

THE WAY IN | HEALTHY CHOICES | GEARING UP

CARING

VOL. 20, NO. 3 | FALL 2014

SHATTERPROOF

Resources for families of those in recovery.

'DIGITAL CRACK'

The neuroscience of video game addiction.



METAMORPHOSIS

FROM ADDICTION TO RECOVERY

The Big Book

Celebrating 75 years of 12-step recovery.

Redesigning recovery

A creative agency offers a new chance at an imaginative career.

Filling the void

The spiritual roots of addiction treatment

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CHANCES ARE YOU KNOW SOMEONE who struggles with addiction.

The most recent National Survey on Drug Use and Health, sponsored by the Substance Abuse and Mental Health Services Administration, found an estimated 22.2 million persons aged 12 or older were classified with substance dependence or abuse in the past year.

That's nearly 9 percent of the adult population in America, and the costs are high.

According to the National Institute on Drug Abuse, the abuse of tobacco, alcohol and illicit drugs costs the nation over \$600 billion annually in crime, lost work productivity and healthcare.

Overdosing is now the leading cause of accidental death in the United States, claiming more than 100 people each day. The rate of overdose deaths increased 118 percent from 1999 to 2011 when 41,340 people died of an overdose, according to the Centers for Disease Control and Prevention.

When deaths of household names by overdose reach headlines, it reminds us of the potential for loss for those plagued by drugs or alcohol, but the reaches of addiction extend much further.

Any dependence on a particular substance, thing or activity is an addiction. Many of these dependencies—to such things as food, work and even texting—go unnoticed.

Neuroscientist Dr. Andrew Doan was addicted to video games ("**Digital Crack**," page 18), playing up to 100 hours per week while in medical school and starting a family. It affected his life to such a degree that he says he contemplated suicide. Now he dedicates much of his research to understanding the brain's response to addictions, including gaming.

For life-altering addictions of any kind, noticing is key.

As the founders of Shatterproof understand ("**Shatterproof**," page 29), addiction affects the whole family. It works to reduce the number of people addicted to harmful substances and to provide resources to families of those struggling in addiction. It pushes society as a whole to acknowledge that addiction isn't due to a lack of character or as a result of poor upbringing—it's a disease.

As part of its effort to do the most good, The Salvation Army has long worked to reach the spiritual roots of addiction treatment ("**Filling the void**," page 24). Its first "cheap food and shelter establishment" opened in 1891 in New York to accommodate 36 men. Today The Salvation Army operates 119 Adult Rehabilitation Centers in the United States, addressing addiction through the principles of Christianity and Alcoholics Anonymous.

The stories here range from the experience of addiction in various forms to its impact on a family, and the work to address its hold over people. It's an issue of metamorphosis, of addiction to recovery. We've included a "Do Good" section after each article with ways you can continue to learn and act around this issue.

I hope the stories resonate with you, and that you live to be healthy and do good. **C**

CHRISTIN DAVIS is the managing editor of New Frontier Publications.

Connect with Christin
website caringmagazine.org
facebook [caringmagazine](https://www.facebook.com/caringmagazine)
twitter [caringmagazine](https://twitter.com/caringmagazine)
email christin.davis@usw.salvationarmy.org



"Remember that the happiest people are not those getting more, but those giving more."

—H. JACKSON BROWN, JR.

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EDITOR IN CHIEF Robert Docter, Ph.D.

MANAGING EDITOR Christin Davis

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CIRCULATION MANAGER Arlene DeJesus

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CHARITY FRIDGE

As a simple idea to help feed the hungry, an anonymous Saudi man installed a refrigerator on the street in front of his house and invited neighbors to donate extra food so that hungry people could come and eat.



SAVING SEATBELT

A prototype from the Biomechanics Institute with funding from a research branch of the European Union measures heartbeat and respiratory pace of the driver through seatbelt and seat cover sensors. If the sensor data indicates that the driver is falling asleep, an alarm sounds to wake the driver before control of the vehicle is lost.

The U.S. National Highway Traffic Safety Administration conservatively estimates that 100,000 police-reported crashes are the direct result of driver fatigue each year, resulting in an estimated 1,550 deaths, 71,000 injuries, and \$12.5 billion in monetary losses.



COFFEE AND FREE TUITION

Starbucks teamed with Arizona State University to provide college education to more than 100,000 of its employees through the Starbucks College Achievement Plan. Their goal is for employees to “finish a college degree, tuition free.”



RECORD-HIGH REFUGEES

Last year, 32,200 people a day became refugees. That's a record-breaking 22 people every minute, according to the United Nations Refugee Agency.



SHELTERS TO SHUTTERS

Shelters to Shuttlers, a new nonprofit, places formerly homeless individuals into jobs in property management. By partnering with Old Dominion Management Services (ODMS), a leading property management company in the U.S., this pilot is designed to provide full-time employment and housing along with a mentorship program that pairs participants with leading professionals.

In the next few months, ODMS will be placing additional Shelters to Shuttlers program participants at apartment communities in Charlotte, Greensboro, Raleigh-Durham, Nashville, Dallas and Austin.

'SOCIAL' EXPERIMENT

Data scientists at Facebook recently conducted a massive experiment to see if longer-lasting moods, like happiness and sadness, can be transferred across the social network.



The company manipulated the newsfeed algorithms of 689,000 Facebook users to see an atypically low number of either positive or negative posts. The scientists noted that those who saw fewer positive posts in their feeds composed fewer positive posts and instead published more negative posts. Conversely, when the number of negative posts decreased on a person's newsfeed, those individuals became happier.

SHOWER BUS

San Francisco nonprofit Lava Mae unveiled a trial version of a bus that provides showers to people experiencing homelessness in the city—an estimated 6,400 people in total. Funded by a \$100,000 grant by the Google Impact Challenge, the nonprofit bought and refurbished a public transit bus to have two bathrooms with hot showers, shampoo, soap and towels.



HABITS, COMPULSIONS AND ADDICTIONS

There is a direct, potentially progressive relationship between habits, compulsions and addictions that grow more harmful. Here are some definitions with a little help from Mr. Webster.

Habits: a customary practice or tendency acquired over time that becomes almost involuntary.

Habits reveal themselves in the daily activities of each of us. For instance, without thinking about it I take a vitamin and a prescribed medicine every morning; I always put my left shoe on first; I pull my pants on the same way most of the time; I tend to procrastinate in accomplishing certain responsibilities; for the most part, I maintain consistent values; I'm verbal and speak-up when appropriate situations arise. There are probably several scores of my habits I no longer even recognize but practice daily. Habits seem more thoughtless than compelling. In themselves, they carry no harm to their author.

They can, however, be an initial point leading to more serious actions.

Compulsions: feeling compelled to do something—an irresistible impulse to perform an act within a given circumstance.

Sometimes, feeling compelled to do something results in a positive action, like stopping in order to help at the scene of a recent accident or feeling compelled to do something about feelings of strong guilt. Some baseball players feel compelled to perform a certain ritual when stepping into the batter's box. Often superstition plays a role when the action presumes a positive consequence.

Addiction: the state of having given up on one's self and fully-yielding to a harmful practice, the cessation of which causes severe trauma.

Addiction to alcohol and drugs poses a serious problem for individual users, their families, their employers, their communities and for the entire nation. Relationships gradually deteriorate and then become non-existent. Jobs disappear. Income dissipates. Marriages end. Self-respect evaporates.

Humans learn through behavior modeled by another human. If that person abuses alcohol or drugs consistently many younger members of the family accept it, own it, and shortly thereafter, emulate it. The normal growth pattern for adolescents places greater power in the hands of admired fellow adolescents. Drugs perceived as safe—like wine, beer, nicotine and marijuana—often appear in social groups and shared within the group. Initial experiences with substance abuse usually take place within the group.

Addicts, early in recovery, carry within them exceptional skill in playing the "confidence game."

They have partial awareness of the game, but are so concerned about their self-image, their view of themselves,

that they play the con incessantly. They seem unaware of the actual intent of their motive for visiting a particular bar or a specific bench in the park where the "gang" assembles for drug sales. They offer to themselves the opportunity to visit while hypocritically deluding themselves into believing that their motive pertains to social contact while all the time certain they will have the opportunity to use. The double motive holds their con with the butt of the con being themselves.

By this time the crowd, unwieldy and stepping on each other's toes, numbered into the thousands. But Jesus' primary concern was his disciples. He said to them, "Watch yourselves carefully so you don't get contaminated with Pharisee yeast, Pharisee phoniness. You can't keep your true self hidden forever; before long you'll be exposed. You can't hide behind a religious mask forever; sooner or later the mask will slip and your true face will be known. You can't whisper one thing in private and preach the opposite in public; the day's coming when those whispers will be repeated all over town" (Luke 12:1-3 MSG).

The addict plays a hidden game—hiding from self and hiding before others. His or her skills involve devious ways of keeping their inevitable slide unnoticed and undiscovered. They con themselves into believing they are "cured." They regularly fail to fully participate in a program of recovery and con themselves into believing they don't need it.

I say with Christ: *"Grow up. You're kingdom subjects. Now live like it. Live out your God-created identity. Live generously and graciously toward others, the way God lives toward you" (Matt. 5:48 MSG).* **C**

The addict plays a hidden game—hiding from self and hiding before others. His or her skills involve devious ways of keeping their inevitable slide unnoticed and undiscovered.

BOB DOCTER, Ph.D., is the editor-in-chief of New Frontier Publications.

Connect with Bob
website caringmagazine.org
facebook [caringmagazine](https://www.facebook.com/caringmagazine)
twitter [caringmagazine](https://twitter.com/caringmagazine)
email bob.docter@usw.salvationarmy.org





A marriage
tested by addiction

REMAI TRUE





Richard and Edith Mabie with Captain Jerry Pigeon. Inset: The Mabie's 1978 wedding photo.

BY ERICA ANDREWS
PHOTOS BY RON BAWDEN
AND CASHMAN PHOTO ENTERPRISES

INTERVIEW

“Originally, when we separated, I had absolutely no intention of ever letting that man back in my door,”

Edith said. “But, we had children and I did want them to know that they had a dad who loved them.”

Love, marriage, addiction, cheating, jail—Richard and Edith Mabie have been through a lot together.

The high school sweethearts married in 1978 when Edith was 17 and Richard was 20, and moved to Ontario, Calif., where Richard worked as a truck driver and Edith at a car dealership.

“I drove trucks and for 18 years dope [methamphetamines] was a part of life,” Richard said. “I never drove with a team driver, so I always drove by myself. I could justify it all you want, but I was a drug addict. I was not a nice person.”

When his wife confronted him about his addiction, Richard had no remorse.

“I told my wife straight to her face I will never stop doing dope—I loved it,” he said.

Edith decided the only way to salvage her family was to try the drug herself.

“I followed him right into addiction, but it became obvious that this was not life,” she said.

Then, in the height of his addiction, Richard started seeing another woman.

“Whatever other difficulty Richard and I might have faced, even in addiction, we faced it together and we were together,” Edith said. “But the minute he brought another woman into the picture, that was not acceptable.”

According to Richard, “when you live in that world you can justify everything you do. But when you come clean there is no justifying, there’s right and wrong. When you try to paint a picture with justification, it just smears.”

Shortly after, Richard was arrested on a felony charge for grand larceny for theft of a 10-wheel dump truck and other various pieces of construction equipment and machine shop tools. He faced 15 years in jail for this offense, but following a confession, return of property and restitution payment his sentence was reduced to just 14 days in jail.

After his brush with the law and finding out his wife, now drug free, was pregnant with their second child, Richard said he wanted to get clean for his family, but didn’t know how.

“So I prayed, call it a moment of clarity,” he said. “I was laying out in the field next to the freeway saying, ‘God you can’t do this. I don’t know what to do.’”

That’s when a police officer showed up from the Rancho Cucamonga Police Department. He sat down and talked with Richard. A deacon at his own church, the officer contacted Richard’s childhood pastor.

“Forty-five minutes later I was in a men’s home in Redlands,” Richard said. “I mean it was just like that. My life has been changed ever since that day. Sometimes bad things have to happen to have good consequences. Getting arrested was the best thing that could happen, it broke me away from all of that.”

While there he met a soldier, an active member of The Salvation Army, who had relapsed. He told Richard he knew a place where he could go to get help for his addiction. Two weeks later they were at the Adult Rehabilitation Center (ARC) in Riverside, Calif., and Richard has been connected to The Salvation Army ever since.

“When he graduated the program in Riverside he didn’t come looking for me right away,” Edith said. “When they told him at the center you need to do it on your own before you try and develop a relationship with a woman, or your wife, or your family, he did that. It was hard, but he did that.”

When Richard did arrive, she told him he could only visit the kids one day a week. Edith said each time he visited she would do a “proof and search” to ensure he had proof of employment, a bank account, driver’s license, and registration. She also checked his pockets and car for drugs. In time, she began to occasionally go with Richard and the kids to dinner or shopping.

“He understood my reactions were in direct relation to his previous actions,” Edith said. “We took time to talk about things—things I did and things he did. Richard had shown himself to be a repentant man who had turned from sin to God.”

Edith said while forgiveness happened over time, trust was different.

“To take the old hurts and put them away was easier than trusting again,” she said. “Whatever Richard learned from the ARC, one thing was apparent: he understood he needed to show me, not just say it—do it. If you want to have trust, you need to give trust.”

Richard gave Edith control of their money, bank account, car and bills. She said she built the budget and decided how to spend their income. Edith said they would discuss everything, but the decision would ultimately be hers.



Lts. Richard and Edith Mabie with daughters Michelle and Samantha.

“That doesn’t mean we didn’t argue about choices; we did,” Edith said. “And it also doesn’t mean I didn’t go overboard with selfish pursuits; I did. But we grew again by keeping God in the middle of things.”

As a couple again, the pair began attending The Salvation Army Murrieta Corps in 2000. Seven years later, compelled to become officers—ordained ministers of The Salvation Army—Richard and Edith graduated from the Army’s College for Officer Training. They now work as chaplains at the Stockton ARC, helping others struggling with the same issues they once did.

“I went from being a felon to where I’m at today and if that’s not God working in our lives, I don’t know what else to say,” Richard said. “I don’t deserve anything I have; it’s just a whole different life today. We’re in awe here...We’re blessed.”

Edith echoes Richard’s sentiments and realizes how far they have come together.

“I made a promise to Richard that’s true, but I made a promise to God and I needed to be tough about that,” Edith said. “You know people are so quick to say, ‘Oh forget it, I give up,’ but when you stand in front of God and make that promise, you’re not so quick to give up.”

Together, Richard and Edith have three daughters and three granddaughters.

“I have a man who walks the path of salvation with me and together we have an opportunity to help others find his path as well,” Edith said. “What could be better than that?”

“When you live in that world you can justify everything you do. But when you come clean there is no justifying, there’s right and wrong. When you try to paint a picture with justification, it just smears.”

—RICHARD MABIE

ERICA ANDREWS is the assistant editor of *Caring*.

Connect with Erica

website caringmagazine.org

facebook [caringmagazine](https://www.facebook.com/caringmagazine)

twitter [caringmagazine](https://twitter.com/caringmagazine)

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RIDING

THROUGH

RECOVERY

Gearing Up cyclists find exercise, transportation and personal growth.

BY ALYSSA SHARROCK

PHOTOS COURTESY OF GEARING UP

While the road to recovery from addiction or trauma is particularly long and bumpy, any road is better traveled on a bicycle.

Gearing Up offers women in transition from abuse, addiction or incarceration the skills, equipment and guidance to safely ride a bicycle for exercise, transportation and personal growth.

Enrollment in this Philadelphia-based nonprofit is voluntary, and clients receive incentives for reaching certain mileage goals. After 100 miles and demonstrated knowledge of road safety and bike maintenance, the rider graduates and earns a gently-used bicycle of her own.

"The special part about my bicycle is that I earned it," said Tauheedah, a program graduate. "I didn't have anyone give it to me. I earned it."

Elements of the ride—from tightening one's own helmet to scaling a hill—offer the rider the satisfaction and confidence that comes with accomplishment. Each little reminder that she can reach a goal makes the steps to recovery more manageable.

As an avid cyclist, Gearing Up Founder and Director Kristin Gavin knows the joy and sense of community a bicycle ride can bring; five years ago she began sharing that joy with women at Interim House, a treatment facility focused on







Alexis (l) rides with Gearing Up Founder Kristin Gavin

EXERCISE IS KNOWN TO REDUCE DEPRESSION, soothe anxiety, lift a negative mood and improve self-esteem.

“Life is like riding a bicycle. To keep your balance, you must keep moving.” —ALBERT EINSTEIN

substance abuse and mental health. After struggling to involve women in an in-house fitness aerobics class, she knew that she needed to provide an alternative form of exercise for residents.

“I wanted the women at Interim House to be


325 participants in 2013. It saw a 218 percent increase in women who earned their own bicycle from 2012 to 2013.

Gavin attributes some of this success to the social nature of cycling, and focuses her clients on non-competitive, healthy and safe bicycling because of the connectivity it brings.

At the start of a ride, each cyclist tells the group about one inhibitor that she will leave behind—frustration of a long day, or the anxiety and depression that they face while in a regimented therapeutic community. Upon return, each one shares what she brought back—strength, control, friends, power, fresh air or laughter.

“Simply saying ‘good morning’ to the dog-walkers as we ride by is a way for women to re-engage in their community and connect to others,” she said. “On a simple bike ride, women are reminded of the strength of their bodies and the clarity of their sober minds.”

Follow-up interviews with graduates in 2013 found that 84 percent of women were still riding their bicycles for exercise, to commute to work or for fun. Sixty-three percent of Gearing Up graduates are currently enrolled in education programs, career prep or are working, and just 10 percent had relapsed.

As one graduate, Leanne, said, “Now, there are no limitations on the things I can do and the places I can go.” 

motivated and to say, ‘yes, exercise makes me feel good!’” Gavin said. “But women practically hid from me when I asked them to join the aerobics class.”

In response, Gavin distributed a questionnaire to gauge interest in cycling.

“One woman in the group who basically snarled at me every time I asked her to do aerobics perked up and immediately said, ‘Oh! I’ll ride a bike,’” Gavin said. That same woman went on to become Gearing Up’s first graduate.

Today, Gearing Up works with four organizations in its outdoor bike program—Interim House, CHANCES, Kirkbride Center, and Gaudenzia Washington House—and with the Philadelphia County Women’s Prison, Riverside Correctional Facility, via an indoor cycling program.

Gearing Up grew from 29 riders in 2009 to

ALYSSA SHARROCK is the communications and community liaison for Gearing Up.

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website gearing-up.org
facebook [gearingupphiladelphia](https://www.facebook.com/gearingupphiladelphia)
twitter [gearingupphila](https://twitter.com/gearingupphila)
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STORY AND PHOTOS
BY CHRISTIN DAVIS

INSPIRATION

The Way In
embraces a
population
of homeless,
drifting youth
in Hollywood.

BEHIND THE LIGHTS

Josseline Molina with one of her two daughters.

ITS GLITZ AND GLAMOUR ARE KNOWN THE WORLD OVER.

Home to the entertainment industry, studios and stations dot the map below the iconic, white, 45-foot-tall Hollywood Sign. Yet hiding behind the lights is a population of homeless, drifting youth looking for home.

The 2013 Greater Los Angeles Homeless Count by the Los Angeles Homeless Services Authority reports that an estimated 57,737 people experience homelessness at any point in time in Los Angeles County. Of that number, 85 percent are single adults—including 5,202 transitional-age youth between 18-24.

Karen Bass represents California's 37th congressional district—spanning Los Angeles from Culver City to Century City, West Adams and Crenshaw—in the United States House of Representatives. Her district includes areas of great wealth and those of deep blight, so “the condition for youth is different depending on the area,” she said. “In areas that are poor, youth are facing issues of gangs, unemployment, and a high concentration of people formerly incarcerated coming home without economic opportunities.”

Being a homeless teen in Hollywood is “bad,” according to Josseline Molina, 21.

“At the moment you think, like, you’re the best and you could do whatever you want,” she said. “You’re young and you don’t see the further consequences, you know?”

As a teen, Molina often ran away from home. She said her drug addiction started at 14, first with marijuana, which eventually led her to methamphetamines. She’s not alone—according to a 2013 University of Michigan study, 36.4 percent of 12th graders use marijuana. The U.S. Department of Health and Human Services found that 60 percent of high school seniors don’t see regular marijuana use as harmful even though THC—the active ingredient in the drug that causes addiction—is nearly five

times stronger than it was 20 years ago.

At 16, Molina became pregnant. She stopped using drugs, gave birth, and three months later was pregnant again. After her second daughter arrived, she began using meth again and her mom called a social worker.

Molina, homeless, lost custody of her children.

“Usually I tried to go to a friend’s house. Sometimes I would just stay in apartments that were lonely,” she said. “It was really bad.”

She attended court-ordered Narcotics Anonymous meetings, and while in a shelter was referred to The Salvation Army’s The Way In, a program for youth living on the streets or aged out of foster care—the latter amounting to over 23,000 18-year-olds per year, according to the U.S. Department of Health and Human Services Administration for Children and Families. The Child Welfare League of America reports that as many of 36 percent of foster youth who have aged out of the system become homeless.

Up to 24 clients ages 18-22 at a time live in apartments at The Way In.

“Our goal is not to transition them to another homeless shelter, but to their own independent living situation,” said Director Karen Wiener. “We want to get them working, get their GED, teach life skills that they maybe haven’t learned—opening a bank account, balancing a checkbook, paying a bill, cooking, grocery shopping or cleaning their home—basic things that we take for granted.”

Clients are often referred from the Department of Mental Health, the Department of Children and Family Services, the Probation Department and other collaborating organizations in the community, including Covenant House, the Gay and Lesbian Center, and Los Angeles Youth Network.

“We need to view [aged out/homeless



ROUGHLY 58,000 PEOPLE experience homelessness at any point in time in Los Angeles County. Of that number, 85 percent are single adults—including 5,202 transitional-age youth between 18-24.

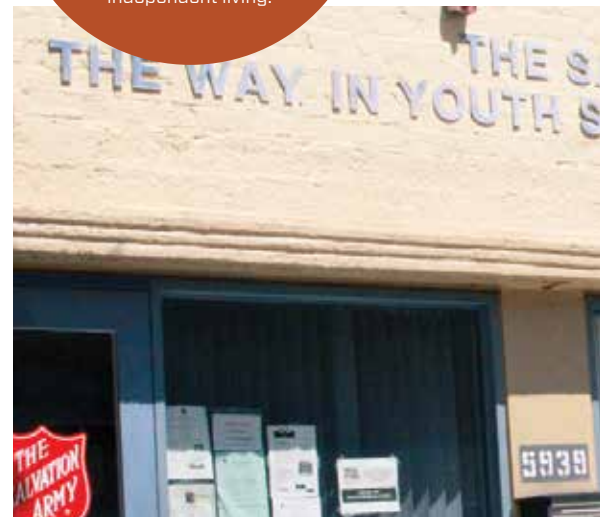
EACH YEAR ROUGHLY 23,000 FOSTER CHILDREN age out of the system. As many of 36 percent of those youth become homeless.

SOURCE: Los Angeles Homeless Services Authority, U.S. Department of Health and Human Services, Child Welfare League of America



The Way In Director Karen Wiener

THE WAY IN
is a program of The Salvation Army for youth living on the streets or aged out of foster care. Up to 24 clients ages 18-22 live in its apartments, receiving assistance toward independent living.



teens] as the same as our own children," Bass said. "I don't think that we should have homeless kids. We need to expand outreach programs. We know there's areas where homeless kids congregate like the beach or in Hollywood. We need to expand."

The Way In is a safe place for transitional-age youth to stay. Following intake and goal setting, the first priority for a new client is finding work. He or she meets weekly with a case manager, and attends group and individual therapy, and life skills classes.

An onsite Goodwill office assists with job placement, interview skills and résumé preparation for clients and other youth in the community. Hollywood Arts provides classes in fashion, music writing and dance three times a week.

"When we're consistent with our program and following through on our end, when they see that then they become consistent," Wiener said. "They are the ones that have to do the work, we can't do it for them, we just have to stay on top of them. They don't always like us because we are a program, we have rules and guidelines and we know that if they follow them they're going to leave here successfully."

According to Wiener most clients struggle with marijuana and alcohol use, however The

Way In is a drug-free program with a no tolerance policy. In some cases, clients are referred to outpatient recovery programs to first address an addiction.

"We recognize that adolescent substance abuse does not occur in isolation from other life challenges," said Susan Rabinovitz, R.N., MPH, associate director of Adolescent Medicine at Children's Hospital Los Angeles, in a statement upon publication of "Treating Teens: A Guide to Adolescent Drug Problems." "Substance abuse may be one problem within a complex of many concerns such as school, family, social, medical or emotional difficulties that influence, and are influenced by, substance abuse."


Such was the case for Molina. "I was stressing a lot and that made me want to use," she said.

"We believe that young people have valid reasons for their behaviors and distress, and self-destructive behaviors often reflect an inability to express feelings and thoughts appropriately, or cope with problems that seem insurmountable," Rabinovitz said.

"Day one [at The Way In] I was nervous, and wasn't sure what to say," Molina said. "What made me change was knowing that I didn't have my kids and I was out on the streets so young...I

was grateful for living in an apartment, even though it wasn't mine and I had to share, to me that was really great."

Molina found a job working as a laundry and linen distributor at the University of California, Los Angeles. She completed The Way In program and a year of court-ordered Narcotics Anonymous meetings. Now in school to become a dental assistant, she is volunteering in a dentist's office to gain experience and will graduate in January 2015. She received full custody of her children in July.

"I didn't really realize what I had, coming to this program helped me realize a lot of things," Molina said. "If people try to help you out, you know, I think it's best to take that advice, you know? Everything takes time and it's really all up to you. Sometimes people go through different hard times, and I just could say that it all depends on you." 

CHRISTIN DAVIS is the managing editor of New Frontier Publications.

Connect with Christin
website caringmagazine.org
facebook [caringmagazine](https://www.facebook.com/caringmagazine)
twitter [caringmagazine](https://twitter.com/caringmagazine)
email christin.davis@usw.salvationarmy.org

HEALTHY CHOICES

TRANSFORMED LIFE

BY DAN WILSON

Every day I look into the eyes of men and women who are struggling to overcome addictions. As an officer in The Salvation Army, I have the responsibility to oversee an Adult Rehabilitation Program where individuals work at applying the Lord's life-changing principles in their lives. It is, for them, a life-and-death struggle. Over the last 10 years, we know 55 individuals who have died from this disease.

In reality, being excessively overweight can be just as dangerous. Last year my 81-year-old father lost 50 pounds, and his doctor said he probably added seven years to his life. Two of my brothers lost 20 to 30 pounds, and their accomplishment gave me hope and motivation.

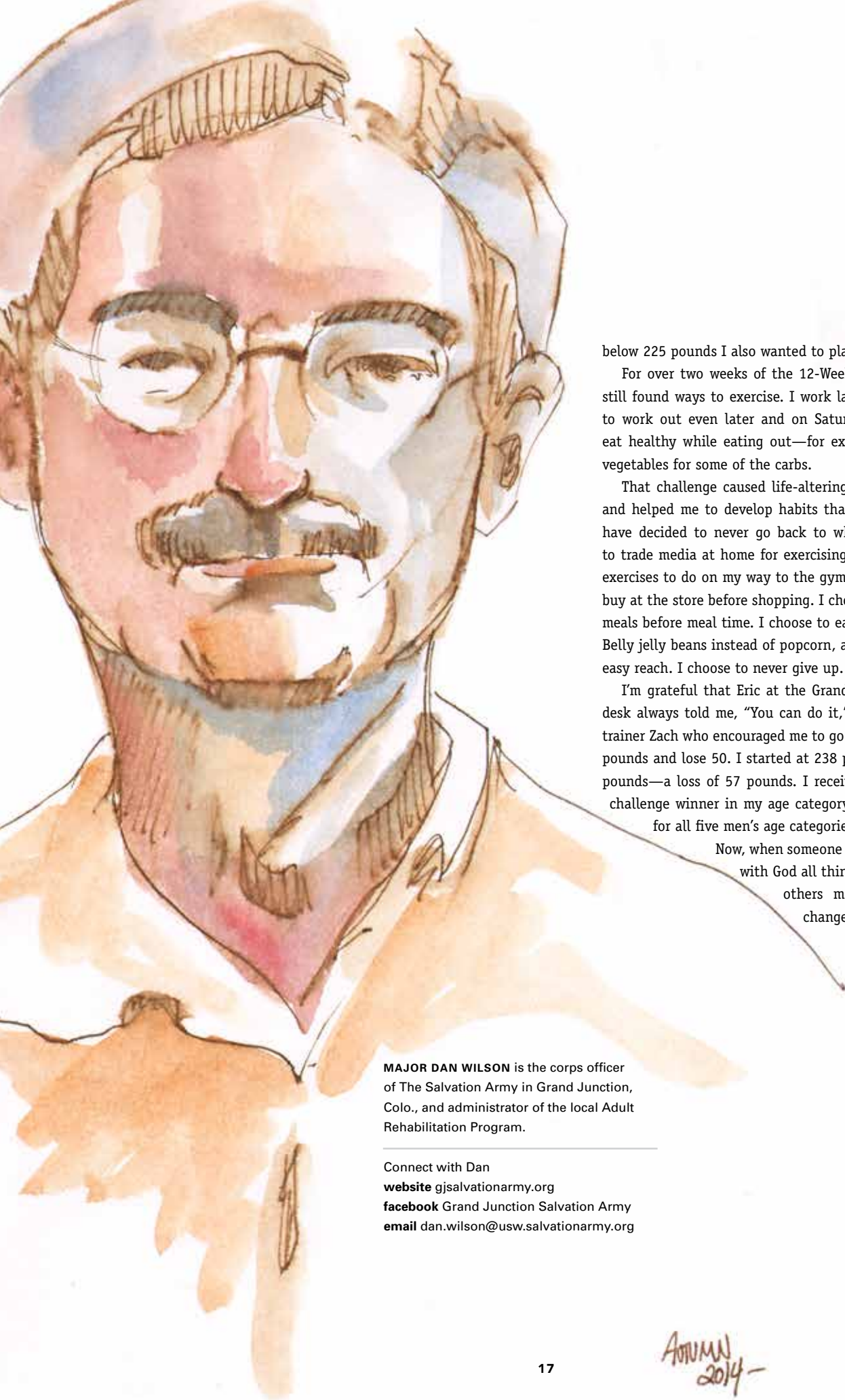
As my responsibilities grew over the years in The Salvation Army, my job became a desk job. Yet, I also used food to deal with stress, and it affected my health and my life.

A couple of years ago, when the scale read over 250 pounds, I had a moment of crisis. By offering up a prayer, "I don't want to live this way; show me how to change this area of my life," I began a journey to win another victory. But as it is in many areas of life, situations didn't just get better. After three surgeries, three attempts of dieting with another overweight friend, a torn shoulder muscle and a lot of contemplation of what issues needed to be addressed, I was forced to think through my commitment and what was really important.

Then I discovered the Gold's Gym 12-Week Challenge and joined as part of the Officer Wellness Program of The Salvation Army. This program, started in 2005, provides funding to officers for things like gym memberships to promote health and fitness under the supervision of a medical professional. Just over 200 officers are currently enrolled in the Western Territory.

I ate lean meats and vegetables as my core menu, and did cardio workouts while watching full movies, and worked out on weight machines and in the pool. When I got in shape and

"That challenge caused life-altering transformations in my life and helped me to develop habits that are now a new lifestyle. I have decided to never go back to where I was before."




below 225 pounds I also wanted to play basketball again.

For over two weeks of the 12-Week Challenge I was away but still found ways to exercise. I work late many evenings, so I had to work out even later and on Saturdays. I also found ways to eat healthy while eating out—for example, asking to substitute vegetables for some of the carbs.

That challenge caused life-altering transformations in my life and helped me to develop habits that are now a new lifestyle. I have decided to never go back to where I was before. I choose to trade media at home for exercising at the gym. I choose what exercises to do on my way to the gym, and what healthy foods to buy at the store before shopping. I choose to eat healthy and plan meals before meal time. I choose to eat six popcorn flavored Jelly Belly jelly beans instead of popcorn, and to put snacks away from easy reach. I choose to never give up.

I'm grateful that Eric at the Grand Junction Gold's Gym front desk always told me, "You can do it," on my way in. And to my trainer Zach who encouraged me to go beyond my goal of losing 40 pounds and lose 50. I started at 238 pounds and am down to 181 pounds—a loss of 57 pounds. I received recognition as the gym challenge winner in my age category, and as the overall winner for all five men's age categories at the local gyms.

Now, when someone asks how I did it I share that with God all things are possible. I love to see others motivated to make positive changes in their lives as well. 

MAJOR DAN WILSON is the corps officer of The Salvation Army in Grand Junction, Colo., and administrator of the local Adult Rehabilitation Program.

Connect with Dan

website gjsalvationarmy.org

facebook Grand Junction Salvation Army

email dan.wilson@usw.salvationarmy.org

'DIGITAL



CRACK'

NEUROSCIENTIST DR. ANDREW DOAN CARRIES AN INSIDE-OUT EXPERTISE ON VIDEO GAMES

BY JARED McKIERNAN

Open a book, scan a page of text, commit it to consciousness and recount it with accuracy—also known as photographic memory. While only a small percentage of people actually have this ability, Dr. Andrew Doan counts himself among them.

"I was bored in school," Doan said. "But video games gave me that challenge."

They made him feel alive. They gave him an outlet for his aggression, and the rage he developed being bullied as a kid. Any down time he had was likely monopolized by shooting something on his computer screen.

After finishing at Reed College, he went to John Hopkins University School of Medicine on a full scholarship. That's when he learned of massively multiplayer online role-playing games (MMORPGs), which allow users to compete and interact with each other online. MMORPGs such as Ultima and Age of Empires took Doan's addiction to the next level.

"The only time I stopped was to use the bathroom and eat," he said. "My arms constantly ached from pressing the joystick."

Doan later married his junior high school sweetheart, Julie, started a family and opened an ophthalmology practice. His life was changing, but the gaming never missed a beat.

He'd go to school and work in the daytime, get home at 4 p.m., game until dinner, then once Julie climbed into bed around 9 p.m. he'd hurry back to the computer, where he'd game until 4 a.m. the next day. Then, he'd grab a few reluctant hours of sleep and repeat the cycle.

"I was playing 50 to 100 hours a week for over 10 years," he said. "That took a toll on my family. I slept only two to three hours a night. Then I developed obesity because I didn't work out. I was athletic in college and high school. I eventually developed Carpal Tunnel. I had to take super strength painkillers just to function as an eye surgeon."

Unbeknownst to Doan, the consistent exposure to violent video games caused cortisol and adrenaline to build up in his brain, which led to violent outbursts.

"I became physically and emotionally abusive," he said. "At one point my wife was rolling back and forth in the fetal position in our closet, crying because she had married a monster."

Julie escaped one night and drove with their then 2-year-old son and 1-year-old daughter to her mother's 3,000 miles away.

Then came a sobering realization.

"I had no friends, I had no connection to the real world," he said. "I was destroying my marriage, my medical career, my life. I was contemplating suicide."

Gaming is a hobby for most, but for Doan and many others, it's a black hole.

In 2012, an 18-year-old Taiwanese gamer named Chuang reportedly died after a 40-hour Diablo III marathon at an internet cafe.

Xiao Yi was 13 when he jumped from the top of a 24-story building. He left behind a note for his parents written from the perspective of his character from World of Warcraft, which he played in the days leading up to his death. The note even included a wish to meet three of his gaming friends in the afterlife.

The American Psychiatric Association (APA) added video game addiction to the "Diagnostic and Statistical Manual of Mental Disorders" in May 2013 and included it in the conditions for further study section as "Internet Gaming Disorder."

Though internet gaming disorder is now acknowledged by the APA, it is still debated how much this disorder is caused by gaming itself or whether it is largely a byproduct of other disorders.

Doan, now 43, has since beat his addiction and repaired his marriage, which he credits to his relationship with Jesus Christ. He dedicates much of his research to understanding the brain's response to addictions, including gaming. He works as head of the Department of Mental Health Addictions and Resilience Research at Naval Medical Center San Diego* and wrote "Hooked on Games: The Lure and Cost of Video Game & Internet Addiction" (FEP International, 2012).

Much of what he now knows about video game addictions, he experienced firsthand. He insists video games are harmless—beneficial even—in moderation, but indeed addictive in excess.

Doan extensively studied the neurosensory retina in the eyes, which connects with the brain through approximately 2.4 million nerve fibers, making



At his peak, Dr. Andrew Doan was playing up to 100 hours of video games a week, or over 20,000 hours spanning a decade. Photo courtesy of Dr. Doan

the eyes an extension of the brain. Gaming works through the visual system to reprogram the brain through neuronal plasticity, or the altering of the structure, function and organization of neurons in response to new experiences, he said.

Through his research, he discovered that MRI scans exhibit the same brain patterns on gaming addicts as drug addicts. "Cocaine acts on the brain physically, whereas gaming does it artificially," he said. "They both give you a stimulation that wears off when exposure isn't steadily increased."

Doan also pointed to the "short refractory period" as a lure of video games. The dopamine rush in your brain that gives you a "high" can be recreated with little time between gaming sessions, as opposed to some drugs which require a longer refractory period. "Video games are like movies and books laced with digital crack," he said.


Video games caused dysfunction in Doan's relationships, career and physical health. Perhaps the most difficult part of it, he recalled, was seeing his son Nicholas, now 17, fall into the same trap. Addiction is often generational, he added, and gaming is no exception. "My son was so engrossed in this game that there was nothing else he wanted to do," he said.

Doan said Nicholas' accolades since quitting gaming include making the honor roll each of the past three years and becoming a

regional champion in high school track. "We would have never known if he hadn't been able to stop gaming," he said. "And now he tells us he's glad we took them away from him."

Doan now serves as a 12-step ministry leader at his church in Temecula, Calif. Similar treatment options are emerging across the country for gaming addicts. Online Gamers Anonymous (OLGA), formed in 2002, is a 12-step, self-help, support and recovery organization for gamers and their loved ones who are suffering from the effects of excessive computer gaming. It provides a variety of message boards, Skype meetings and other tools for healing and support. In July 2009, ReSTART, a residential treatment center for "pathological computer use," opened in Fall City, Wash.

Doan praised such treatment options and even volunteers with OLGA, but retained that much needs to be done by way of prevention. First step, he says—warning labels.

"We're behind in this field," he said. "There's no reason they can't put warning labels on games, stating that they're addictive...they're digital crack." 

**The views expressed by Dr. Andrew Doan are his own and do not necessarily reflect the official policy of the U.S. Navy or Department of Defense.*

DFC INTELLIGENCE VALUED THE GLOBAL VIDEO GAME MARKET AT \$66 billion in 2013, up from \$63 billion in 2012, and expects growth to \$78 billion by 2017.

THE AVERAGE VIDEO GAME ENTHUSIAST ISN'T A TEENAGE BOY. He is a 35-year-old man, according to the *American Journal of Preventive Medicine*.

SCIENTISTS AT THE STANFORD UNIVERSITY SCHOOL OF MEDICINE found that men are more reactant to video game play than women in a brain imagery study of 22 young adults (11 women and 11 men) playing a simple computer game. The research found that activity in parts of the brain associated with addiction and reward was much greater in men than in women, and that men were more aggressive in playing.

DO GOOD

Read "Hooked on Games: The Lure and Cost of Video Game & Internet Addiction" (FEP International, 2012) by Dr. Andrew Doan and Brooke Strickland.

Donate to Online Gamers Anonymous at olganon.org.

Read Insight Media's tips for parents on how to prevent and stop video game addiction in children at bit.ly/stopvgaddiction.

JARED MCKIERNAN is an associate editor at New Frontier Publications.

Connect with Jared
website caringmagazine.org
facebook [caringmagazine](https://www.facebook.com/caringmagazine)
twitter [caringmagazine](https://twitter.com/caringmagazine)
email jared.mckiernan@usw.salvationarmy.org

Finding home, again

**REFUGEES SET THEMSELVES
APART AS SURVIVORS,
BUT THEY ARE NOT SAFE FROM
THE HOLDS OF ADDICTION.**

BY LAURA POOLE

Patrick's family was strikingly different from other refugee families that had recently resettled in the small, southern town in the United States.

Like others, his family spent years fleeing their home after it became unsafe to remain. He finally made it to the United States after migrating from one African country to another and living for years in a refugee camp. Patrick arrived in the U.S. with his second wife, whom he met in a refugee camp, and two teenage children from his first marriage.

The family visited our small community center, and Patrick tutored me about working with people from his culture and community. As a young, white girl, I tried to learn all I could from his advice. Yet, soon after the family's arrival, Patrick began visibly deteriorating—his eyes often glazed and distant—as he realized his hope of finding a teaching job was not realistic due to U.S. licensure and accreditation requirements.

I often talked with his wife, and months later she announced that she was pregnant and expecting her second child. It took time and trust before she felt safe enough to share with me that she and Patrick were unable to bring their firstborn son to the United States with them; her mother was raising him, back in their



home country. A local law school had taken on their family reunification case pro-bono, but it was taking more time than expected.

Then, I received a call one day from the resettlement agency that had worked with Patrick's family since arrival. He had been put on probation for domestic violence while intoxicated, but the local police were willing to work with him instead of immediately taking custody of his children.

Patrick is just one of the estimated 10.4 million refugees of concern in the world right now, according to the Office of the United Nations (UN) High Commissioner for Refugees. The UN Convention in 1951 defined a refugee as someone who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership in a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, is unwilling to avail himself of the protection of that country."

According to the Office of Refugee Resettlement, the United States resettles more refugees than all other countries combined. In 2012, the U.S. resettled about 60,000 incoming refugees, who were then dispersed throughout the country through voluntary agencies.

Within months, refugees are expected to transition into a new life in America, enrolling in schools and finding sustainable means of income. Refugees often come to the United States with grandiose ideas of finally attaining a desired and high quality life, which is exasperated by orientation trainings and videos in refugee camps that portray the "American dream."

The Asian Pacific Development Center (APDC) in Aurora, Colo., is one organization that aims to assist Asian immigrants and refugees in obtaining health and wellness. Voluntary agencies typically focus services to refugees upon arrival in the United States on English language classes, job training, employment training and placement, cash assistance, legal services and health care. Yet Eugene Yom, an APDC clinician, said many working in the field admit to a flawed system that does not support acculturation and success for refugee families, specifically for those refugees facing mental health issues.

APDC focuses treatment on the primary diagnoses seen in incoming refugee populations, specifically Post-Traumatic

Stress Disorder, adjustment disorders and depression. It recognizes that the issue of addiction and substance abuse represents a pressing concern for incoming populations.

Substance abuse in refugee populations can develop in the home country, during the refugee migration or in the resettlement country, according to a 2011 study published in *Conflict & Health*. Earlier research found that some cultures may use alcohol or other substances in traditional cultural practices, and in many refugee camps substances are easy to obtain. Further, substance abuse is linked to higher rates of gender-based violence, physical assault and suicide in refugee camps.

"The issues of substance use within my community is deep-rooted and common as a homemade remedy to act as a painkiller or sedative," said Setu Nepal, a Bhutanese of Nepali origin and community leader at APDC. "Many Bhutanese Nepali refugees coming to to the United States have spent 15-20 years in refugee camps where drugs and alcohol were easy to obtain and use. Whatever was practiced in the refugee camp is practiced here."

In the Bhutanese of Nepali origin refugee youth community, high substance abuse is a result of isolation and boredom, said

BY THE END OF 2013, 51.2 MILLION INDIVIDUALS were forcibly displaced worldwide as a result of persecution, conflict, generalized violence, or human rights violations. Some 11.7 million people were refugees under the Office of the United Nations High Commissioner for Refugees mandate. The global figure included 33.3 million internally displaced persons and close to 1.2 million asylum-seekers. If these 51.2 million persons were a nation, they would make up the 26th largest in the world. SOURCE: UNHCR Global Trends 2013 report

Bikash Nepal, a community navigator at APDC. He explained a trend, in which he saw many families and individuals "crashing" within two years of resettlement, often resulting in an attempt to escape from the overwhelming experience of being in a new environment with no hope of language proficiency or engaging in meaningful and sustainable work. With the high substance abuse tendency in refugee camps overseas, he too sees his community members returning to previous coping skills in order to survive their new life here.


Learning about the refugee experience is like a modern-day archeological dig, with each layer uncovered revealing a whole new reality of past experiences. The more we find, the more we realize how much we don't know. Traditional substance abuse treatments are not sufficient for addressing deep-rooted and complicating factors that exacerbate addictions within the refugee population, and so we must find a meaningful way to address the issue for this unique group.

Effective treatment for addiction in refugee populations should focus on incorporating a variety of wellness aspects. As Bikash Nepal explained, treatment would "have to be indirect" and "less offensive," allowing for real stigma associated with addiction to be dealt with in a culturally appropriate way, possibly working with individuals to replace addiction with productive activities that restore meaning and decrease isolation.

Geri Tien, a clinician at APDC, explained that some cultures stigmatize honesty about struggle and hardship, increasing the likelihood of either obtaining or treating a silent disease like addiction. Nor-Ohgan Saito, a community navigator from Burma, reiterated the difficulty that her community members have in admitting addiction directly. While this may not be far off from mainstream addiction issues, cultural practices and stigma call in question the relevance of traditional support group treatment.

Education about long-term effects of alcohol use, legal implications, particularly related to citizenship and employment, and the effects of substance abuse on one's health and family are imperative in any addiction treatment. In addition, APDC staff work to integrate behavioral health components into primary care treatment for each client, which may allow for a less obtrusive approach to treatment that focuses on a broad view of health.

Since working with Patrick and his family, I've become further immersed in working directly within the mental health sector of refugee health. His story stands out as an example of an acculturation process complicated by initial expectations of success that were shattered after arrival. Patrick's high education level and impeccable English set him apart from many other refugees, making him a natural "community leader" who could easily support the acculturation of other refugee families. Over time, however, he proved one of the most frustrating things about addiction: it is not selective and it will take hold of anyone it can.

Although coming from such diversity, refugees often have commonalities in the experience of loss, hopelessness and trauma. When faced with these life-altering experiences, refugees have set themselves apart as survivors, with histories containing stories of tremendous courage and resilience. Yet, refugees are not safe from the holds of addiction. We must throw out our old conceptions of treating addiction as an isolated problem and work with individuals, to walk alongside them as they create home once again. 



DO GOOD

Learn more about refugees and the work of the United Nations Refugee Agency at unhcr.org, including current data on the world's displaced people.

Visit the International Rescue Committee's FAQs at bit.ly/ircrefugees to learn more about the resettlement process for refugees in the U.S.

Find a local resettlement agency where you can volunteer as an English tutor or a family mentor.

Read more about addiction, how it affects the brain and how individuals and communities become trapped in destructive habits in "The Selfish Brain: Learning from Addiction" (Hazelden, 2000) by Dr. Robert L. Dupont, a clinical professor of psychiatry at Georgetown University of Medicine and former director of the National Institute on Drug Abuse and the White House Drug Abuse Prevention Office.

LAURA POOLE is the behavioral health and wellness coordinator at Asian Pacific Development Center.

Connect with the Asian Pacific Development Center
website apdc.org
facebook Asian Pacific Development Center - APDC
email info@apdc.org

FILLING THE VOID



THE SPIRITUAL ROOTS OF ADDICTION TREATMENT

BY GLEN DOSS



teadying himself at the chapel podium, Jimmy nervously began his testimony.

“I was caught in the grip of alcohol,” he said. “It was a compulsion—there was nothing I could do. I was so empty inside. In incredible misery, I really thought I was dying.

“I grew up in the church, and I had been attending Alcoholics Anonymous [AA] meetings for years, but they never clicked for me—I had never put the two together. Here at The Salvation Army Adult Rehabilitation Center I have learned that the 12 steps of AA are God’s commands fleshed out. Working the steps, I began putting spiritual principles into action.

“Then God took my belief from my head to my heart so that I could finally live it out in

my daily life. Jesus became my master, and I took his words as if he meant them. Serving him, the void within my heart has left me—today I have a purpose for living!”

The inner emptiness so many people feel is evidence “of a deep spiritual need,” according to Avery Chamlis, director of rehabilitation services for the Western Territory’s Adult Rehabilitation Center (ARC) Command. Meeting this need is the goal of The Salvation Army’s work today in helping rehabilitate people from addictive lifestyles. “Once a person enters into a relationship with Jesus Christ, the gnawing sense of being incomplete disappears and the person’s thinking begins to change. Our chapel

“The approach is holistic. It attempts to meet the physical, spiritual and social need for restoration of the whole person.”

—JACK ANDERSON



services present the recovery principles as the path to serving God, and our program components reference Jesus as the higher power, so that the message is consistent and constant.”

The notion that God offers the remedy for drunkenness is probably as old as the Judeo-Christian faith. Certainly the Bible is rife with commands against drunkenness, and God is presented as the great healer and rescuer from sin.

In 1784 Dr. Benjamin Rush noted that a religious experience could serve as an antidote to alcoholism. By the late 1800s Protestant evangelists were preaching that addiction was a sin and emphasized spiritual conversion as the cure. Many addicts claimed that God took away their addiction in religious revivals.

But there were many who wondered if that was all there was to it. Reverend J. Willett suggested in his 1877 treatise “The Drunkard’s Diseased Appetite” that although those who drank heavily could check their drink habit through religious conversion, the “true inebriates” could not. For them, he insisted, much more was needed.

In his 1890 volume “In Darkest England and the Way Out,”

The Salvation Army Founder William Booth declared alcoholism “a disease, often inherited, often developed by indulgence, but as clearly a disease as ophthalmia or stone.” He also taught that the “submerged tenth” of modern civilizations, the poor, the honest, as well as those who lived by vice or crime, were the victims of drink.

Booth envisioned a program that would fundamentally change the person if his character or conduct was the cause of the poverty. He dismissed the lingering distinction between the worthy and unworthy poor as impractical and cruel, and believed the distinction must be between those who would work and those who would not. There should be no program of relief that would “demoralize” the poor by offering them “mere charity,” he wrote.

Setting out to implement the founder’s vision, The Salvation Army became the most extensive urban Christian approach in the world. Booth attracted addicts by providing them with food and shelter and suggested that “the cure for addiction would involve Christian salvation and moral education in a wholesome environment,” explained William L. White in “Slaying the Dragon: The History of Addiction Treatment and Recovery in America.”

The Army’s first “cheap food and shelter establishment in the United States” opened on Dec. 23, 1891, according to Edward McKinley’s volume “Somebody’s Brother.” The New York Lighthouse could accommodate 36 men and shared the building with the New York No. 2 Corps. Shelter clients were urged to attend



Boozers' Parade

the nightly meetings upstairs. Here testimonies of ex-brothel keepers and drunkards shared a grateful delight in their rescue from the ocean of sin.

One experienced manager of the Army industrial home estimated in 1912 that 80 percent of the men were “victims of some extent of the drink appetite.” Special meetings were held to encourage new converts while saved drunkards shared their testimonies. Industrial officers enthusiastically participated in the annual “Boozers’ Parade” in Manhattan.

By the 1930s, the old conviction that the Army had a special, divine calling to rescue an alcoholic was combined with a new spirit of professionalism. It was recognized that coming to understand that alcoholism was caused by several factors—perhaps physical, and certainly mental and emotional—could help officers guide the drinking individual to a permanent solution.

• • •

The integration of the recovery principles of AA and The Salvation Army is almost as old as AA itself.

Major R. E. Baggs started the first AA group in any Salvation Army center in the United States at the Philadelphia Men’s Social Service Center in 1939, the same year the volume “Alcoholics Anonymous” appeared.

AA rapidly became an integral part of virtually all Salvation Army rehabilitation programs. Although AA does not align itself with any religious group, church or organization, it remains today one of the most influential approaches to recovery rooted in Christianity. It is a natural fit, since both AA and organized religions share basic spiritual principles. AA understands addiction to have biological, psychological, and social influences, but primarily offers a spiritual approach to recovery: “When the spiritual malady is overcome, we straighten out mentally and physically.” Christian concepts are inherent in AA’s 12 steps, which have had a great impact on the development of various spinoff 12-step programs, including the recent Christ-centered self-help approaches of Overcomers Anonymous and Celebrate Recovery.

Throughout the 1940s and 1950s, interest in supplementing the traditional religious approach with modern professional help grew steadily among officers. “The Salvation Army Men’s Social Service Handbook of Standards, Principles and Policies,” known as the “green book,” appeared in May 1961. The first national manual for the department stated that the primary function of each center was “the rehabilitation and/or the spiritual regeneration of unattached and homeless men.” It identified the gratuity as a “therapeutic tool,” and declared a firm commitment to the fundamental evangelical “goal of all Salvation Army endeavor”—not just rehabilitation but “regeneration” through salvation in Christ. It outlined intake procedures, casework counseling, the use of fellowship clubs, and AA, which the handbook endorsed as “one of the most useful helps toward a frontal attack” on alcoholism.

The Salvation Army’s official position paper on alcoholism, approved by the Commissioners’ Conference in 1971, took a balanced position:

FOR OVER 100 YEARS The Salvation Army has provided assistance to people with a variety of social and spiritual afflictions through its 119 Adult Rehabilitation Centers in the United States.

SINCE GOVERNMENT FUNDING IS NOT SOLICITED,

The Salvation Army Adult Rehabilitation Center rehabilitative ministry is made possible through the generosity of individuals, organizations, and businesses who donate goods that can be sold in Family Stores, which generate 80 percent of the income that helps support the Adult Rehabilitation Center.

The challenge Alice presented is faced by all Christian evangelists today: how to present the good news of Jesus Christ to a people struggling to make sense of God in a confused, pluralistic society.

The Salvation Army believes that every individual who is addicted to alcohol may find deliverance from its bondage through submission of the total personality to the Lordship of Jesus Christ. The Salvation Army also recognizes the value of medical, social and psychiatric treatment for alcoholics and makes extensive use of these services at its centers.

Major Dorothy Berry, director of the Eastern Territorial Correctional Service Bureau for Women, was the first patron of the AA offshoot Narcotics Anonymous (NA). She offered her New York office in 1949 as NA's first headquarters.

Today The Salvation Army has the largest residential addiction rehabilitation program in the U.S., and several reliable studies have shown that the success rates for Salvation Army programs are comparable with those of secular programs; Jason Pittman and Scott W. Taylor evidence this in "Christianity and the Treatment of Addiction."

The typical ARC offers a broad curriculum. "The approach is holistic," said Dr. Jack Anderson, psychological consultant to The Salvation Army Western Territory. "It attempts to meet the physical, spiritual and social need for restoration of the whole person."

• • •

As she recounted a decades-long history of drinking, drugs, gambling, and failed relationships, Alice finally collapsed into tears.

"I've been to a number of rehabs over the years," the young woman said. "Here at The Salvation Army, you tell me you love Jesus, but that I don't have to believe like you in order to benefit from this program. I don't get it."

I smiled gently. "We do what we do out of our love for the Lord," I told her. "We hope you see Jesus in our freeness in reaching out to you."


She exploded in frustration at the various religions available, and her disbelief. "Yet today I don't know where to turn," she said.

The "Alcoholics Anonymous" volume from 1939 elaborates: "We looked upon this world of warring individuals, warring theological systems, and inexplicable calamity, with deep skepticism. We looked askance at many individuals who claimed to be godly. How could a supreme being have anything to do with it all? And who could comprehend a supreme being anyhow?"

The world has become even more antagonistic toward religion since, but I believe that Christian evangelists have an advantage when ministering to desperate, hurting people.

"Have you hit on any human remedy at all for your dilemma?" I asked Alice.

"No. Today I am convinced there is none," she said.

"Then you may have to turn to the superhuman," I said. "On a starlit night, Alice, have you ever looked up at the sky and wondered who made all this?" 

DO GOOD

Donate goods to help support the Adult Rehabilitation Centers. See more at satruck.org/donate-goods.

Take friends to a Salvation Army Family Store and offer a challenge to find the best outfit, then wear your new attire to dinner. Find a store near you at satruck.org.

Watch video testimonials from Adult Rehabilitation Center beneficiaries at satruck.org.

Find an Adult Rehabilitation Center near you at satruck.org and arrange for a tour of the facility.

Read "In Darkest England and the Way Out" (Diggory Press, 1890) by William Booth—the book that laid the groundwork for the modern day Salvation Army with its mix of practical ministry and personal salvation.

MAJOR GLEN DOSS serves in retirement as the chaplain of the Riverside County Adult Rehabilitation Center in Perris, Calif. Find his autobiography, "Reflections of a Former Atheist" (Frontier Press, 2012), at frontierpress.org

Connect with Glen
email glen.doss@usw.salvationarmy.org

SHATTERPROOF



Gary Mendell at a Shatterproof Challenge in Los Angeles

BY VIVIAN GATICA
PHOTOS COURTESY OF SHATTERPROOF

Addiction affects the whole family.

That's what Gary Mendell will tell you. His son, Brian, struggled with a drug addiction for years, and after staying sober for 13 months, took his own life in 2011 at age 25.

Mendell created Shatterproof the following year to provide resources for families dealing with those in recovery from addiction.

"Right now, there are 25 million people in this country actively addicted, and the people who love them—their families—are struggling with answers on how to help them," Mendell said. "There is no comprehensive place for people to go for information on how to help them. Part of what we do is provide that resource."

Shatterproof is a national movement that believes addiction is a disease, not a choice. Mendell's short-term goals for the organization are to reduce by half the number of people addicted to alcohol and drugs, reduce the number of deaths related to substance abuse, and decrease the costs of addiction to society. He hopes it will lead to the complete eradication of addiction as a whole.

To achieve this, Mendell designed Shatterproof around four strategic pillars—unite and empower, end the stigma, advocate for change, and research and innovate.

Shatterproof focuses on bringing people together to become a voice for individuals and families affected by addiction, and recruiting smaller organizations to the cause. Jeanne and Donald

Taking on addiction for families

"...it's never too late to save another person's child and that's what we feel our focus has to be."

—JEANNE KEISTER

THE HIGHEST RATE OF ILLICIT DRUG USE IS AMONG THOSE 18-25 (21.3 percent).

AN ESTIMATED 75 PERCENT OF YOUTH AGES 12-17 REPORTED seeing or hearing drug or alcohol prevention messages in and out of school, however only 11.9 percent of them participated in prevention programs.

2.9 MILLION PEOPLE OVER THE AGE OF 12 USED A DRUG FOR the first time in 2012, averaging 7,900 new users per day. Over half of them were under the age of 18.

APPROXIMATELY 6.5 MILLION PEOPLE NEEDED BUT DID NOT receive treatment for substance abuse in 2012 due to lack of health coverage or concern over how others would react.

SOURCE: 2012 National Survey on Drug Use and Health



A Shatterproof Challenge participant about to rappel down a building to raise awareness and funds to fight addiction

Keister—who lost their 24-year-old son Tyler to drug overdose in 2012—became Shatterproof volunteers via their organization atTAcK addiction.

“Addiction, to us, was something that happened to other families in other circumstances,” Jeanne Keister said. “Our family was your typical family who did things together...we never thought, in our small town, that heroin would ever be a word we would have to worry about.”

atTAcK addiction now works in conjunction with Shatterproof, providing education and support.

“[Mendell]’s trying to do nationally what we’re trying to do locally, and we’re assisting him where we can and he’s assisting us in the same manner,” Donald Keister said.

“It’s not always easy; the loss is always there and sometimes it makes you remember it a little more so, but you do it because...it’s never too late to save another person’s child and that’s what we feel our focus has to be,” Jeanne Keister said. “If somebody had started this maybe 15 to 20 years ago, maybe our child wouldn’t have been in this position and lost his life.”

The Shatterproof Challenge is a series of events across the country during which people rappel from

the sides of buildings to raise awareness and funds to fight against addiction.

“That’s how we’re uniting people and making them aware of what we’re doing, and bringing them into our umbrella,” Mendell said.

They also work against the negative societal connotation of addiction.

“These are not bad people trying to be good, they’re sick people trying to be well and they need support; they need help to bring down the stigma,” Jeanne Keister said.

Mendell said he has seen a reduction in shame related to the disease of addiction in those exposed to the Shatterproof events. “We’re empowering them to create change because by doing this, it’s ending the stigma,” he said. In one challenge event in Milwaukee, Wis., a woman Mendell met in a hotel lobby decided to rappel. Her brother is an addict and when she did the challenge, she said she told him about it and he cried.

“Think about her brother; [he probably] felt like, ‘Wow, my sister [rappelled] off a building to raise awareness because I have a disease,’” Mendell said. “That saves lives.”

To advocate for change, Shatterproof runs



Gary Mendell with his son, Brian

campaigns favoring better addiction prevention and treatment efforts throughout the United States that will help relieve some of the stress felt by individuals and families that need the help.

Mendell said Shatterproof acquired 26,000 signatures in a 2013 petition and sent it to President Barack Obama's administration regarding final regulations on the Mental Health Parity and Addiction Equity Act of 2008, which requires the group health plans and health insurance agencies treat mental health or substance abuse disorder cases as equally as all other medical and surgical cases.

Other public policy efforts include the passage of the 911 Good Samaritan Laws in all states, which would protect drug overdose victims and witnesses from criminal prosecution in order for them to seek immediate help and to make a prescription drug used to reverse the effects of overdose—Naloxone—more accessible.

"One of my vows after the death of my son was to save lives," said Dave Humes, Shatterproof public policy coordinator, who lost his son, Greg, to an overdose in 2012. "We need to educate people and let them know that the words 'not my child' should not be in their vocabulary because this disease goes across all demographics. It touches everybody, and we need for those who have not been touched by this disease to be educated about it before it does touch them and it's too late." ©

**IN 2012,
MORE THAN 22
MILLION PEOPLE
AGES 12 AND OLDER**
had problems with
substance dependence
or abuse.
SOURCE: U.S. Department
of Health and Human
Services

DO GOOD

Share your story of dealing with addiction and read those of others at shatterproof.org.

Register to *rappel* down a building for the Shatterproof Challenge at shatterproof.org, or find an event to support.

Advocate for change in legislation and public policy for addiction prevention and treatment by writing a letter to your representatives.

Read "Beautiful Boy: A Father's Journey Through His Son's Addiction" (Mariner Books, 2009) in which journalist David Sheff tells of his family's experience with addiction, and his follow-up work "Clean: Overcoming Addiction and Ending America's Greatest Tragedy" (Eamon Dolan/Houghton Mifflin Harcourt, 2013).

VIVIAN GATICA is an editorial assistant at New Frontier Publications.

Connect with Vivian
website caringmagazine.org
facebook [caringmagazine](https://www.facebook.com/caringmagazine)
twitter [caringmagazine](https://twitter.com/caringmagazine)
email vivian.gatica@usw.salvationarmy.org

CREATING ART, REVEALING EMOTION

ART THERAPY COMMUNICATES
SYMBOLICALLY TO AID IN RECOVERY.

BY DONNA KAISER AND MICHELE RATTIGAN

HOW TO FIND AN ART THERAPIST

The American Art Therapy Association (arththerapy.org) maintains a list of qualified art therapists in your area through the "Find a Therapist" link. You will also find helpful information about art therapy and the education, research and advocacy happening within the field.
—Mary Ellen Ruff

"Can I do this? What I see in my mind, what I feel in my heart, will it show up?" An artist stares at her canvas uncertain yet excited. She longs to fill the empty space with vivid colors and artful shapes that perfectly depict her struggles. Then, a breakthrough: "No more thinking. I am powerless over my addiction. Of course, I can't completely control what I put on this canvas, either."

Much as she confronted her fear of the unknown in entering substance abuse treatment, she now dips the wide brush into a random color on her palette. Another journey begins. This journey, likewise often treacherous, is also enlightening, pleasurable, calming, and can offer insights in unexpected ways. Personal expression through drawing, painting and sculpting embodies the inner world of the artist. It opens up that world and draws out responses in ways not possible with words alone.

What is art therapy? And why is it useful for people with addiction? Most of us are familiar with creating art, knitting or crocheting, going to an art show, attending

theater, and listening to music. We know these activities are relaxing, fun and enjoyable ventures. Some people recognize that engaging in the arts can have a self-soothing quality, a feeling of release from built-up tension, and a way to document an experience or feeling.

Elinor Ullman pioneered the use of art therapy with patients with alcoholism in Washington, D.C. in 1953. She introduced art therapy as an active means for these individuals to engage in the creative process. Six decades later, patients still find art therapy helps them gain a sense of mastery by communicating feelings symbolically, helping them connect with others who see and respond to their artwork, and often, begins a broader recognition of how addiction interferes with that human connection.

Despite the benefits, those in treatment for substance abuse are typically resistant to art therapy. Nonetheless, those who protest the most often become the biggest fans, often asking for more art materials and additional experiences during their treatment.






WHAT IS ART THERAPY?

The American Art Therapy Association defines art therapy as “a mental health profession in which clients, facilitated by the art therapist, use art media, the creative process, and the resulting artwork to explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior and addictions, develop social skills, improve reality orientation, reduce anxiety, and increase self-esteem. A goal in art therapy is to improve or restore a client’s functioning and his or her sense of personal well-being. Art therapy practice requires knowledge of visual art (drawing, painting, sculpting, and other art forms) and the creative process, as well as of human development, psychological, and counseling theories and techniques.”

Why do substance abuse patients grow to love art therapy? According to Neil Springham, chair of the British Association of Art Therapists and head of art therapy at Oxleas, the art image goes beyond simply being a mirror of an individual. It reflects back not only our internal concerns, but also our hidden or under utilized strengths. It offers a new way of looking at an old, persistent or “stuck” situation—like the cycle of addiction.

Art therapists are master’s and doctoral level professionals educated in both art and psychology. They receive clinically supervised work experience to become registered as an art therapist, and are then eligible to become board certified through a national exam. Art therapists use their skills and knowledge of visual arts in their therapy and counseling practices to help people of all ages and abilities work through a trauma, experience symptom relief, identify triggers and stressors, envision new possibilities, and find their voice.

Art has the power to bypass a person’s defenses, which is particularly helpful with those in recovery from addiction as many experience related defenses and denial. When the artist creates something his or her internal world is naturally revealed. By creating a piece, the artist can then recognize, often evocatively, how their drawing or sculpture expresses what they have been unable to allow themselves to feel or even recognize as it was masked by addiction.

This form of therapy allows a person to overcome shame and foster a spiritual renewal. Creative engagement in art therapy allows for reflection and a connection with inner strength, joy, and belief in something greater than one’s self. 

DONNA KAISER, PH.D., is the associate clinical professor and director of art therapy programs at Drexel University.

MICHELLE RATTIGAN is an assistant clinical professor and graduate of the art therapy program at Drexel University.

Connect with Donna
website drexel.edu
facebook [drexeluniv](https://www.facebook.com/drexeluniv)
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email dhk34@drexel.edu

WHEN IS ART THERAPY USED?

Whether an individual enters treatment in a detox center, a residential treatment facility or an outpatient clinic, art therapy can be most effective in meeting the individual where he is. While in detox, the focus is on safe, medical stabilization. This setting isn’t necessary for every individual wanting to work toward sobriety, however if detoxification is indicated, art therapy can play a role in easing the often difficult physical symptoms associated with it.

In residential treatment, group therapy is likely to be one component of the program. Groups can be helpful for people to see they are not alone, have common struggles with other group members, and can be a great source of support.

Art therapy is a particularly useful approach to substance abuse treatment because of its broad application in clinical settings and with a range of populations including adolescents, adults and older adults seeking substance abuse treatment. Visual expression deepens the work an individual can do by connecting the internal, nonverbal, creative world with the external, verbal and intellectual world.

By Mary Ellen Ruff, a board certified art therapist and a credentialed professional member of the American Art Therapy Association

DO GOOD

Visit the American Art Therapy Association at arttherapy.org and subscribe to its journal, *Art Therapy*.

Watch “Art Therapy Has Many Faces” (*Expressive Media*, 2004), a documentary on the history of art therapy, including art’s power to heal, and the benefits of art therapy in diverse settings including prisons and hospitals.

Try your own art therapy. Think of four ways you find peace or joy and create a postcard for each. Use symbols, pictures, words, and colors with paint, magazine clippings, drawings and so on so that each postcard is a work of art. Display the cards in various places—at home, work, in your car—to remind you to find peace and joy each day.

REDESIGNING



The Creative Matters team

RECOVERY

Creative Matters offers new chance at imaginative career

BY LAURA HAAS
PHOTOS COURTESY OF CREATIVE MATTERS



IN LOS ANGELES, one residential treatment center is taking its client job placement program further by providing professional internships and jobs.

Creative Matters is a full service creative agency staffed almost exclusively by those in recovery from addiction who are either undergoing or have completed treatment at Beit T'Shuvah, a faith-based residential addictions treatment center.

Founded in 1987 as a transitional home for released inmates, Beit T'Shuvah soon began to focus its efforts for those in recovery on preparing and finding employment. Then in 2009 John Sullivan, an addict in recovery, Chief Operating Officer Rabbi Mark Borovitz and Advertising Executive Russell Kern founded Creative Matters. Intended to be an in-house graphic design team, Creative Matters grew into a full creative agency, staffed by the recovering addicts of Beit T'Shuvah.

"We have a twofold mission," said Elaina Katz, general manager of Creative Matters. "To provide game-changing creative work for non- and for-profit companies that makes a difference and to help transform the lives of recovering addicts by providing experiential marketing internships that foster passion and purpose."

Katz spent many years working in digital marketing before she decided to move into the nonprofit sector after witnessing a close friend's struggle with addiction. She found Beit T'Shuvah on Google and a couple of days after submitting a résumé she joined the team.

"I enjoy working here because there is heart in everything we do," Katz said. "This place is a fusion of creativity and recovery and it's intoxicating. It's a workplace where we can be real and authentic; no one needs to hide their everyday joy or pain or struggles—on the contrary, they are encouraged to be transparent about it."

In the mandatory twice-weekly meetings staff members and interns are encouraged to



Kendl Ferencz, Creative Matters Art Director

share about their lives and recovery. Since the interns are often still in treatment, supervisors at Creative Matters work closely with treatment teams at Beit T'Shuvah in order to know and understand an individual's progress in recovery.

"This kind of transparency and vulnerability is welcomed and then worked through as a group," Katz said. "If someone is struggling, we all band together."

Creative Matters profits return to the treatment program at Beit T'Shuvah. In this way, clients not only help those in recovery gain job skills and experience but also support addiction treatment for others.

Kendl Ferencz is currently the art director at Creative Matters, but she started with the agency in a much different place. In 2009, she was the first graphic design intern while in treatment for addiction to heroin and opiates. When she was 14, Kendl's friend's father had knee surgery. His doctor prescribed oxycodone for the pain and the two friends decided to take some too.

"I figured out that I was addicted pretty quickly after that," Ferencz said.

By 16, she was also addicted to heroin

and believed the drugs were helping her.

"I had always been an extremely anxious kid, and getting loaded made it easier for me to talk to people and to be more comfortable with myself," Ferencz said. It wasn't long before she began to steal from her parents to fund her growing drug habit, which was actually pushing her into isolation. When she earned a scholarship to attend art school in Philadelphia, she enrolled in a methadone clinic.

"I was under the impression it would help me stop," Ferencz said. "It didn't."

For the next few years, Ferencz was in and out of treatment until one night in a cheap motel room she had had enough.

"Internally I knew I couldn't do it anymore. Everyone I knew was disappointed in me," Ferencz said. "The real problem was that getting loaded wasn't making anything better anymore. I either wanted to die, or get sober."

She checked back into the last clinic that she had relapsed from, Beit T'Shuvah.

"I think I was desperate enough this time to not want to go back to how I felt my last relapse, that I was willing to take direction from people instead of doing it my way," she said.



Recent cover of The Vista View produced by Creative Matters for Vista Del Mar, a child and family services nonprofit in Los Angeles.

“Creative Matters was an opportunity to do what I love. They helped me realize that I hadn’t screwed everything up, and I could do what I was passionate about.”

—KENDL FERENCZ

The biggest struggle was to speak honestly with her peers and mentors instead of pretending that everything was okay.

“Every other time I had gotten sober, when I started struggling with something or had thoughts of getting loaded, I wouldn’t talk to anyone about them,” Ferencz said. “This time I wanted to do anything I could to not relapse, so I started opening my mouth and letting someone know when I was having crazy thoughts or having a hard time with something.”

She credits her recovery to the second chance at a fulfilling career through Creative Matters.

“Every other time I had gotten sober I would get a job at a coffee shop, which wasn’t exactly fulfilling,” Ferencz said. “Creative Matters was an opportunity to do what I love. They helped me realize that I hadn’t screwed everything up, and I could do what I was passionate about.”

As the art director, she now mentors other people in recovery at Creative Matters.

“One of the best parts of working there is that I get to help people who were just as lost as I was discover what I had when I first started interning at Creative Matters,” Ferencz said. “I

get to see a light turn on in their eyes, and an excitement for where their lives can take them. It’s a pretty amazing experience.”

The agency is proof that professional job training has power.

“I get to watch people transform their lives; They show up here vulnerable and timid and leave, or stay, blossomed, confident, skilled, passionate and redeemed,” Katz said. “Our company is doing two things. It’s providing the playground for passion and purpose so that people can successfully stay sober and healthy in the long term and it’s showing the world they don’t need to be scared of addicts.”

For people like Ferencz, opportunities like this can be the difference between a recovered life and a lost one.

“Getting sober, being at Beit T’Shuvah and working at Creative Matters was and is the best thing that could have happened for me,” Ferencz said. “I went from a desperate, hopeless and lost soul who couldn’t show up for anyone or anything to a person who works doing what they love, has an amazing husband and family and can look people in the eyes. My life is beautiful.”

DO GOOD

Visit creativemattersagency.com to learn more about its “redemption by design.”

Take the Gallup Strengthfinder 2.0 test to discover your top five natural strengths and ways to optimize them in your life at strengths.gallup.com.

Read “The 7 Habits of Highly Effective People: Powerful Lessons in Personal Change” (Simon & Schuster, 2013) by Stephen Covey. First published in 1990, the book is a business bestseller on the balance of personal and professional effectiveness, and ways to perform better in both arenas.

LAURA HAAS is an Atlanta-based freelance writer.

Connect with Laura
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"I'm not alone, I have God in my heart and never have to be alone again..."

I was thirty-one when I learned to cook and do my own laundry...

I have a future today because of The Salvation Army Adult Rehabilitation Center, they made me employable."

Tony

For over 100 years The Salvation Army's Adult Rehabilitation Center Programs have provided spiritual, social, and emotional assistance for men and women who have lost the ability to cope with their problems and provide for themselves. Centers offer residential housing, work, group and individual therapy, all in a clean, wholesome environment.

Every year thousands of men and women come through our doors to escape their drug and alcohol addiction and go on to live productive sober lives.



This Convention is for all in recovery—whether chemical addiction or anyone who has had struggles of their own. It will be a life changing, spiritual experience that connects, unifies, celebrates, inspires and equips participants to answer God's call to be His people set apart for His service.

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Alcoholics Anonymous
celebrates 75 years of its
flagship 12-step program

“Hi, I’m Greg...and I’m an alcoholic.”

Self-admission—the first and most commonly referenced step of the Alcoholics Anonymous (AA) 12-step program. And for over 2 million people, the onset of sobriety.

Bill Wilson and Dr. Robert Smith founded AA in 1935 in Akron, Ohio. Within the “anonymous” 12-step program they decided to only use first names “at the level of press, radio and film” to respect the privacy of its members.

The model is simple: members attend regular meetings with others who share their particular recovery problem. Through this fellowship, members learn to better cope with their addictions and avoid relapse. The same method is now facilitated around the world to cure an array of addictions. According to the University of Wisconsin, about 20 percent of 12-step programs focus on substance addiction recovery while the other 80 percent focus on a range of behavioral dependencies, including debt, overeating and hoarding.

So what makes the 12-step program so effective?

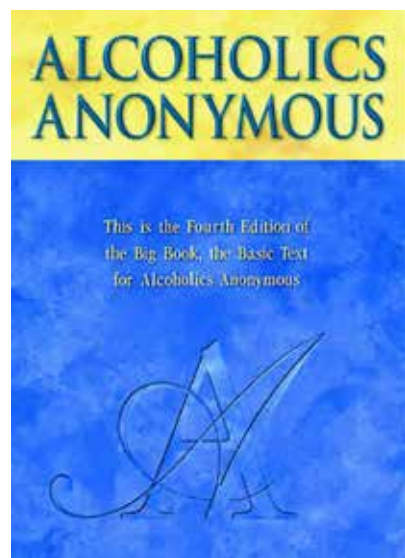
Janina Kean is president and CEO of High Watch Recovery Center—the world’s first 12-step treatment center, opened in 1940 with the assistance of AA cofounder Wilson. Back then, Kean said, options weren’t abounding.

“There was nothing else,” Kean said. “There was nothing else to help people with substance use disorder. And it worked because you had like people all trying to do the same thing.

There was continuous support. I believe one of the greatest forms of medicine is kindness.

“Most people who start in AA think, ‘No one has done the terrible things I’ve done.’ Then you walk into the room and find there are tons of people. You went into these rooms and you were welcomed. You were not welcomed in the world any longer because

BEHIND



THE BIG BOOK

you were such a trainwreck from your drinking. So you were able to go to a place where people were accepting you and hearing about you and trying to help you.”

Beyond the welcoming atmosphere and solidarity of AA support groups, Kean said the groups give members an opportunity to start fresh.

“They can make amends to people they’ve hurt through their substance use, which kind of clears the slate,” she said. “It gets people to look at their behavior, look at who they are, look at their negative behavior, define it, list it, tell somebody else about it. That improves their self-worth. They then share it and pass it along and it grows from there.”

In honor of the first AA “Big Book,” which printed April 10, 1939—75 years ago—this timeline evidences AA’s defining moments since.



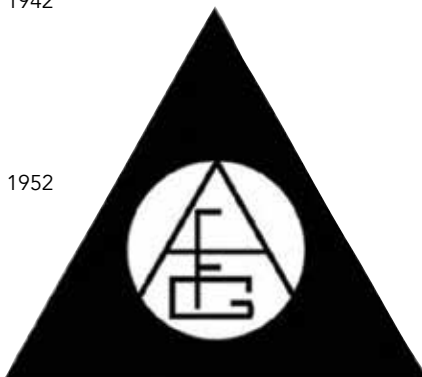
1940



1941



1942



1952

A BRIEF HISTORY OF THE BIG BOOK

1939 4,730 copies of the Big Book—titled “Alcoholics Anonymous: The Story of How More Than One Hundred Men Have Recovered From Alcoholism”—rolled off the press. After a planned *Reader’s Digest* article fell through and a radio spot resulted in no orders, sales fell flat.

1940 John D. Rockefeller Jr. held a dinner for AA attended by wealthy New Yorkers as well as members of the newly founded AA. Wilson planned the event to raise money for AA, but after the dinner, Rockefeller’s son Nelson said that AA should be financially self-supporting and its power should lie in one man carrying the message to the next.

1940 Cleveland Indians catcher Ralston “Rollicking” Burdett Hemsley announced his sobriety through a yearlong AA membership. Sports media nationwide published his name and face, calling into question the fellowship’s principle of anonymity.

1941 AA spread beyond Ohio and into Chicago, New Orleans, Houston and even Honolulu. Membership exploded from some 2,000 in Spring 1941, to approximately 8,000 in 200 groups across the country by year end. Bill Wilson began three years of traveling to visit groups, personally meeting many members.

1942 San Quentin Prison in San Francisco launched a

campaign for prison reform to address the special needs of inmates who had been drinking while committing a crime. They sought aid and advice from California AA members, which led to the formation of an AA prison group there and its inaugural meeting.

1943 As World War II battled overseas, the *Star-Telegram* reported that AA helped as many as 5,000 workers return to their jobs.

1944 An eight-page bulletin designed to bring AA news to its members became the AA’s official magazine, known as a “meeting in print,” with the first issue published in June.

1945 AA *Grapevine* became the official international journal due to added readership in Canada and Europe.

1950 Dr. Robert Smith died of cancer Nov. 16. Throughout his 15 years of sobriety, the fellowship he began with Bill Wilson helped nearly 100,000 men and women and their families.

1952 At Bill Wilson’s request, his wife Lois officially formed a fellowship specifically for families of those affected by alcoholism—Al-Anon Family Groups.

1954 Membership eclipsed 100,000 across approximately 6,000 groups on five continents.

1955 Second Edition of the Big Book released with estimated 150,000 AA members worldwide.

1968 At the 28th International Congress on Alcohol and Alcoholism, AA Chairman Dr. John L. Norris reported that that 60 percent of the 11,355 men and women who responded to a triennial survey said they had gone without a drink for a year or more while 41 percent of members said they had not had one drink since their first AA meeting.

1973 AA sold the 1 millionth copy of the Big Book, which was presented to President Richard Nixon in a ceremony at the White House.

1975 AA published "Living Sober," a book of member experiences detailing life without alcohol.


1976 Third Edition of the Big Book released with an estimated 1 million members worldwide.

1988 The movie "Clean and Sober" featured AA.

1989 Hollywood took another crack at AA in "My Name Is Bill W.," which chronicles the organization's formation.

2001 Fourth Edition of the Big Book hit stores with an estimated 2 million members worldwide in 100,800 groups meeting in approximately 150 countries around the world.

2012 The first feature length documentary on Bill Wilson, "Bill W.," dropped.

2014 To acknowledge the book's 75th anniversary—the 2013 General Service Conference approved the release of a facsimile edition of the Big Book, a replica of the original. 

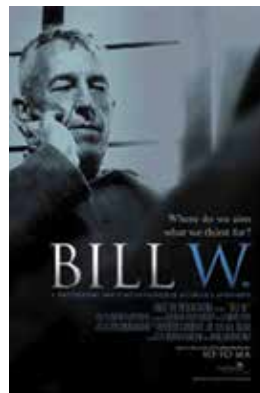
SOURCE: AA Fact File, Alcoholics Anonymous World Service Inc., "Pass It On": The Story of Bill Wilson and How the A.A. Message Reached the World"



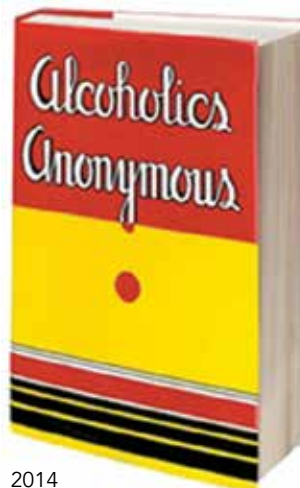
1973



1989



2012



2014

THE BASIC ALCOHOLICS ANONYMOUS PROGRAM included six basic steps:

1. We admitted that we were licked, that we were powerless over alcohol.
2. We made a moral inventory of our defects or sins.
3. We confessed or shared our shortcomings with another person in confidence.
4. We made restitution to all those we had harmed by our drinking.
5. We tried to help other alcoholics, with no thought of reward in money or prestige.
6. We prayed to whatever God we thought there was for power to practice these precepts.

Bill Wilson decided that the steps needed to be further simplified, and he revised the list to 12 steps. When he considered that there were Twelve Apostles, he became certain that the AA program should have 12 steps.

SOURCE: "Pass It On": The Story of Bill Wilson and How the A.A. Message Reached the World"

DO GOOD

Read "Alcoholics Anonymous: The Story of How More Than One Hundred Men Have Recovered From Alcoholism," also known as the "Big Book."

Discover more of AA's history at aa.org.

Watch "Bill W." (2012, Dan Carracino and Kevin Hanlon).

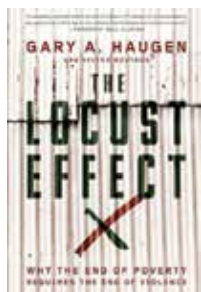
Visit the High Watch Recovery Center at highwatchrecoverycenter.com.

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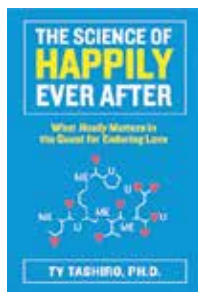
twitter [highwatch1940](https://twitter.com/highwatch1940)



The Locust Effect

GARY A. HAUGEN AND VICTOR BOUTROS
(Oxford University Press, 2014)

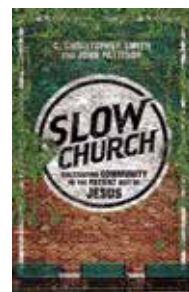
Examining the idea that the end of poverty will only happen when there is an end to violence, Gary A. Haugen and Victor Boutros explore common violence in the world's poorest communities and assert that it blocks the road out of poverty and undercuts development. Author royalties benefit the International Justice Mission. thelocuseffect.com



The Science of Happily Ever After

DR. TY TASHIRO
(Harlequin, 2014)

Exploring the science behind how to choose an ideal partner, Dr. Ty Tashiro translates scientific studies and research data to change the way we search for love. His research pinpoints why decision-making abilities sometimes fail when it comes to choosing mates and how we can make smarter choices. tytashiro.net



Slow Church: Cultivating Community in the Patient Way of Jesus

CHRISTOPHER SMITH AND JOHN PATTINSON
(IVP Books, 2014)

Believing that a “slower” approach to faith will put a sole focus on fulfilling the will of God, C. Christopher Smith and John Pattison invite readers to leave franchise faith behind and enter into the ecology, economy and ethics of the kingdom of God, where people know each other well and love one another as Christ loved the church.

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INE

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Storyline

Storyline believes people who live clear, meaningful lives have the greatest influence on culture. Through a book, small group resources and conferences, it aims to help people create life plans that give them personal vision and clarity, focussing on a meaningful life rather than just a productive life. The process helps the reader understand the story of God and where they fit within that story. storylineblog.com



Johnnyswim

Amanda Sudano and Abner Ramirez first met after Sunday service at a church in Nashville, Tenn. They started writing songs together, releasing their first self-titled EP as Johnnyswim in 2008 and married in 2009. The folk, soul, blues and pop duo's first album, "Diamonds," was released by Big Picnic Records this spring. johnnyswim.com



"Exodus: Gods and Kings"

Ridley Scott, who directed the Oscar-winning "Gladiator," now brings together a star cast in "Exodus: Gods and Kings." Expected for release in December, it is an interpretation of the struggle of the Israelites in Egyptian slavery and their exodus from Egypt led by Moses (Christian Bale). *The Guardian* said, "It's one of the most dramatic, politically charged and quite frankly blockbusting books in the Bible, and 'Exodus' looks set to be an equally epic movie."



Serial

"Serial" is a new weekly podcast from the producers of "This American Life," hosted by Sarah Koenig. Each episode will bring you not just back to the same theme but to the same story, to bring you the next chapter. The first, a crime story, will run for a dozen episodes starting this fall. "This American Life" host Ira Glass says it'll play like a great HBO or Netflix series, but you can enjoy it while driving. serialpodcast.org

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