, Alan's Holistic Life Coach Training beginning January 1, his books and videos, free daily inspirational quotes, online courses, and weekly radio show, visit www.alancohen.com.



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Supporting a Loved One's Recovery

By Kim Miller, LCSW

Frequently I get calls or emails from family members asking what they should do or not do to help a loved one in early recovery. I hear worry rising up and sense their stress coming through labored emails, as they begin their own process of learning how to give support. It would seem to outsiders family members would feel happy and relieved. For many this couldn't be further from the truth.

Just as someone who is entering into recovery is struggling to find their footing, equally, so are the family members involved. There are multiple stages to the process, and many weeks or years of a learning curve involved. Wide eyed and desperate, family members enter my office. They are often uneasy, having just survived terrible challenges.

Much has been written about the lifecycle of the addicted person's recovery process. Those with addiction, have gone through their own kind of hell and consequences, realizing they can't stop on their own.

What about the family?

They are the brave and patient souls who have been there all along, watching Jekyll and Hyde personalities forming and shifting in their loved oneright before their eyes — as if they were shapeshifters. They clean up the wreckage or live in the center of addiction. They can never be sure who they are going to see on a daily basis, and many endure countless nights of worrying.

First wave of shock

The initial shock of learning about addiction or secret activities, a relapse after believing someone was clean, flat out continual use, or living in the midst of maladaptive patterns, families often come to lose themselves in the process. Setting basic soft boundaries and talking to an afflicted family member seems to be as useful as throwing rocks at a tank.

Several books I suggest to family members are titles like "how to help" your loved one in the recovery process. It is true we want to help them recover but often these tips will lead toward a path of helping ourselves ironically.

It is an all-consuming process to live surrounded with or at least affected by addiction. Even the most calm cool and collected of us show up a few years later impatient, irritable, anxious, and tired. At times we can barely think of anything else.

Weren't we loving and kind? Didn't we do everything right? Often families wring their hands in despair. But addiction can't be intellectually reasoned with, paid enough money, given enough good schooling or jobs or be in any way reasoned with. It's better if we cut our losses and not try to have too many good ideas about how we are going to fix someone else's addiction. We often feel guilty, even ashamed, depending on our own upbringing and how prone we are to taking on other people's "shameless" behaviors. We carry the shame and pick it up for them because they can't seem to own it or feel it.

This initial shock of having an addict in our lives, can leave us feeling as if we're survivors of a foreign war, as if we're fighting battles we don't understand with weapons we are supposed to use to defend ourselves or our loved one, but we don't know what we are actually fighting. Underneath it all, we just want who we love to be OK, healthy and sober. This often bewildering stage of recovery is confusing as family members begin to unwind from a state of being frozen with fear.

As I have them begin their own process, we begin with a first powerful suggestion. Becoming educated on addiction, recovery and support skills is one of the best things you can do. This may only be for a short time until you get the scope of the disease, what it is and what it isn't, and how addiction processes With the involvement of family members during treatment, the recovering addict is more likely to restore, or even build a new support group that will sustain him or her throughout the life long journey of recovery



operate. Simple slogans, sayings, and reminders may come in handy. Be patient as it may takes months to learn the basics needed. I always recommend family members keep a good attitude. Treat your loved one with love and boundaries, and recognize they are still considered newcomers to the process too.

Like many people with medical or health issues, we treat them with kindness. It's not a great time to engage in wordy debates and intellectual reasoning. I cannot stress enough the need for education. Twelve step meetings for the family, family support sessions or groups, and literature is helpful and can be found every corner of the earth." on just about every corner of the earth.

The process of setting boundaries

the problem clearly and help with reasonable expectations. Seeking support, sponsorship, our own step work process as well as other well meaning family members who have walked ahead of us, all come in but they may say they have definitely grown from strong recommendation. We begin learning what the process of recovery. While addiction can spread boundaries to set and how — with practice and time through a family system — so too can family recovery. we have the ability to stick to them — equating boundaries with love.

Family members will be asked to find focus ontheir own self-care and are encouraged to return to activities they enjoy. Leading by example, we will create a life where our focus is on taking care of ourselves. The airlines has it correct when they remind us to put an oxygen mask on ourselves first before assisting anyone else. The name of the game is learning to be centered and reasonably happy even if someone we love is struggling.

Daily work on ourselves and a program of recovery are needed for our healing too. One of my favorite sayings is — we prepare for a marathon not a sprint, and we need objective coaches, therapists, sponsors, and as much physical and emotional health as we

We cast off antagonizing, anger, and resentment with the help of our own support system because that only slows us down. We may be able to turn our thoughts to others who are walking the road with us. One of the biggest indicators of an addicted person's

"Twelve step meetings for the family, family support sessions or groups, and literature is helpful and can be found on just about

Start with a professional's objective who can see success is family involvement and healthy family participation. We did not ask for this walk but it does bring us lessons, more tools and support. Not many would say they are happy addiction affected their life,



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Drinking Exploits on Social Media Can Predict Alcohol Problems

Posting about alcohol use on social networking sites — such as Twitter, Facebook, or Instagram — is actually a stronger predictor of having an alcohol problem than drinking itself, according to a new study by researchers at North Carolina State University and Ohio University.

The findings show college students who have developed an "alcohol identity" and who willfully advertise themselves as drinkers are at greater risk for alcohol-related problems.

"We started this project with a threshold question: what drives students to drink and post about alcohol on social networking sites," said Dr. Charee Thompson, an assistant professor of communication studies at Ohio University and co-lead author of the study.

"The strongest predictor of both drinking alcohol and posting about it on social networking was the individuals considered drinking a part of who they are," Thompson said.

"And those two behaviors were associated with alcohol problems such as missing school or work, or getting into fights because of drinking."

For the study, 364 undergraduate students at a Midwestern university completed an online survey. All of the students were over the age of 18, had reported consuming at least one alcoholic drink in the past month, and had an active social media account.

Students were asked specifically about their social networking use, alcohol consumption, alcohol problems and their alcohol-related use of social media, as well as questions designed to measure their motivations for drinking.

The findings show that posting about alcohol use on social media is a stronger predictor of alcohol problems than the actual drinking. In other words, having a real drink was less strongly correlated with alcohol problems than posting about alcohol use — though clearly students with alcohol problems are drinking alcohol.

"This might be because posting about alcohol use strengthens a student's ties to a drinking culture, which encourages more drinking, which could lead to problems," Thompson said.

The researchers note that future research on student alcohol use may want to further consider how drinking occurs in tandem with other behaviors that could cause students problems.

"This work underscores the central role that social networking sites, or SNSs, play in helping students coordinate, advertise and facilitate their drinking experiences," said co-lead author Dr. Lynsey Romo, an assistant professor of communication at NC State. "The study also indicates that students who are at risk of having drinking problems can be identified through social networks."

MEDITATION from page 8

Breathing Meditation

During this process, you are expected to focus on your exhalations and inhalations, while keeping your attention on your breath. It is often the easiest, as an addict can do these on their own anytime and day

Mantra Meditation

Mantra is a simple word or phrase that is repeated. This word or phrase is usually repeated to oneself. Since the human mind is hectic, specifically for people who are accustomed to incredibly stressed lifestyles, the process can help lessen the stress. Nevertheless, it is essential to find the best mantra that can help you achieve clarity and stillness.

Primordial Sound Meditation

In this form of meditation, addicts are encouraged to sit with their eyes closed, while their attention is focused on a sound to pull their minds away from their thoughts and quiet their minds.

Relaxation Meditation

An important form of guided meditation that increases an individual's focus on a given area of the body. By focusing on these specific parts of the body, they become incredibly aware of their own body and experience increased relaxation.

Eating Meditation

Most people take this type of meditation for granted. Learning to be mindful while eating is important for people who struggle with weight problems, and those who have a proven record of using food to try to wave the stresses of addiction.

Meditation for Addiction Treatment

One exciting thing about meditation is the fact addicts can decide to choose the methods that best fit their person or lifestyle.

Mindfulness Meditation:

Individuals examine their feelings, experiences, and thoughts in a non-judgmental way. Since addiction may usually involve acting on impulses, mindfulness meditation allows addicts to discuss their

beliefs and urges, while they carefully consider how to react to them.

Meditative Exercise:

Meditation with physical motion. During this process, you can likely move through a series of poses that are designed to improve your breath control and strength. The postures are known to improve the addict's physical well being as well.

Enjoy the Benefits

Regardless of the addiction treatment that may have been adopted to free an addict from drugs or alcohol addiction, chances are that this ongoing treatment program will most likely include meditation. Addiction is known to affect an addict spiritually, mentally, and most times physically. Hence, the need for meditation as it goes a long way to ensure quick recovery for the affected person.

Physical benefits: meditation comes with various physical benefits, some of which include;

- Reduced blood pressure
- Increased energy level,
- Increased serotonin production that helps in the improvement of mood and behavior

Psychological benefits: It can help to increase calmness, improve emotional ability, increase individual peace of mind while offering relaxation to the affected person

Spiritual benefits: it also carries great spiritual benefits by enhancing an addict's state of mind, creativity, and happiness. Through this process, the affected person can heighten their consciousness as well as their transformations.

Content from Scottsdale Recovery Center and Arizona Addiction Recovery Centers created by Cohn Media, LLC. www.cohn.media

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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

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, and insurance representatives from Allstate and State Farm. Terrace Ballroom of the "DoubleTree by Hilton", 10220 N. Metro Parkway East next to MetroCenter Mall. Email: metroblockwatch.safetyfair@gmail.com. https://m.facebook.com/metroneighborhood.

OCT 15- PCS Professional Networking Lunch- 3302 N. Miller Road, Scottsdale. RSVP to pcs@pcsearle.com.

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

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.

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.

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.

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 - 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)**E: tucsonslaa@gmail.com. www.tucsonslaa.org

Phoenix -Teen Challenge, 1515 Grand Ave, Phoenix, Thurs. 6:30-8p.m. 480-745-6978 or 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

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

Open Hearts Counseling Services Women's Therapeutic 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

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

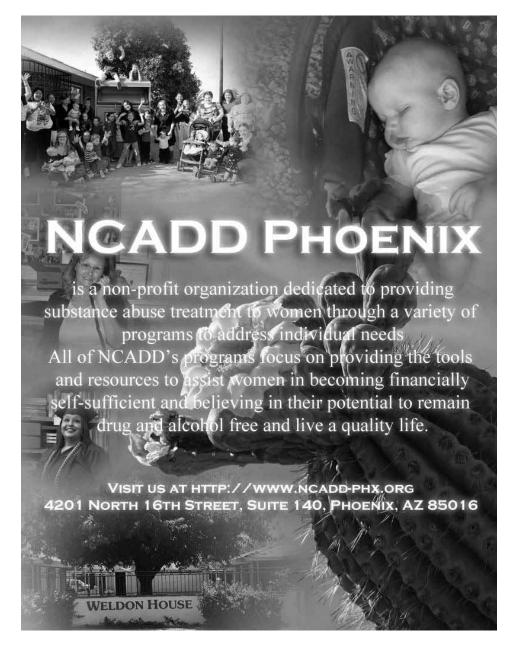
co-anon family support— Message of hope and personal recovery to family and friends of someone who is addicted to cocaine or other substances. "Off the Roller Coaster" Thurs., 6:30-7:45 p.m., 2121 S. Rural Rd., Tempe. Our Lady of Mount Carmel Church. Donna 602-697-9550 /Maggie 480-567-8002.

ACOA Thurs., 7:00 p.m., North Scottsdale United Methodist Church, 11735 N. Scottsdale Rd., Scottsdale.www.aca. arizona.org

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.

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 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

SLAA—Sex and Love Addict Anonymous 602-337-7117. slaa-arizona.org

GAM-ANON: Sun. 7:30 p.m. Desert Cross Lutheran Church, 8600 S. Mc-Clintock, 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.

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. 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. 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. 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.

CRYSTAL METH ANONYMOUS www. cmaaz.org or 602-235-0955. Tues. and Thurs. Stepping Stone Place, 1311 N. 14th St. Phoenix.

GODDESSESS & KACHINAS Philosophical, spiritual, religious 12 step, 12 Tradtition/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
Deadline 20th of month prior to printing.

STAY INFORMED

Sign up for our e-newsletter at info@togetheraz.com or barb@togetheraz.com

Together AZ Resources & Helplines

TOGETHER AZ 602-684-1136

ADVERTISER LISTING	S
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A Better Today	888-906-0952	
Arizona Addiction	602-737-1619	
Arizona Addiction Recover	y 888-512-1705	
Aurora Behavioral Health	877-870-7012	
Calvary Healing Center	866-76-SOBER	
CBI, Inc.	480-831-7566	
CBI, Inc. Access to Care	877-931-9142	
Continuum Recovery Ctr.	877-893-8962	
Cohn Media	866-578-4947	
(Online Marketing/SEO)		
Dept.Problem Gaming 8	00-NEXTSTEP	
Gifts Anon	480-483-6006	
The Meadows	800-632-3697	
Meadows Ranch	866-390-5100	
Men's Teen Challenge	520-792-1790	
Mercy Care 602-222-9444 /800-631-1314		
NCADD	602-264-6214	
Psychological Counseling S	Services (PCS)	
	480-947-5739	
Rio Retreat Center	800-244-4949	
Scottsdale Recovery Center	888-663-7847	
Sierra Tucson	800-842-4487	
Sober Living AZ	602-737-2458	
Stewart Counseling Service	s 602-316-3197	

602-952-3939

800-346-7859

480-905-3117

Valley Hospital

Legal Services Dwane Cates

Teen Challenge of AZ

RESOURCES	
ACT Counseling	602-569-4328
AZ Center for Change	602-253-8488
AZ. Dept. of Health	602-364-2086
AzRHA	602-421-8066
Building Blocks-BBC	602-626-8112
Chandler Valley Hope	480-899-3335
Choices Network	602-222-9444
Cornerstone Healing Center	480-653-8618
Crisis Response Network	602-222-9444
The Crossroads	602-279-2585
Desert Drug Dog	602-908-2042
Fit FOUR Recovery	480) 828-7867
Governor's Office of Youth	, Faith & Family
	602-542-4043
Hunkapi Programs	480- 393-0870

Lafrontera -EMPACT	800-273-8255
River Source	480-827-0322
TERROS Health	602-685-6000
VIVRE	480- 389-4779

Therapists/Interventionists

Dr. Marlo Archer	480-705-5007
Carey Davidson	928-308-0831
Dr. Dina Evan	602-997-1200
Dr. Dan Glick	480-614-5622
Bobbe McGinley	602-569-4328
Julian Pickens, EdD, I	ISAC 480-491-1554

TUCSON

Sierra Tucson

Suicide Prevention

Sonora Behavioral Health

Turn Your Life Around

Workaholics Anonymous

1003014		
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	
The Mark Youth & Family Care Campus		
	520-326-6182	
Narcotics Anonymous	520-881-8381	
Nicotine Anonymous	520-299-7057	
Overeaters Anonymous	520-733-0880	
Recovery in Motion	520-975-2141	
Sex/Love Addicts Anonymous		
	520-792-6450	
Sex Addicts Anonymous	520-745-0775	

Are you a resource? Send your request by email to

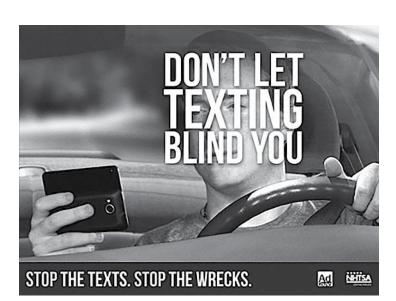
800-842-4487 520-829-1012

520-323-9372 520-887-2643

520-403-3559

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
Tucson Al-Anon Information	520-323-2229
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
	602-279-3838
Cocaine Anonymous 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	
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

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Email: barb@togetheraz.com Recovery Together Enterprises, LLC 10105 E. Via Linda, Suite A103-#387

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Back-To-School: An Opportunity To Help Parents and Caregivers Prevent Underage Drinking And Drug Use

By: Johnnetta Davis-Joyce, M.A., Director, SAMHSA's Center for Substance Abuse Prevention

A new school year often brings a fresh start for children and their families. A new opportunity to wake up on time, get homework done early, and accomplish academic goals together. For parents, it's also a time to revisit conversations with their children about alcohol and other drugs. According to SAMHSA's 2018 National Survey on Drug Use and Health, an estimated 2.2 million adolescents ages 12-17 and 18.8 million young adults ages 18 to 25 had consumed alcohol in the past month. The same survey found that in the past year, 3.1 million adolescents and 11.8 million young adults had used marijuana, and 699,000 adolescents and 1.9 million young adults had misused opioids.

One way to help prevent underage drinking and drug use is by talking with children about the risks. SAMHSA's "Talk. They Hear You." is a national media campaign that provides resources for parents, caregivers, and other adult role models to help them have conversations about alcohol and other drugs with children, starting as young as nine years old. Although it may not always seem like it, children do hear the concerns of their parents and other adult role models, which is why it's so important to discuss early and often the risks of using alcohol and other drugs.

It's also important to have conversations with children about alcohol and drug use throughout the year, and now is the perfect time to start. Having these conversations regularly keeps the lines of communication open for both adults and children to address any questions or concerns as they come up. It also relieves the worry of needing to cover every talking point in one big conversation.

Don't know where to start? Keep these five conversation goals in mind:

- Show you disapprove of underage drinking and drug use. Send a clear, strong, and consistent message that you disapprove of drinking and using or misusing other drugs.
- Show you care about your child's health, wellness, and success. Reinforce why you don't want your child to drink or use other drugs—because you want your child to be happy, healthy, and safe.
- **Show you're a good source of information** about alcohol and other drugs. You don't want your child to learn about alcohol and other drugs from unreliable sources. Establish yourself as a trustworthy source of information.
- Show you're paying attention and you'll discourage risky behaviors. Show you're aware of what your child is up to, as young people are more likely to drink or use other drugs if they think no one will notice.

Build your child's skills and strategies for avoiding drinking and drug use. Talk with your child about what they can do if faced with a difficult decision about alcohol and other drugs, such as texting a code word to a family member or practicing how they'll say "no thanks."



Where Healing Starts and the Road to Recovery Begins...

Aurora Behavioral Health System is Arizona's largest free-standing psychiatric hospital system with 238 beds within two facilities serving adults and adolescents throughout the entire state of Arizona. The Glendale hospital has 100 beds, and the Tempe hospital has 138 beds. Both facilities pride themselves on having full-time internal medicine doctors on staff, in addition to board certified psychiatrists and addictionologists. As a leader in behavioral health for more than 10 years, Aurora has transformed the traditional psychiatric hospital experience into one that takes a more holistic approach. Our expert staff believes in healing the entire person - physically, psychologically and spiritually, while personalizing treatment to achieve the best outcomes. We are committed to the wellness of the community through partnerships, development of new programs, prevention, and treatment. Aurora does this by offering a full continuum of behavioral healthcare services to meet the individual needs.

For more information, or to schedule a 24/7 confidential assessment, please contact Patient Services - 480.345.5420

Aurora is the winner of Ranking Arizona's Top Behavioral Rehabilitation Facility for 2018!







