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Inspiring Success on the Road to Recovery

MARCH 2021

Pandemic Amplifies Postpartum Depression for Arizona Moms

By Dr. Valerie M. Kading
DNP, MBA, MSN, PMHNP-BC
Group Chief Executive Officer

Many women across Arizona and the country experience the “baby blues” after giving birth. However, the American Psychological Association reports that as many as 15% to 20% of pregnant and postpartum women also endure the debilitating — and potentially life-threatening — impact of clinical depression. Known as postpartum depression (*and perinatal depression in women who are pregnant*), the condition is a complex mix of physical, emotional, and behavioral changes that can negatively impact not only the mother, but the baby and other members of the household as well.

Postpartum depression has been recognized for years by healthcare providers as a serious health issue. Today, though, the COVID-19 pandemic has amplified the condition in many new moms as the global health crisis continues to add new layers of stress from issues such as isolation and economic anxiety. The result: America is now facing a postpartum depression crisis, hidden inside the pandemic.

In fact, a study released last December by Brigham and Women's Hospital in Boston suggests that pandemic-induced anxiety and depression is affecting as many as 36% of women before and soon after childbirth. About nine percent of new



“It’s time to return our focus to mothers”

mothers said they felt a strong sense of grief, loss or disappointment because of the pandemic; this group was five times more likely to experience significant mental health symptoms, according to the study.

“The pandemic has increasingly brought to light the challenges these women have with maternal mental health issues,” said Dr. Valerie Kading, CEO of Sierra Tucson, a treatment facility specializing in mental and behavioral health concerns. “These women can’t have visitors in the delivery room, and they may not have support from family living out of state because of travel concerns. Mothers with older children also are juggling work from home and distance learning for their kids, on top of caring for a newborn; they may have financial or job worries. These women may be, essentially, starting their new journey of motherhood in isolation.”

What’s more, the pandemic has fueled increases in substance abuse and domestic violence — both from which perinatal and postpartum women can be at greater risk of suffering.

Women with perinatal or postpartum depression can also experience a great deal of shame, preventing them from talking about their condition or seeking help. “The media — from TV and movies to magazines and social media — frequently portray mothers as happy and joyful,” Dr. Kading explained. “Mothers of newborns who don’t display the positive emotions that we’re used to seeing in the media can be made to feel like there’s something wrong with them, and only them, increasing their

feelings of isolation and amplifying depression.”

“It’s absolutely time for the focus to return to mothers, especially new moms,” Dr. Kading said. “The way a mother feels is so important to a child’s development, even while the child is still in the womb.”

Depression’s effects on babies, moms and families

The impact that a mother’s depression can have on family members is wide ranging. For example, perinatal mood disorder—depression that occurs during pregnancy—can cause the mother to adopt unhealthy behaviors such as use or abuse alcohol or drugs—which can result in inadequate fetal growth and neurological-language skills issues as the child matures.

Postpartum depression, which can manifest in a mother anytime from delivery up to a year after the baby is born, can have lifelong ramifications. Depressed mothers are less likely to breast feed, for example. According to the Centers for Disease Control and Prevention (CDC), breastfeeding reduces the risk of heart disease, Type 2 diabetes, ovarian cancer, and breast cancer for the mother. Benefits of breastfeeding in newborns include a reduction in the risk of asthma, obesity, Type 2 diabetes, ear and respiratory infections, and sudden infant unexpected death syndrome (SIUDS).

— POSTPARTUM *cont. page 4*

Resources for Post Partum Depression

If you suspect that you or someone you know may be suffering from perinatal or postpartum depression, know that there are resources that can help, including:

Mental Health America

National Alliance on Mental Illness
800-950-NAMI (6264)

National Institute of Mental Health
National Suicide Prevention Lifeline
800-273-TALK (8255)

Postpartum Progress

Postpartum Support International
800-944-4PPD (4773)

The Substance Abuse and Mental Health
Services Administration’s treatment locator:

www.samhsa.gov/find-treatment

Sierra Tucson, (253) 299-9742

www.sierratucson.com/programs/postpartum-depression



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Publisher's Note

By Barbara Nicholson-Brown
barb@togetheraz.com

Praying for Patience

I've never been the most patient person in the world, yet the pandemic has taught me to be still when I most wanted to move about. With all of the unprecedented changes we faced in 2020, to be safe, healthy and alive has been worth the wait.

Being still.... forced the lessons I needed to become more grateful, quiet and introspective. It heightened my connection to my higher power —because that is where I know I'm safe. I didn't turn to drink or drugs to ease the isolation, fears and unknowns.

Like you, I found new ways to connect and stay in touch with my tribe. And like many others I miss what was, wondering what lies ahead. But I can't jump too far ahead — I have to continue to practice, practice patience and stay with the gift of another moment.

A very big thank you to Dr. Valerie M. Kading of Sierra Tucson for our feature on postpartum depression and the pandemic. To all of our contributors and advertisers, **Together AZ** would not be here without you. We are honored to work with you as we all inspire others for a successful journey on the road to recovery. Stay safe and healthy.

Together AZ

www.togetheraz.com
602-684-1136

Email: barb@togetheraz.com

Recovery Together Enterprises, LLC
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It's Okay to Talk About SUICIDE

Thoughts of giving up and suicide can be frightening. Not taking these kinds of thoughts seriously can have devastating outcomes.

Suicide is **NOT** the answer.

2nd Suicide is the 2nd leading cause of death for people ages 10-34

The overall suicide rate has increased 31% since 2001

Suicide is the 10th leading cause of death in the U.S.

46% of people who die by suicide have a diagnosed mental health condition

90% of people who die by suicide have experienced symptoms of a mental health condition

HIGH RISK POPULATIONS

75% of all people who die by suicide are male



4x Lesbian, gay and bisexual youth are four times more likely to attempt suicide than straight youth

Transgender people are 12 times more likely to attempt suicide than the general population

12x

If you are concerned about suicide and don't know what to do, call the National Suicide Prevention Lifeline at 1-800-273-8255.

If you start thinking about suicide, seek help. Call or text a crisis line or a trusted friend.



Make an appointment with a health care professional to talk about what you're thinking or how you're feeling.



Suicidal thoughts are a symptom, just like any other — they can be treated, and they can improve over time.



Data from CDC, NIMH and other select sources. Find citations for this resource at nami.org/mhstats

NAMI Helpline 800-950-NAMI (6264)

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Who Knew?

By Dina Evan, PhD

I have had an amazing life! I survived a childhood without parents and discovered the strength I have inside. I raised four kids without support or partners and discovered what is really important in life. I've marched for AIDS funding with Whoopi, fasted 37 days on water for the ERA with six other women warriors including the help of Gloria Steinem, Sally Field and Dick Gregory. I've taught more than a thousand people how to create conscious relationships and walked beside hundreds of people on a path to healing...and then, unexpectedly, **OLD** arrived with the rude and cruel reality I was not wonder woman and not impervious to falling apart, limb by limb or organ by organ. Who knew? I didn't!

Life for me, as I have shared with so many of you, is filled with holy moments, the kind that take your breath away and bring some new lesson your spirit has decided you are ready to learn. I adamantly deny that I was ready for this one. However, just as every new lesson in my life has done, this one brings new awareness' and new gifts, damn it. My mother died when I was young, as did my grandparents, so I never knew what aging and being old felt like to them. I know now, and a truth often said with flippant offhandedness, that aging is not for sissies is a bold truth that can come with a sledge hammer.



When you are old....

You can't move fast in a world that goes 90 mph. You require extra equipment, walkers, oxygen, canes and other things that require loading and unloading. You can't grocery shop and getting things delivered is often fraught with difficulty because of added expense or careless shoppers. So you eat more frozen, easier to fix food, other than fresh and loved filled nutritious dinners. You may need to be near restrooms more frequently and what is most disturbing is that all those precious lessons you learned as you inched toward old, become irrelevant to those around you and so do you and what you know. They simply have no desire to hear it, so people visit less, call less, and value you less. They don't mean too. It's just that the burdens of this era, and perhaps those of the past, are horrendous and so we seek to spend any free time we can eke out just having fun. We have been taught that joy and fulfillment come from what we can acquire and what toys we have rather than what we feel and share. Older people are perceived as just not that much fun.

However, this too is a I'll be 79 this month holy moment so what is this kind of holy moment here to teach me, us? Well, I now understand that what I missed with not being near my grandparents can never be retrieved and I regret that so much. I don't know how they felt or what great lessons and knowledge they could have shared with me. I also have learned that no matter what the majority of the world may think, what I know is important and my job is to share it no matter who might, or might not, listen.

I am starting podcasts and I will keep sharing. I also am having to look death in the face, hopefully not too soon, but clearly sometime not too far off, so I am thankful for these awareness' because I still have time to ask myself, **"Have I done everything I came here to do? What is still not done? Who do I need to reach out to and help? What do I need to give myself in the way of peace in this process?"**

I am not afraid because my belief is that we never actually die. Our spirits simply go to place where we review the lessons we have learned in each incarnation, and then we decide when we are ready to return to earth —which is our soul school — we choose what we wish to learn next and we return. The process does not stop until we reach a state of enlightenment and no longer need this school. The bottom line is, every moment and holy moment in life is rich with learning and possibility....and who knew? Now you do.



Dr. Evan is a marriage, family, 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 602-571-8228.

— Postpartum from page 1

Depression also can prevent mother and infant from bonding, can cause the mother to neglect older children in the household and can place strain on her marriage or other partner relationship – “increasing the chance of divorce,” Dr. Kading said. In rare cases, postpartum depression can endanger the mother's life, as well as her family's, if the mother harbors thoughts of suicide or harming others.

Help is available for mothers

“I want to let mothers know that they're not alone,” Dr. Kading continued. “Yes, perinatal and postpartum depression are challenging, but there are trained mental health professionals available who are passionate about helping mothers in need.”

To start, Dr. Kading advises that people close to a new mom – family members, friends, even co-workers – be on the lookout for signs that she may be struggling with depressive feelings. Signs to watch for include sleep disturbances such as insomnia or sleeping excessively, appetite changes, anxiety or nervousness, excessive fatigue, extreme or frequent mood swings, feelings of low self-worth or hopelessness, thoughts of death including suicide or of harming others.

Everyone in a mom's circle – a partner, friend or family member – can help her in some way to cope with and overcome depression. Listen to her concerns without judgment, remind her that postpartum depression is a diagnosable medical condition and that treatment is available, offer to help in specific ways such as babysitting her other children so she can engage in some self-care, refer her to treatment options such as out-patient or online therapy.

Remember that a mom's circle includes her pediatrician, ob-gyn or other primary care provider. If you have concerns that you may be experiencing perinatal or postpartum depression, open up to your doctor, who can offer helpful suggestions and recommendations for treatment. The same advice goes for dads, too — talk to your doctor if you think your partner may have depression. In fact, postpartum depression has been diagnosed in men as well; know that your physician is there to help.

Among the resources available to Arizona residents, as well as mothers across the country, is Sierra Tucson, a nationally-recognized mental health and substance use treatment center. Sierra Tucson recently launched a new, virtual intensive outpatient program for women who are struggling with prenatal depression, postpartum depression, and perinatal mood disorders.

“Sierra Tucson has been committed to working with women for many years,” Dr. Kading said. “Postpartum depression is an under-recognized and under-diagnosed condition, and it's a vitally important diagnosis to identify and treat. Women who suffer from postpartum depression tend to not engage fully with their baby and tend to not care for their child, which is a setup for lifelong negative consequences.”

“Our intense passion for and expertise in women's mental health has guided the birth of our **Maternal Mental Health Virtual Intensive Outpatient Program**,” Dr. Kading continued. “Expanding access to the program with dedicated therapists and medical professionals, who not only understand, but who are also specially trained and certified to provide women's mental health treatment, can impact the health of women and their families for generations.”

Sierra Tucson is offering this new program completely virtually using a secure online environment so that women participating can choose a safe and comfortable location that is best for them. All they will need is a private space and a video-enabled computer, tablet or smartphone.

The specialty program includes nine hours of care per week (three-hour sessions, three days per week) featuring curriculum built using evidence-based treatment methods such as cognitive behavioral therapy, mindfulness based therapy, and music therapy. Participants can expect to take part in group therapy sessions, which provide a supportive environment where they can discuss their feelings and challenges. All sessions are led by clinicians who are specially trained in treating postpartum depression and perinatal mood disorders.



Dr. Valerie Kading is the CEO of Sierra Tucson, where she provides the strategic vision to ensure that the facility's patients and their families receive the most innovative, compassionate, and leading medical and psychiatric treatment for trauma, addiction, and other mental health conditions from a world-class staff of clinicians and behavioral health professionals.

Dr. Kading brings to Sierra Tucson a special interest in women's mental health including perinatal mood disorders, maternal well-being, and postpartum depression.

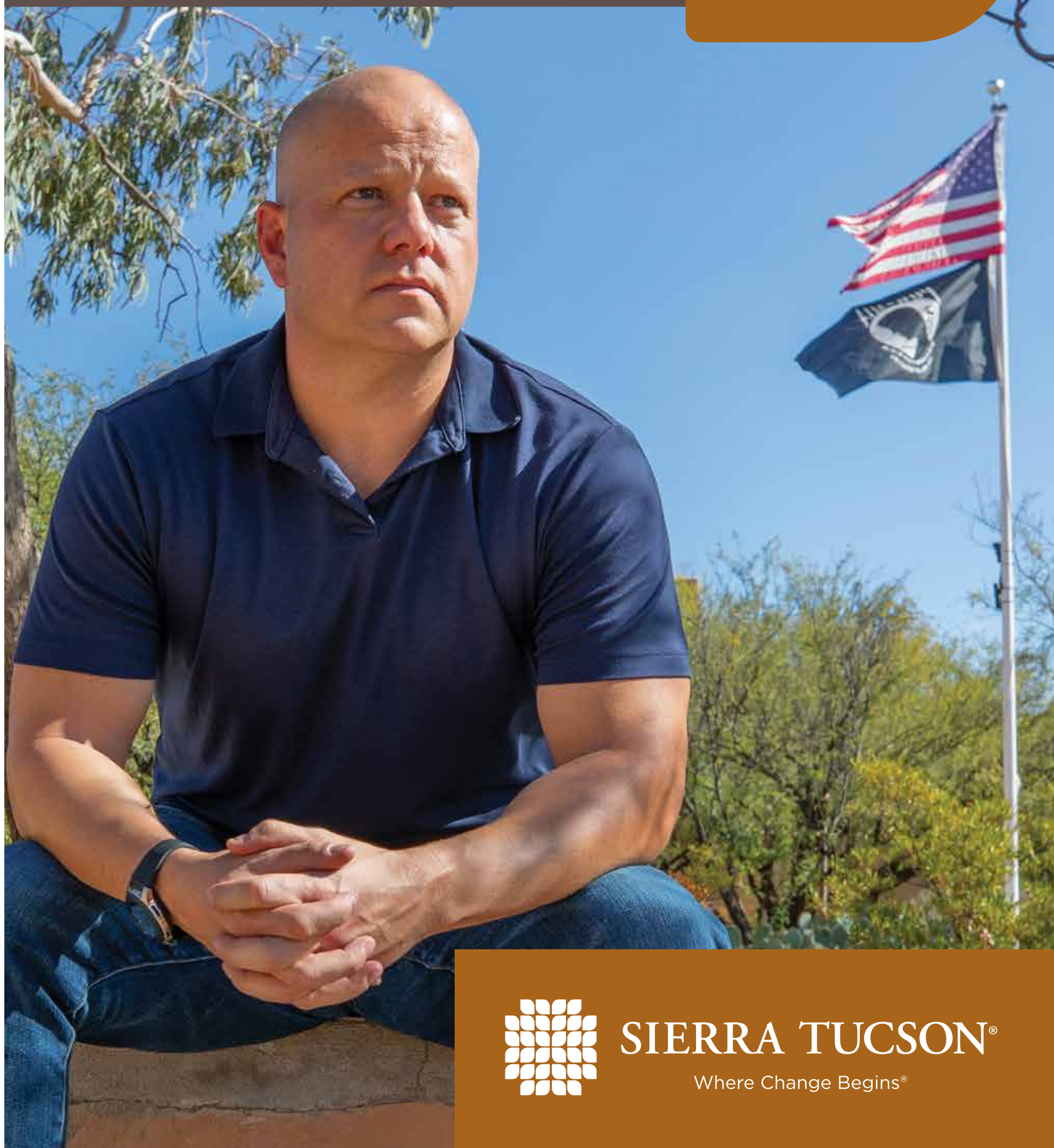
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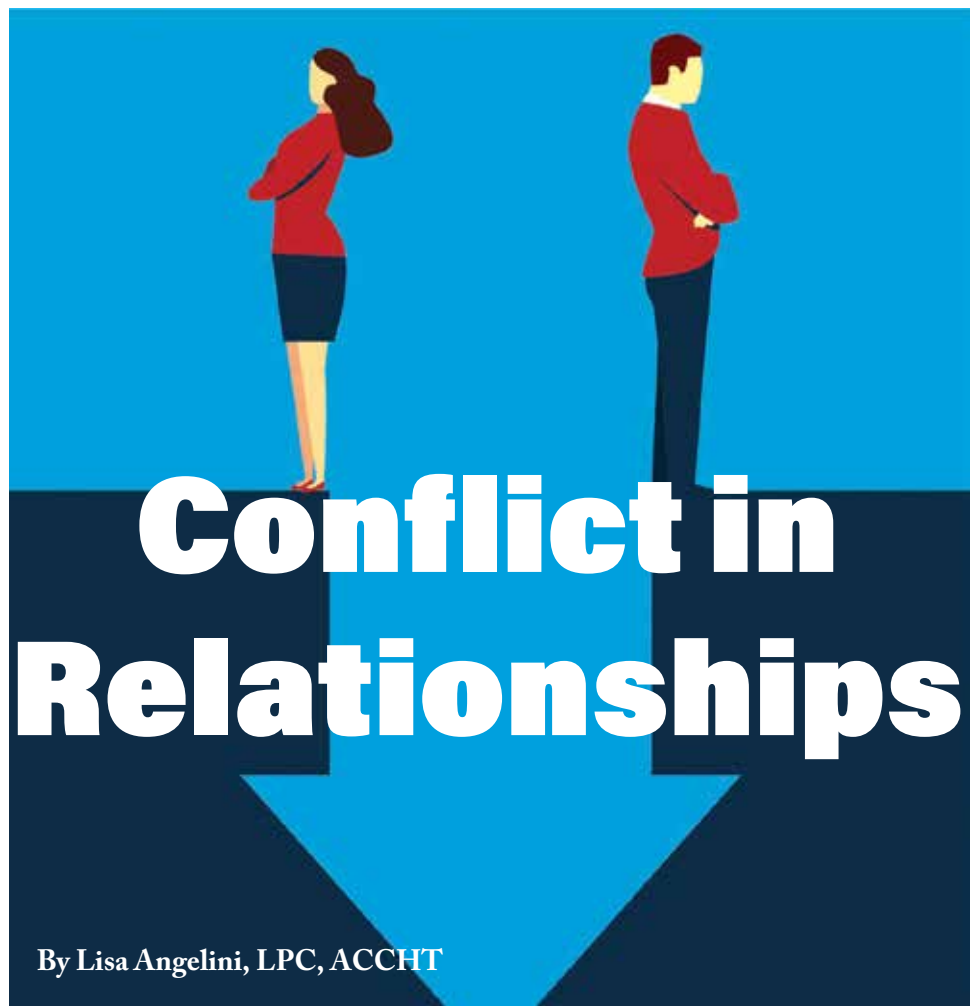
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It can be difficult maintain a loving attitude toward your partner in times of conflict. You may desperately want to connect but feel more distant and disappointed as communication attempts go nowhere. In those times you may develop anger and resentment due to the same old pattern presenting again.

Depending on the severity and nature of the issue, the approach taken may differ. For example, in an abusive relationship, this type of communication will not be sufficient. For the purpose of this article general relational issues will be addressed.

Examine potential triggers and your reaction to them from a neutral stance or “observer” point of view. Does something in your partners behavior trigger an unhealed issue from your past relationship or childhood experience? Is there a mirror that your partner is reflecting that is something that you mimic yourself? For instance, if you feel abandoned by your partner, how might you abandon yourself in your life by not following through or taking care of yourself? This doesn’t mean that your relational issue doesn’t exist, however may point you in a direction where you may need further healing. This unhealed issue is likely to impact the quality of your relationship.

Many issues stem from inefficient communication or lack of boundaries. A common mistake is to assume that your partner knows how you feel or should know better. If your partner is also triggered due to past trauma, they may be repeating behaviors that are dysfunctional.

Damaging behaviors that destroy relationships:

- **Avoidance/Distancing** — Avoiding the issue, refusal to communicate about the issue, one word answers, one sentence texts.
- **Silent Treatment**— purposely not engaging at all with the goal to cause hurt. This behavior is abusive and must be stopped immediately.
- **Withdrawal**— Partner is emotionally distant, keeps to themselves.
- **Withholding**— Refusal to express love or offer nurture and caring. *“The lights are on, but no one is home”.*

Being on the receiving end of these behaviors may lead to emotional pain, hurt, anger, and resentment. **The Feedback Loop** (by Pia Melody) is a format for healthy, loving communication and boundary setting.

- Do not blame, accuse, shame, manipulate or judge. Drop defensiveness or the need to be right.
- Do remain open, honest and loving. Remember that your partner may be acting from a wounded place. Listen out of curiosity. Listen with the intent of knowing your partner better.

Data: Report the behavior

When you distance from me.....

What you think:

I think that you don’t care about me and no longer love me....

What you feel:

About that I feelhurt, sad and lonely....

Vulnerable Request: What you would like instead

In the future, I would prefer ifyou please tell me what is going on for you.

You must have a willing partner as you can’t have a one -way conversation or relationship. Seek help from a qualified therapist to learn skills and get to the root of any unhealthy behaviors that are getting in the way of having a healthy relationship.

Lisa Angelini, LPC, ACCHT Holistic Psychotherapist and Life Coach
www.lisaangelini.com

Meadows Behavioral Healthcare Launches The Meadows Institute

Trusted treatment leader establishes foundation to bring hope and healing through scholarships, research, education, and awareness

Meadows Behavioral Healthcare, the leader in trauma, addiction, eating disorders, and co-occurring disorder treatment for more than four decades, has established The Meadows Institute, a 501(c)(3) foundation committed to helping individuals, families, and communities achieve sustainable, lifelong recovery.

The Meadows Institute plans to make an impact through four interdependent priorities: partnering with treatment programs to provide scholarship aid, investing in community-based behavioral health awareness, offering continuing education for professionals, and working to advance research on trauma and addiction.

“Each of those initiatives was established to support our overall vision of hope and healing,” explained Sean Walsh, CEO of Meadows Behavioral Healthcare. “We’ve seen firsthand that recovery is possible and can change lives. The Meadows Institute is an opportunity to harness the expertise and leverage the stellar reputation of The Meadows to make recovery possible for more people.”

The Meadows Institute’s first major fundraising event, **The Golf4Recovery Invitational**, will take place May 14, 2021 at The Phoenician Golf Club in Scottsdale, Arizona.

Proceeds will benefit Mental Health First Aid, which offers support groups and counseling for frontline healthcare workers through Banner Health Foundation. Registration is \$225 per player or \$900 per foursome and includes green fees and golf cart, lunch and refreshments, an awards ceremony, prizes, and a hole-in-one challenge.

It’s hard to find someone who hasn’t been impacted by addiction, trauma, or mental health issues. More than 27 million people in the US reported using illicit drugs or misusing prescription drugs in the past month, and nearly a quarter of adults and adolescents reported binge drinking in that same period, according to data from the US Department of Health and Human Services. At the same time, 70% of American adults report having experienced some type of traumatic event at least once in their lives. There’s an economic burden to consider as well, with addiction costing the US \$249 billion each year.

The problem can seem overwhelming, but those at The Meadows Institute know that intervention, education, and treatment make a difference. They believe that by enlisting the help of the experts they have at their disposal they can help stem the tide.

The expertise of the Meadows Senior Fellows is at the core of everything The Meadows Institute does. This talented group of thought leaders brings experience in a variety of specialties from across the behavioral healthcare spectrum. Their focus on advancements and innovations in treatment has helped Meadows Behavior Healthcare offer some of the most respected and comprehensive programs in the industry.

“The Meadows Institute benefits from the wisdom of Meadows Behavioral Healthcare’s 40+ years in this industry, and in turn, the foundation will enable us to share this knowledge with many more individuals, families, and their communities,” said Jim Dredge, Meadows Behavioral Healthcare’s Executive Chairman of the Board.

The Meadows Institute will be funded by tax-deductible donations from individuals and organizations passionate about treatment and changing lives. Contributions will allow others to partner in the mission to champion sustainable, lifelong recovery. **For more information, visit TheMeadowsInstitute.org.**

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Andre House Partners with Community Bridges, Inc. for Shelter

Andre House, which provides services and support for the poor and people experiencing homelessness, has entered into a multi-year agreement with Community Bridges, Inc. (CBI), an integrated behavioral healthcare agency, to operate and manage a proposed 100-bed homeless shelter for individuals experiencing homelessness. CBI will manage intake and processing of clients and all shelter operations.

The shelter will be located in a building to be renovated adjacent to the Andre House at 213 S. 11th Ave. pending Phoenix City Council approval of a current zoning request change seeking 275 additional beds at Central Arizona Shelter Services on the Human Services Campus, just west of the Andre House. The zoning request also includes approval for the Andre House low-barrier shelter and 200 ad hoc emergency beds during extreme weather to be located in the St. Vincent de Paul Dining Room at HSC.

“Community Bridges brings tremendous experience and expertise in the management of facilities providing housing services for men and women experiencing homelessness,” said Andre House Director Fr. Dan Ponisciak. “Together, we can bring much-needed support, safety and comfort for hundreds of men and women experiencing homelessness.”

Fr. Ponisciak said Andre House will pay for renovations to expand the current 5,000-square-foot building to meet City of Phoenix requirements necessary to accommodate 100 beds and will provide ongoing maintenance. City requirements include appropriate number of showers and restrooms. The shelter also will provide laundry facilities.

Andre House will provide meals to the shelter using its existing industrial kitchen where meals are prepared each evening for hundreds of men and women experiencing homelessness.

“We look forward to partnering with Andre House in operating the proposed shelter that is so badly needed in the community,” said CBI President and CEO John Hogeboom. “Addressing homelessness and other social determinants of health are of critical need in the Valley and a need that CBI is passionate about..”

Andre House also offers laundry facilities, a clothing closet, showers, lockers and legal services.

In addition to the wide breadth of integrated behavioral health services offered by CBI, it also operates homeless-specific programs ranging from “bridge” to transitional and permanent supportive housing.

For more information about CBI, visit www.communitybridgesaz.org. For more information about Andre House, visit www.andrehouse.org.



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“A crisis often brings out the best in you and you discover qualities that you never knew existed within.” Siddhartha



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Thresholds Don't Go Anywhere

By Ken Wells

We shall not cease from exploration and the end of all our exploring will be to arrive where we started and know the place for the first time.”– T.S. Eliot

Thresholds indicate a point of beginning. I will never forget when I stepped across the threshold of the first Sex and Love Addicts Anonymous meeting I ever attended, in Tampa, Fl. Immediately, I bumped into a woman whom I knew from church. Since I was one of the pastors in the church I was mortified. With trepidation I said hi and she responded “I won’t tell on you if you won’t tell on me.” Thresholds have been scary for me. Yet throughout the 30+ years of attending recovery meetings I must tell you thresholds in recovery have signaled beginning places for further growth.

I was taught to approach my recovery with a beginner’s mindset. Through the years this has been the most difficult mindset for me to harness in my daily life. By nature, I become like a robot and go through the motions of daily living and easily disconnect from the present moment. It has taken many thresholds to teach me the value of being in the present moment. I continue to cross thresholds each day in my life that remind and teach me the importance of being present in the moment, even when the moment is painful or dreaded.

Laramie Peak is the highest peak of the Laramie Range in Wyoming. It is a moderately steep hike to the top. I have hiked Laramie Peak several times. Once I searched for the easiest way to the top. While scrambling around the mountain looking for the easiest approach I was brought back to the trailhead. I recognized that in my attempt to avoid the established trail my search brought me back to the beginning. I decided to cross the threshold of the trailhead and head up the mountain. There have been many thresholds in recovery life that I have attempted to avoid. There have been many doors in recovery that I have been hesitant to open and walk through. Like circling Laramie Peak, looking for an alternative path, the journey in life always brings me back to the threshold of a core issue that must be addressed. I can make speeches, become industrious and make money, counsel other addicts, do weekend groups and write blogs, but spiritual growth requires that I burrow deep within and address core recovery issues. When I hesitate to cross the threshold, all other projects become a distraction from personal growth.

Life can become an illusion

Even for those who take recovery seriously. I can get all caught up with attending meetings, sponsoring others, being of service to others and still not enter the doors of truth about myself that only I can go through. There is a threshold for a new beginning awaiting me with an invitation to go deeper in spiritual growth than anything I have ever known previously.

Life has a way of bringing us full circle repeatedly in order to face the truth that is required for personal growth

Thresholds for personal growth continue to reappear, waiting for our readiness to cross over. Essentially, the thresholds don’t go anywhere. We do. Thresholds just wait for us to be ready to take in what is true about living.

You may have already learned a lot about living

How to make a living. How to be responsible to your family. How to remain sober from addiction. Yet, the force of life remains constant and will bring you back to the threshold you need to cross for your personal growth. When you slow the pace of your life from the busyness that comes from juggling the ball of activity in your life, what door keeps reappearing that you need to enter? Is there a threshold that you have been hesitant or resistant to cross? Do you experience painful relationship issues that loop and circle in your life? It could be that life force is telling you that now is your time to cross over this threshold and face what you have been avoiding. Likely, the only way out of your dilemma is to go through it. If we choose to listen and make the decision to be true to our heart it will always lead us to face the threshold that we have been resistant to cross. Eliot stated it concisely “we shall not cease from exploration and the end of all our exploring will be to arrive where we started and know the place for the first time.” What threshold are you waiting to cross?

For more information on Ken Wells, Psychological Counseling Services or the PCS Intensive Program, please visit <https://pcsintensive.com>



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American Youth Raise Awareness for Suicide Prevention through Virtual Events

*Out of the Darkness Campus Walk Dates Announced for 2021 by the
American Foundation for Suicide Prevention*



Suicide is the second leading cause of death for those aged 15-24. To help prevent this leading but preventable cause of death, the American Foundation for Suicide Prevention (AFSP) has adapted the **Out of the Darkness Campus Walks** to virtual events, enabling young people to participate in various ways of their choice online and in other physically safe settings. Organized by students from schools across the country, these virtual walks will create a way for youth and young adults to raise awareness and funds to help combat this leading cause of death. **To find your local event: afsp.org/CampusWalks.**

"These events help inform our youth about mental health and suicide prevention, and create opportunities for connection. Research shows that staying connected is one action that helps safeguard our mental health and that reduces suicide risk," said Robert Gebbia, AFSP CEO. "I'm grateful to the students who spend their time organizing these events, and raising awareness for suicide prevention. It is through their efforts that we can make a difference and save lives."

The first event will be on March 13 and will continue throughout the spring with nearly 100 events planned nationwide. Each event will track participants by activity minutes logged, and feature an opening virtual program with speakers such as teachers, students, mental health clinicians, school administrators, and local AFSP chapter board members. It is common that during the opening ceremony, students will share their personal connection to the cause of suicide prevention, encouraging others to open up and showing that it's okay – even healthy—to talk about mental health and suicide. To follow along with the participants as they make progress in this work, follow **#OutoftheDarkness** and **#HopeWalksHere**.

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Sex/Love Addicts Anonymous
520-792-6450

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520-745-0775

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Thank God, It's Monday

In 1965, an entrepreneur named Alan Stillman founded a restaurant on the east side of Manhattan called TGI Friday's, or more specifically, Thank God It's Friday, because he realized most working people couldn't wait until the weekend so they didn't have to toil at a job they didn't like. In the half century since, the chain has grown to more than 900 units in some 60 countries. Now privately held, the restaurant rings up an estimated annual revenue of \$1,500,000,000. (That's one and a half billion dollars per year.) That's an awful lot of people who don't like the work that they do.

When I teach my workshop, "**Spirit & Money: Prospering by Doing what you Love,**" as I have for the past 25 years, I offer these facts to the students, and then ask them what kind of reaction Wall Street investment bankers would have if they went into their offices to propose funding for a restaurant chain called Thank God It's Monday. It never fails to get a big laugh.

I then ask them if they know when the highest concentration of people have heart attacks and strokes in our country is. Somebody always knows the sad fact: that it's Monday morning, as people are preparing to go to work or are already on their way on their twice-daily commutes.

These pair of facts doubly underscores Stillman's original insight: people don't like what they do for a living and can't wait until the weekend to have some fun. The obvious logical conclusion, of course, is that Monday is the worst day of their week. For every person disconnected from his dharma, this is likely to continue to be the case for some time to come. But for those who have taken the time to discover what makes them tick, what passions they have for turning their gifts and talents into products and/or services, weekends are great, but so too is the work week.

For the longest time I took off only one day a week. I enjoyed my work a great deal, and didn't feel I needed "time off" from those pleasurable activities of coaching people into breakthroughs, teaching them meditation to contact their transcendental Source, leading transformational workshops, and writing books. In time, in response to my wife's desire to share more time together, I began to take off a second day each week. If I'm not teaching a workshop on the weekend, I'll usually take off Saturdays and Sundays, since those are the days when the most leisure events are held. While I enjoy our time together, having fun with each other and with friends and family, by Sunday night I'm eager to get back to what others call work and I experience as play.

It's not because there's something special about me, it's because when you love what you do for a living—your loveliness—feels as much as a kind of play even though the rest of the world calls it work. As Stephen Leacock said about the inventing genius who brought the world the electric light bulb, the movie camera, and sound recording. "What we call creative work ought not to be called work at all, because it isn't. I imagine that Thomas Edison never did a day's work in his last fifty years."

So this weekend, when you are taking time off from that thing you do during the week so that you can leisurely enjoy the weekend, write down your favorite pleasures, isolate the one you'd most be willing to get paid to do, and then turn that pleasure into a product and/or service you can bring into the world. When you do that, the world responds by giving you money. You can augment the income from your job with this newly-discovered pleasure-based business. In time, if you give it enough time and energy, you can turn it into enough of a success so that you can quit your work and devote yourself to your pleasure. That's when you'll discover that you, too, won't be able



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Resources & Helplines

The providers listed are available to assist you. In an emergency dial 911

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Al-Anon	602-249-1257	NDMDA Depression Hotline – Support Group	800-826-3632
Tucson Al-Anon Information	520-323-2229	Narcotics Anonymous/Phoenix	480-897-4636
Adult Children of Alcoholics	aca-arizona.org	Narcotics Anonymous/Casa Grande	520-426-0121
Arizona Addiction	602-737-1619	Narcotics Anonymous/Flagstaff	928-255-4655
AZ Women's Recovery Center	602-264-6214	Narcotics Anonymous/Prescott	928-458-7488
Bipolar Wellness	602-274-0068	Narcotics Anonymous/Tucson	520-881-8381
Child Abuse Hotline – Support & Information	800-422-4453	Nar-Anon Family Groups	(800) 477-6291
Cocaine Anonymous	602-279-3838	National Youth Crisis Hotline	800-448-4663
Co-Anon	602-697-9550	Overeaters Anonymous	602-234-1195
CoDA	602-277-7991	PAL (Parents of Addicted Loved Ones)	480-300-4712
COSA	480-385-8454	Parents Anonymous	602-248-0428
Crisis Help Line – For Any Kind of Crisis	800-233-4357	Phoenix Metro SAA	602-735-1681
Crisis Text Line	Text HOME to 741741	RAINN (Rape, Abuse, Incest National Network)	RAINN.ORG
Crystal Meth Anonymous	602-235-0955	Rape Hotline (CASA)	602-241-9010
Debtors Anonymous	(800) 421-2383	Sexaholics Anonymous	602-439-3000
Domestic Violence	800-799-SAFE	Sexual Assault Hotline (24/7, English & Spanish)	800-223-5001
Families Anonymous	602-647-5800	Sex/Love Addicts	602-337-7117
Gamblers Anonymous	602-266-9784	Sex/Love Addicts	520-792-6450
Grief Recovery	800-334-7606	Sex Addicts Anonymous	602-735-1681
Heroin Anonymous	602-870-3665	S-ANON	480-545-0520
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