



# What? I’m positive for Fentanyl?

By Steve Carleton, LCSW, CAS,  
Executive Clinical Director, Gallus Medical Detox Centers

Gallus clients’ stories usually start the same way, “I started using pain killers after an injury” — insert traumatic event. Before they knew it, their doctor stopped prescribing to them. After this, the stories go many different directions but end similarly, “then I was introduced to M30s.”

Fentanyl has come on strong over the last 5 years. For many providers, including myself, initially it was just another drug. There was no way of knowing at that time how insidious it would become. In my work at Gallus the last two years, clients have started to catch on more, but it is all too common for a client to be surprised when their urine drug screen comes back positive for Fentanyl. “I thought I was taking Oxy?” is the most common response I have seen.

In identifying the path forward, we must first appreciate how we got here. Compassion comes from understanding. There are not many out there that have not been impacted by addiction. Whether it is someone on the street, a co-worker, friend, or close loved one, sooner or later people come face to face with the chaos and damage caused by substance use disorders.

### The Historical Progression to Fentanyl

The Sackler family with Purdue Pharma introduced OxyContin in 1996. OxyContin is the brand name for slow-release oxycodone. Despite early studies showing adverse outcomes, the company pedaled the drug to health care providers as a solution for chronic pain. The target audience was those suffering from pain related to an injury or cancer.

The amount of money invested in marketing and sales was staggering. Smooth talking and good-looking Purdue reps were sent into communities with one mission: get doctors to start prescribing OxyContin! By the mid-2000s the problem was completely out of control. Unassuming patients and doctors were finding themselves increasing prescriptions rapidly and experiencing disastrous effects from legally obtained medicine.

The hardest hit population was perhaps those in the Rust Belt. “Chronic Pain Clinics” start to pop up as some unsavory providers began to capitalize on the problem alongside Purdue Pharma. In the DocuDrama “Dopesick” about this history you witness patients being asked a few questions before they are given a prescription. As collective



tolerance and demand for the drug rose, so did the dosage of their “Golden Goose” home wrecker of a medication.

Oxycodone pills were all branded similarly. They had letters, OC, or M most commonly, and a number which indicated the dosage. Most were round pills but as they increased in dosage, they became rectangular in shape. On the streets today are “Blues” or “M30s.” These pills are counterfeit and made to look like a pharmaceutical. In reality they are crudely pressed by dealers with trace amounts of Fentanyl, fillers, and now also include synthetic sedatives to give the user a smoother effect.

In the early 2000s, OxyContin was what everyone was after. The slow-release design of the pill was a coating that was simply removed by dampening the pill and rubbing it off. With the coating removed people can smoke, inject, snort, or swallow the pill and effects were more immediate. The problem was well known and established by 2007 when Purdue plead guilty to misbranding the drug. Over the next decade the manufacturing and pushing of OxyContin slowed down.

While this slow down and accountability was critical, it left a void. Millions of Americans were physically dependent on opiates and left searching for a way to either maintain the addiction or find a way off. Street opiates were available, and heroin became a viable, albeit destructive, alternative. With the newfound, increased demand for heroin a supply problem developed.

Fentanyl became the solution because it is 50x more potent than heroin. Imagine for a second you

*“Whether it is someone on the street, a co-worker, friend, or close loved one, sooner or later people come face to face with the chaos and damage caused by substance use disorders.”*

are a drug smuggler. What is going to be easier to traffic, 50 bricks of heroin or one brick of Fentanyl? The other benefit is the manufacturing. Heroin grow operations have been replaced by clandestine labs. The overhead and law enforcement exposure are also reduced.

Effects and the high with oxycodone, heroin, and fentanyl are more similar than not. All produce a sedating effect and powerful euphoria. Descriptions of the high vary. “It is the best feeling in the world” being at the top of the list. The one metaphor that sticks out is that the high feels like being put into a warm cozy impenetrable bubble. Nothing bothers you and everything feels perfectly right in the world and life. It is easy to understand how this high would be more and more desirable as a person’s life becomes more and more unmanageable. It is a vicious and unforgiving cycle.

*Fentanyl continued page 6*





# Publisher's Note

By Barbara Nicholson-Brown  
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## Finding Freedom

While active in addiction how can we possibly be free? When I didn't want to drink, I did, when I didn't want to blackout, I did, when I announced to those who cared about me that I would stop, I didn't. Every promise made was broken. When hangover's and the repercussions from my actions became worse, I still did not stop. I could not get off the never ending vicious cycle. That is not freedom.

My thinking was incapable of finding a solution to my problem. All the tricks I tried to not overdo it never worked either. As the years went on, life became darker and the hole I was in, was getting deeper.

If we do get the chance to enter recovery, we take one very important step toward freedom. And while most of us have skewed and twisted thinking, it takes a good long while for the fog to lift, so be patient.

### How free do you want to be?

I've learned sobriety is much more than not using a drink or drug. I have to continuously ask for help and guidance when I'm all wrapped up in the bondage of my mind. My thinking still has the ability to disasterize when I'm off center. That's why I can't do this alone. My ways never worked, and they never will. The longer I'm sober — the more I need the fellowship of people who are just like me, I need their support to stay honest, vulnerable and real. It is a blessed way of living, all of it, the good, bad, triumphs and defeats. Learn from yesterday, stay in today and don't go too far in the future.

Thank you to Steve Carleton and the team from Gallus Detox for providing their insights on Fentanyl. As a nation, and in our own community we are still in crisis with the rise of fentanyl related overdoses from this deadly drug. Stay informed!



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## What Makes a Community Gel

By Ken Wells, MDiv, MA, LPC, CSAT, LSAC

I recently finished reading a fascinating book entitled *The Life of Hidden Trees* by Peter Wohlleben. He spent considerable time discussing the growth and development of the beech tree. He shared, the beech like many other trees thrive in community with other beech trees. Apparently, a beech tree deplores the oak tree and will expel it from its community. While the Oak can grow strong separate from the forest, it will not become a mighty Oak but will live out a wimpish short life in a grove of beech trees.



In community trees thrive and look out for each other. When a disease approaches or a destructive insect enters the tree community warning is sent out through a complicated network of mitochondria. Trees then produce a chemical reaction to ward off the dangerous intrusion. Beeches and other varieties of trees survive longest within a community or a grove that cultivates compatibility.

### Recovery among addicts is like a grove of trees

Addicts flourish in an environment with other addicts. There is a kind of "mitochondria" that ignites connection from one addict to another. When one group member shares open brokenness, it triggers an energy within the room for others to be vulnerable in like kind.

Last week while driving to the airport with a group of guys someone asked me if I would share how things have been going in my recovery life. I shared about the loss of my brother who had passed away recently and some

*Community continued page 10*

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## 988 launches this month

In 2020, Congress designated the new 988 dialing code to operate through the existing National Suicide Prevention Lifeline.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the lead federal agency, in partnership with the Federal Communications Commission and the Department of Veterans Affairs, working to make the promise of 988 a reality for America. Moving to a 3-digit dialing code is a once-in-a-lifetime opportunity to strengthen and expand the existing National Suicide Prevention Lifeline.

988 is more than just an easy-to-remember number—it is a direct connection to compassionate accessible care and support for anyone experiencing mental health related distress — whether that is thoughts of suicide, mental health or substance use crisis, or any other kind of emotional distress. .

SAMHSA sees 988 as a first step towards a transformed crisis care system in much the same way as emergency medical services have expanded in the US.

In pursuit of this bold yet achievable vision, SAMHSA is first focused on strengthening and expanding the existing Lifeline network, providing life-saving service to all who call, text or chat via 988. Longer term, SAMHSA recognizes that linking those in crisis to community-based providers—who can deliver a full range of crisis care services— is essential to meeting crisis needs across the nation.

## 988 FAQ's

### What is the Lifeline and will 988 replace it?

The Lifeline is a national network of over 200 local, independent, and state-funded crisis centers equipped to help people in emotional distress or experiencing a suicidal crisis. Moving to 988 will not replace the Lifeline, rather it will be an easier way to access a strengthened and expanded network of crisis call centers. Beginning July 16, people can access the Lifeline via 988 or by the 10-digit number (which will not go away).

### When will 988 go live nationally?

The 988 dialing code will be available nationwide for call (multiple languages), text or chat (English only) on July 16. Until then, those experiencing a mental health or suicide-related crisis, or those helping a loved one through crisis, should continue to reach the Lifeline at its current number, 1-800-273-8255.

### How is 988 different from 911?

988 was established to improve access to crisis services in a way that meets our country's growing suicide and mental health related crisis care needs. 988 will provide easier access to the Lifeline network and related crisis resources, which are distinct from 911.

### Is 988 available for substance use crisis?

The Lifeline accepts calls from anyone who needs support for a suicidal, mental health and/or substance use crisis.







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## notMYkid Beneficiary of 2nd Annual Golf4Recovery Fundraiser

The Meadows Institute's second annual Golf4Recovery Invitational raised \$30,000 to benefit notMYkid, a non-profit organization in Scottsdale. Funds will support notMYkid's [i]nspired Peer Program that aims to support teens and young adults navigating daily pressures, substance use disorder, and mental health challenges. notMYkid has provided Arizona youth, families, schools, and community partners with high-impact prevention education and early intervention programs for the past 22 years.



The Phoenician Golf Club was the site for the fundraiser that drew 128 golfers and 20 sponsors, including behavioral healthcare professionals, recovery advocates, and local and national businesses related to behavioral healthcare. Participants enjoyed a fun-filled day of contests, laughter, food, and friendly competition in the Arizona sunshine.

An awards luncheon followed 18 holes of

play, with first place recognition and trophy going to the Sabino Recovery team. Second place honors went to the Heritage Health/You Turn team. Paramount Recovery took third place honors.

"We are overwhelmed by the generosity of this community," said Meadows Institute Board Member Sean Walsh. "Thank you to our sponsors, golfers, and volunteers; you've made it possible to raise funds for an important cause — the well-being and emotional health of Arizona youth and families."

"With the global pandemic, we had a swift transition to virtual programs and expansion into treatment, peer support, and well-being programs to meet families' urgent and rapidly changing needs. We are grateful to The Meadows Institute for this donation and thank the recovery community for coming out to support both The Meadows Institute and notMYkid," said Kristen Polin, CEO of notMykid. The Meadows Institute wishes to extend its sincere appreciation to all the players and community sponsors.

### About The Meadows Institute

Formed in 2020 by Meadows Behavioral Healthcare, The Meadows Institute is 501(c)(3) foundation created to support individuals, families, and communities in lifelong recovery. This mission is accomplished through three initiatives: professional education, community mental health awareness, and research. For more information or to donate, visit [www.themeadowsinstitute.org](http://www.themeadowsinstitute.org).

# The Ring of Freedom

By Dina Evan, PhD

This month we are supposed to be celebrating our freedom. It takes my breath away. *In almost every area of our lives someone is trying to take our freedom and choices away just because they can—with greed and a misuse of power.* Some of those same people don't even disagree, they just bend to political pressure.



We are talking about important freedoms: having our votes count without being changed or stolen, **freedom to make decisions about our own bodies** including when and if we have had enough pain and are ready to let go, and freedom to love whomever we want regardless of gender, color, religious beliefs or anything else. Basically, they are saying we don't have the freedom to make our own choices. But they missed something. We still have the freedom to choose how we will respond.

Viktor E. Frankl in his book, *"Man's Search for Meaning,"* says "Spiritual freedom, which cannot be taken away, makes life meaningful and purposeful. It is therefore not freedom from conditions that we seek, but freedom to take a stand toward conditions." *That means you and I have the right and responsibility to make a choice about how we will respond to this deliberate erosion of our rights.*

We need to ask ourselves some pointed questions: how did women become less valuable than men, less promotable, less worthy of same salaries, less important, less electable? When did the color of one's skin or the look of our bone structure make us less lovable, valuable, less worthy of respect?

When did the chasms of separation become more valuable than respect, honor and love? *How the hell did we get here?*

Maybe we forgot what is most important...our personal, individual integrity, spirits, and ability to love and accept without judgment. When all is said and done, this whole planet is a school, here to teach us something about ourselves as a human race and as individuals and so, who do we want to be and how do we change this?

First, we stop being desensitized by supporting the hateful rhetoric and behavior being promoted on TV, in movies and in real life. We stop watching shows depicting violence to children, women, minorities, or anyone. We stop going to movies and listening to music that depicts the same. We need to stop making it profitable for those who want to marginalize any race or any gender to promote hate and violence.

No, I am not naive enough to think we will do away with crime shows and westerns but we need to stop making it so profitable for those who cross the line of decency and promote hate, judgment and separation. Showing heinous scenes of men, women and children being brutalized crosses that line and our freedom includes the right to decide how we spend our money and say **NO MORE!**

Our freedom includes the right to begin opening our hearts and personally reaching out energetically with warm accepting smiles and soft conversation to people who have lived in fear because of the kind of country we have all unconsciously created. A gentle smile, a soft hello and a helping hand can speak more than words and create more than safety. It can create peace and meaningful connections.

Freedom includes the loving acceptance of African Americans, Hispanic Americans, Asian Americans, in fact, it means remembering that all these people are Americans and even those who are not Americans, are people, human beings who deserve respect and love.

This time in our history is truly the right, perhaps even the last time, we get to step into our true selves, our spiritual selves and our freedom to be our best selves. Freedom asks us to change the direction from all that has divided us, to our spirits and humanity because we forgot who we truly are and what we truly want. Freedom asks us to discern the growth of our individual souls, the level of our individual enlightenment and the capacity of our humanity.

Freedom asks us to be loving, accepting, kind and to move humanity forward, not back or away from what we came here to do and who we came here to be...now, before freedom is a thing of the past. **Let freedom ring in you, and in me, starting now for all of us.**



*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. Visit [drdinaevan.com](http://drdinaevan.com) or call 602-571-8228.*





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Fentanyl from page 1

The Experience of Addiction

The original target population for oxycodone was low hanging fruit for several reasons. Top of the list being that they suffer, and providers want to make patients feel better. It was a perfect storm. The early benefits of pain relief in these patients are astounding. Too many times at Gallus Detox I have heard “this drug felt like the solution to all my problems in the beginning.”

The other vulnerability for using Fentanyl, or any substance one can abuse, is underlying mental health struggles. The majority of people with an addiction have experienced trauma or have an underlying mental health issue. Scholarly sources agree that between 60 and 70% of addicted individuals have experienced trauma and between 30 and 50% have an underlying mental health disorder, depression, anxiety, mood disorder, psychotic disorder, etc. Uncovering “what came first, the chicken or the egg?” is essential to recovering.

The ugliness of opioids, prescribed or purchased of the street, reveal themselves quickly. The benefits give way to an increased tolerance. More of the substance is needed for the desired effect. In turn people start to run out earlier and earlier causing uncomfortable withdrawals. The withdrawals from opiates feel like the worst flu you ever experienced. At this stage the hunt is on to get more. As things start to spiral out of control relationships with loved ones, friends, and work start to disintegrate and behavior gets risky and risky to buy, use, and recover from the substance.



*“The more effort people put into creating a support system they can lean on and that can lean back on them, the more likely they are to succeed in building a better life.”*

Earlier this year we were informed that 108,000 people died from opioid overdose in the US in 2021. An unacceptable number of others go to jail or prison as a direct result of addiction. Estimates here have been as high as 82%. For many this is how the journey ends, death or incarceration. That is a sad reality that must be contended. However, this is by far not the only outcome.

Many people recover and thrive in recovery and this trend will only improve with time. Today there is progress in reducing stigma around both mental health and substance use issues. As the country, collectively people are opening up and sharing the struggles they have faced and the positive and negative ways they have coped.

When thinking about your own beliefs, opinions, and views of mental health, addiction, and recovery, ask yourself; what do I project when these topics come up with people? If you don't like the answer to this question, it's never too late to make a change. After all, I have never met anyone that has maintained a perfect balance emotionally and cognitively. Sooner or later we all take a turn over the barrel.

Getting Better, the Gallus Way

In my 17 years in treatment of substance use and mental health I know only one thing for certain about who will be successful. If I could paint a saying on the walls of every treatment setting it would be, the only predictor of success is *days in a recovery environment*. I know from working with thousands of struggling people — those that connect survive and those that embed thrive. The more effort people put into creating a support system that they can lean on and that can lean back on them, the more likely they are to succeed in building a better life.

Experiences in treatment vary dramatically. If you are lucky, you will find compassionate and caring providers that will walk alongside you as you bump along the path towards becoming whole again. If you are unlucky, you might find yourself in a judge-y and blaming environment where providers think



suffering and feeling bad has some type of intrinsic value. Though not impossible, it is more rare people do well in this type of setting.

Historically, recovering from opioid addiction involves an uncomfortable detoxification. As depicted in movies like *Trainspotting* and *Basketball Diaries*, this is a disturbingly rough process for people. At Gallus we eliminate the physiologically painful experience for our clients.

There is no immediate value in suffering before a person recovers. Many in recovery look back on painful withdrawals and say, “I never want to go through that again.” The reality is that the fear and pain of withdrawal keep people sick for longer. Imagine that you knew you would get the worst flu of your life if you didn’t take a pill. You have a job, bills, and maybe dependents to take care of and getting sick will only lead to more problems. What do you do?

We don’t wait until people are sick before we provide medical intervention. The humane thing to do with withdrawals of any kind is to taper people off the substance. This should not be a novel approach but unfortunately it is in the field of addiction treatment.

In detox from Fentanyl, Gallus deploys an Accelerated Micro Induction. Long story short, we give small amounts of Subutex, a partial opiate, which covers the unhappy opiate receptors that cause the physical discomfort of withdrawal. In this protocol, there is risk that the client will experience precipitated withdrawal (sudden onset of acute withdrawals). Our expert medical staff are well trained in evaluating patient symptoms and ensuring the pace of the micro induction does not induce this response. For the portion of Gallus patients that have detoxed from opiates in the past, the feedback is overwhelmingly positive. We often hear, “why doesn’t everyone do it this way?”

Next Steps and Collaboration in Recovery

Detox at Gallus is the front door to recovery. We want to make sure that the opportunity for establishing connection is not lost. Helping patients through withdrawal more comfortably instills hope and confidence in the process. People inherently trust others more if they feel they care about them. The saying goes, “people want to know how much you care far more than how much you know.”

In trying to discover what came first, the substance or the pain, Gallus providers ask clients to tell us their life story. In this exploration, clients tell us what’s important, rather than the provider telling the patient what’s important through formal questions. As the story unfolds the individual relates the most important experiences they have had in life. The provider and client then work collaboratively to identify goals and ultimately what treatment, or support options are available. In this Next Step Aftercare process 87% of Gallus patients identify specific plans for how to stay connected and on the road to recovery.

Families and supports are instrumental in helping clients get help. In opioid addiction, maintaining and keeping from becoming dopesick is all consuming. There is just little bandwidth for researching and finding help. When family and supports are ready to intervene, it is imperative to have some options ready. Corraling as many supportive people and options gives the best chance for getting through to the loved one struggling. Many find themselves in the role of chief nagger and the more often an addicted person is approach, the less potent the conversation becomes.

In considering treatment and help, the guiding principle is the least restrictive but most effective care. Detox is most often the front door for severe addiction to ensure safety first and foremost. Residential treatment is a wonderful resource when people are ready for it and need a more structured environment. However, options like day treatment, intensive outpatient, sober living, and other outpatient services might be viable options to start with. Matching the client with the right treatment at the right time is something Gallus providers excel at. This process is in collaboration with client, family, and providers to ensure all stakeholders have a voice.

Light at the End of the Tunnel

Often people cynically quip, “success rates are terrible in addictions.” It is a call to inaction, an excuse to give up and stop trying. What’s worse is that it is just not true considering substance use disorders are characterized as a chronic issue. In management of other chronic medical issues like diabetes, arthritis, cancer, and even depression, the expectation is not perfection. Somehow in substance use disorders success is measured only in all or none terms.

Relapse is common but should not be characterized as failure. The hope

“When family and supports are ready to intervene, it is imperative to have some options ready.”



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in recovery is to catch deterioration quickly and increase care. Over time, if people feel comfortable accessing help when they experience problems, they will stay on an upward trajectory towards a better life. Recovery from substances is not always a straight line but it is without a doubt possible. So yes, there is Fentanyl in your system, but you can and will get better, especially if you do it together.



About the Author

Steve Carleton LCSW, CACIII, Executive Clinical Director, Gallus Medical Detox Centers

Prior to being the Executive Clinical Director at Gallus Medical Detox Centers, Steve worked in the Department of Veterans Affairs for 10 years. He is a PTSD and substance use disorder expert with over 16 years of experience in and around addiction. Steve is also an Adjunct Professor at the University of Denver’s Graduate School of Social work. He teaches cognitive-behavioral therapies, Motivational Interviewing, and assessment skills using DSM-5, amongst others.

About Gallus

Gallus Detox Centers offer customized medical detox programs for alcohol and substance use disorders utilizing our proprietary Gallus Method, which prioritizes our patients’ comfort and relief from withdrawal symptoms. Gallus has locations in Phoenix, Denver, Nevada, San Antonio and Dallas. Visit [www.gallusdetox.com](http://www.gallusdetox.com) or call 866-272-5978.

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## Healthy Ways to Cope with Distress

Stress is a natural part of life. Sometimes it can even be a helpful force for motivation. But distress isn't quite the same thing as stress. Distress causes many of the same symptoms as anxiety and depression. It can cause sleeplessness, worry, and lack of focus. But it's possible to find healthy ways to cope.

### How does distress differ from stress?

Stress is a short-term experience that typically ends when the stressful event or situation passes. Unlike stress, distress doesn't go away when the activating event is over. It's a prolonged period of emotional or psychological anxiety, hardship, or worry.

Distress often results from a stressful situation combined with a pattern or way of thinking that prolongs feelings of stress. So be patient with yourself. It can sometimes take months or years to develop successful coping skills.

#### 1. Identifying causes and triggers

Changes in personal and professional relationships, employment, or financial stability can cause feelings of distress. Learning to recognize the physical symptoms of distress, like stomachaches or sleeplessness, can help. Consider using a journal to write down the previous day's events and look for patterns that connect your feelings with important events or conversations.

#### 2. Deep breathing

Deep breathing floods your body with oxygen and can help reduce physical tension, according to studies

#### 3. Progressive muscle relaxation

Progressive muscle relaxation involves the progressive and conscious tightening and relaxing of your body's muscles.

#### 4. Mindfulness meditation

Mindfulness meditation involves focusing your thoughts on the present and meditation. Meditation uses deep breathing and gentle guidance to center your thoughts.

#### 5. Regular exercise

Physical activity is good for your mental and physical health. But you don't have to run a marathon to manage distress. Consider adding a daily walk, 10- to 15-minute yoga session, gardening, or other short, simple forms of physical activity to your routine. If you're experiencing distress that interferes with your day-to-day activities, talking with a mental health professional might be a good idea. can help you develop coping skills and work through the causes of your distress. If you think you may harm yourself due to distress, call the National Suicide Prevention Lifeline at 1-800-273-8255 or 988.

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# A Difficult but Necessary Discussion

## *Talking to Children about the Spike in Violence*

Recent shootings has evoked sadness, grief, helplessness, anxiety, and anger. Children who are struggling with their thoughts and feelings about the stories and images of a shooting often need help and guidance.

- **Start the conversation.** Talk. Not talking can make these types of events even more threatening in a child's mind. Silence suggests what has occurred is too horrible to speak about. With social media, texts, news-breaks on radio and TV, it is highly unlikely children and teenagers have not heard what took place.

- **What does your child already know?** Start by asking what they heard from the media and friends. Listen carefully for misinformation, misconceptions, and underlying fears or concerns.

- **Gently correct inaccurate information.** If your child/teen has inaccurate information or misconceptions, provide the correct information in simple, clear, age appropriate language.

- **Encourage questions,** and answer them directly. They may ask if it is possible it could happen at your workplace, or their school and are really asking whether it is "likely." The concern about re-occurrence will be an issue for caregivers and children/teens alike. While it is important to discuss the likelihood of this risk, they are asking if they are safe. Children and teens are better able to cope with a difficult situation when they have the facts about it.

- **Limit media exposure.** Limit your own exposure as well. Adults may become more distressed with nonstop exposure to media coverage.

In the immediate aftermath of any violent act, kids may have problems paying attention or concentrating. Their sleep and appetite routines may change.

In general, these reactions lessen within a few weeks.



- **Be a positive role model.** Consider sharing your feelings about the events with your child/teen, at a level they can understand. Express your sadness and empathy for victims and their families and share ideas for coping with difficult situations.

- **Be patient.** In times of stress, they may not openly ask for your guidance or support, but they will want it. Children and teens will need a little extra patience, care, and love.

- **Extra help.** Should reactions continue or at any point interfere with your children's/teens' abilities to function or if you are worried, contact local mental health professionals who have expertise in trauma.

Contact your family physician, pediatrician, or state mental health associations for referrals to such experts.

(Source: <https://www.nctsn.org/resources>)

The National Child Traumatic Stress Network (NCTSN) was created by Congress in 2000 as part of the Children's Health Act to raise the standard of care and increase access to services for children and families who experience or witness traumatic events. This unique network of frontline providers, family members, researchers, and national partners is committed to changing the course of children's lives by improving their care and moving scientific gains quickly into practice across the U.S. The NCTSN is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) and coordinated by the UCLA-Duke University National Center for Child Traumatic Stress (NCCTS).



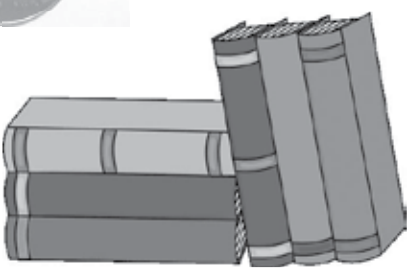
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complicated heartbreaking experiences within my family of origin. Sadness and tears overcame me as I shared. While I struggled to compose myself to continue sharing, automatically all three men in the car reached out and put their hands on my shoulder while one said I'm so sorry for all that has happened. Even as I think of that moment while writing this blog, tears well up. The "mitochondria" that existed among the men in that car provided support for me in that moment. This is the magic of group consciousness and vulnerability in recovery groups.

The network of connection within the context of a recovery community is fragile and requires ongoing tending and cultivation. Its growth and development are dependent upon every individual that steps into the confines of a recovery room. It doesn't matter how smart you are about recovery principles.

In a recovery room those who are smart are ones who realize how dumb they are about recovery. They are the ones who testify their best laid plans and thoughts got them where they are with out-of-control addictive behavior. When two addicts gather and humbly share their common shared brokenness, the mitochondria (connection) in that moment is incredibly palpable. It's what Bill W. refers to when craving is overwhelming. He says in that moment he only needs another alcoholic to tell his story to and listen to that alcoholic tell theirs. It's the connection with common brokenness shared that helps the community grow and remain vital.

Accountability is necessary in recovery community

Like other communities, when addicts gather there is a tendency to gravitate to sharing life from your head and not your heart. Most addicts learn to manage chaos by relying on their capacity to control things with their head. Group accountability holds your feet to the fire to share from your heart. It's not how much you know but sharing from the struggle in your heart that moves others to do the same.

Groups that cultivate accountability are sensitive to members who are quiet or whose shares are guarded. When one shares looking down at the floor without making contact, group conscious is concerned about the overwhelm of shame. In groups that do feedback, other members share their experience of shame and how they learn to manage shame. When feedback is not available in group, it is helpful for members to reach out after group and share their story of fear and shame and how they learned to manage these powerful emotions.

Rote disconnected shares stifle the chemistry (mitochondria) within a group. Broken open hearted shares followed up with coffees or car chats in the parking lot cultivate community connection. Phone calls and text chains throughout the week fuel the power of healing in community. Consultation activates the need for support and follow through. Most addicts live maverick lives. Addicts act out in isolation. Recovery requires the insulation that comes from ongoing consultation with a community of recovering addicts. Particularly during the onset of recovery, if you are not consulting and depending upon group conscience and individual guidance, the odds of relapse is great. The power of community will enable you to overcome the attack of craving in the same way a grove of beech trees ward off the intrusion of disease and destructive insects.

St. John of the Cross once said that "the virtuous soul that is alone becomes like a long lone burning coal. It will grow colder rather than hotter". Just as the beech tree requires a grove to thrive and live a long life, so too does an addict require the connection with a vital community of common shared brokenness.



After 25 years at PCS, Ken Wells has retired, but continues to be a contributor to Together AZ. For more about Psychological Counseling Services visit [pcsintensive.com](http://pcsintensive.com).

You can read more insights about the importance of embracing every day experiences in recovery from Ken's book "Dare to Be Average- Finding Brilliance in the Commonplace" - published by Daily House Publishing, currently on sale through Amazon.com.

"Group accountability holds your feet to the fire to share from your heart. It's not how much you know, but sharing from the struggle in your heart that moves others to do the same."



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**CBI, Inc.** 480-831-7566  
**CBI Access to Care** 877-931-9142  
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**RESOURCES**  
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Complete Care Plan: **1-866-495-6735**  
• Apache, Coconino, Gila, Mohave, Navajo and Yavapai Counties served by Health Choice Arizona: **1-877-756-4090**  
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