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making recovery from addiction visible


Oct/Nov 2021 • Issue 17

Marshall Mercer *a Personal Recovery Story*

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Living in an abusive relationship caused Rianna a lot of trauma. It was hard for her to live with the pain. Without the tools to cope, she turned to an opioid and eventually became addicted. One day, she ran out of the drug and became very ill. It was then that she realized she had a problem. Fortunately, she found Maine Behavioral Healthcare's Integrated Medicated Assisted Treatment (IMAT) program, where she discovered hope — and a healthy path forward as she joyfully awaits the arrival of her new baby.

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Publisher

Carolyn Delaney

Layout

Joline Violette Edwards

Photographer

Brian Delaney

Editors

Susan Axelrod
Mickie Kucinkas

ISSUE 17 Contributors

Barbara Sullivan
Carole Fontaine
Elaine Shamos
Glenn Simpson
Jacqueline Brown
Kelly Staples
Kim Wilson
Lisa Twombly
Niki Curtis

Journey Team

Barbara Conner
Brenda Briggs
Carole Fontaine
Gale Clifford
Jeffrey D'Amico
Nancy Wolach
Niki Curtis
Roz Applebaum

info@recovery-journey.com
(207) 679-5005
Portland, ME 04101
www.journey-magazine.com

Cover

Marshall Mercer
photo by Brian Delaney

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From the publisher

End the stigma, support recovery now.

Jeffrey D’Amico, a *Journey* team member, got me this mask at a recovery rally in South Paris a few weeks ago, and it’s now my favorite mask. It gives people an invitation to ask, “How do I support recovery to end the stigma?”



In my experience, most people want to help and do what they can to support recovery. By inviting the conversation, we each have the ability to be a champion for change.

I believe the more people talk about recovery being probable, the more possible recovery becomes, and when we encourage these conversations, we help reduce the stigma attached to addiction.

We’re all in this together and can make a difference in our communities by amplifying some key messages:

1. Addiction is treatable.
2. Recovery is possible.
3. Help and support is available.
4. There are things you can do.

In this issue, we share stories about people working together to provide support to each other and our communities.

In *The Twelfth Step*, Niki Curtis writes about the importance of sharing experiences, strength, and hope; and Kelly Staple’s article on *Intentional Peer Supports* shows how building relationships based on authentic connections can change the world.

We aim to amplify a message that by being of service to each other and our communities, we can end the stigma and show that people can and do recover.

Together.

Grateful.



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ry saves lives

Centrally Located Treatment

Bringing the help & support to where it's needed

by Kim Wilson



so to speak. It's been an epidemic for decades and the expansion of services has created space for people to get that

professional support that is so needed for sustainable recovery."

One of the primary focuses of the organization is to

"knock down barriers" to treatment and recovery, according to Lana Whittemore, Development Director. Being in seven locations allows Blue Sky to address the needs of many people in central and northern Maine who might otherwise struggle to get help. "We cover a pretty large portion of the state," Whittemore says. "Nobody in the state needs to go without services." Telehealth appointments have also allowed many more people to have access to support and treatment. Currently the agency is using a hybrid model, incorporating both telehealth and in-person services.

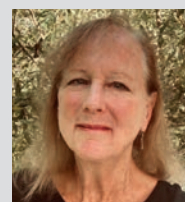
All seven locations are centrally located within their communities, which also improves accessibility. Often clients are without transportation, and the central locations enable them to walk to obtain in-person services. There is currently no wait list, and often clients are able to begin treatment the same day as they apply, according to Graham.

There is, however, an increasing need for services in outlying communities. Another goal of the agency, says Whittemore, is to focus on the question, "How can we do more to reach more rural communities?" Blue Sky is addressing the need in a "grassroots" manner, she says, including networking, involvement in community meetings, and distributing brochures.

Another barrier that Blue Sky works hard to eliminate is the stigma of drug addiction. All clients are treated with respect and dignity, be it during the initial intake process, or later on, in individual and group therapy. Getting families involved is also key to the recovery process. "Addiction affects the whole family system," says Graham. "Treating families is a goal of the agency."

"We're still defining our program," she adds, striving to offer consistent practices and services across all seven locations. When she was in school, a guest speaker spoke to a class she was in about the opioid epidemic in Maine. "It really opened my eyes to what was going on in the state and how it was affecting so many people," she says. This led Graham to where she is today.

The question she continues to ask of herself and her staff is always, "How can we better enhance programming to the people we serve?"



Kim Wilson is a freelance writer and editor who lives in Bath, where she enjoys exploring the Midcoast, gardening, and renovating her WWI-era home.

In 2008, Tina Graham, Owner and Director of Blue Sky Counseling, returned to school with the ambition of becoming a nurse. During a conversation with an advisor, she learned about addiction counseling. "It really resonated with me," she says. "That's exactly what I wanted to do." Graham went on to open Blue Sky Counseling, a medication-assisted treatment (MAT) program, in Waterville.

After opening the initial office in Waterville, the program quickly expanded to cover seven locations, including Waterville, Bangor, Skowhegan, Rumford, Farmington, Augusta, and Lewiston. Once they became a substance abuse licensed agency with the state of Maine, then later obtained a mental health agency license in order to provide MAT services, "We started growing very quickly," Graham says. "To the point where we had to hire more staff, we had to get more office space. A lot of people were managing their addiction on their own without professional support,

Five Tips for Being a Recovery Ally

by Alison Jones Webb *Reprinted from Issue 9*

Being a recovery ally is a journey, a lifelong commitment to take actions that support people in recovery. There are many ways to show your support. Here are some tips that I have learned from my friends and colleagues in recovery.

1. Listen

There's nothing like talking to a person in recovery who is open and willing to discuss their experiences. Ron Springel of the Maine Association of Recovery Residences suggests getting to know people face-to-face. "It's really hard if you haven't had an addiction to understand the power that addiction has." Most of our friends and neighbors who are in recovery are eager to talk about their own recovery and to answer open-ended questions like, "What is your recovery journey like?" or, "What do you like most about being in recovery?"

2. Learn

Make a point of learning about the pathways of recovery. A great place to start is by watching two documentaries: *The Anonymous People*, about recovery, and *Generation Found*, about youth recovery.

Maine's recovery community centers are the best places to learn about local recovery resources.

Many 12-step meetings like Alcoholics Anonymous are open, which means anyone can attend. There are thousands of meetings in Maine. A list of AA meetings can be found on their website. The Recovery Research Institute is the one of the best online resources

to answer just about any question about recovery.

3. Show up

Tom Coderre, Northeast Regional Administrator for the Substance Abuse and Mental Health Services Administration, suggests becoming involved in a local task force or coalition that already has a strategy they are implementing rather than starting something new. "Allies can bring new energy, thoughts, and experiences to the group," Tom says.

Attending community events like recovery rallies and community meetings to discuss addiction and recovery is a great way to show your support.

4. Find your talent and use it

Employers can hire people in recovery and create a safe space for employees to disclose their recovery status.

Teachers can speak in positive terms about the possibility of recovery and the hope that a healthy lifestyle offers.

Faith leaders can create a safe place for members of the congregation to talk about recovery.

Community members can volunteer at local recovery community centers.

Community members can become recovery coaches. Recovery community centers and other organizations offer recovery coach training, which aren't just for people in recovery.

According to Phil Valentine, Executive Director of the

Connecticut Community for Addiction Recovery, the organization that designed the recovery coach curriculum used in Maine, "If you're lit up, if your fire is stoked internally, it doesn't matter whether you're in recovery or not. It's really just the ability to love and care and sit with somebody and have your spirit warm theirs."

People in leadership positions, including policy makers, can examine the role that discrimination against people with substance use disorder plays in organizations and systems – like health care, employment, and housing – and work to make system-wide and structural changes.

5. Speak up

We can all call out stigma. Philip Rutherford, Executive Director of Faces and Voices of Recovery, the national advocacy organization for people in recovery, says that, like fighting racism, one of the best ways to fight the stigma of substance use disorder and recovery is to call it out, one-on-one, person-to-person when you hear it. When you hear someone using insulting or offensive language about people with substance use disorder, or people in recovery, speak up. Rutherford suggests saying, "When you say that, it can have a negative effect on people trying to change their life. Is this what you meant? Tell me more about why you feel that way."



Alison Jones Webb is a public health professional who has worked in the field of substance use prevention, treatment and recovery in Maine for over 15 years.

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Journey making recovery from addiction visible

PERSONAL RECOVERY STORY

Marshall Mercer

Marshall Mercer, 40, lost his identity at birth.

His parents, both addicts, were never really in his life, and he was raised by his grandparents instead.

“I had no identity, just pain,” he says.

Growing up, Marshall tried to find his identity through a life of crime.

“I was an animal,” he says. “[If] I wanted it, I took it.”

Some of his friends also had parents who struggled with drug addictions, and they hated it.

“I hated the system. I hated addicts. I hated drug dealers. I hated everybody. And I had no control growing up,” Marshall says. “So we robbed drug dealers. We thought we were doing it for a righteous reason, right? No, it was just fueled by hate.”

He suffered trauma from his family and society, and figured he would do “everything and anything I could do to break the law, to just get back at the system that let me down.”

He began using drugs himself only later in life, after trying to cope with the loss of one of his best friends.

“And it just got worse and deeper and deeper and deeper into the game,” he says.

He once had a warrant out for his arrest and was scared to think of

what he had done in his “drugged-out, blacked-out state.”

He thought it was something crazy so he left town for four years.

It turned out he had stolen hot dogs from a convenience store.

“Hot dogs, man,” Marshall says, shaking his head.

At 33, someone introduced him to heroin and told him he had to try it first before he could sell it.

“By the time I was 34, I had overdosed and ‘died’ several times,” says Marshall... He soon found himself in prison.

There, he found his identity and a pathway to recovery.

When he arrived, he met someone who was about to serve a five-year prison sentence, yet was smiling.

“I’m like, ‘What are you so happy about bro?’” Marshall says. “And he said, ‘Let me show you.’”

When the man pulled out a Bible, Marshall thought, *Here we go*. It took a month of regular hounding for Marshall to finally allow the man to read some of it to him. Six months after that first encounter, Marshall was hosting Bible studies in his own room. He began to study the Bible on his own, and



when he was released from prison, things were going well. But then he struggled to find work, and soon became “a full-blown addict” once again.

After spending a second stint in jail, Marshall started reading the Bible again.

“For some reason, the word ‘arise’ kept popping up,” he says. “I see ‘arise’ stick out, and I don’t know why.”

Marshall was ordered to go to prison or drug court, which he didn’t want to do because he didn’t want to take any opioid drugs.

This
column
brought
to you by



At a Bible study group he began attending, he discovered a Christian discipleship program with a providential name: Arise.

“Arise was a structured place where you couldn’t take medication, couldn’t take anything,” he says. “It was just the Bible, and that was the only way to protect me from being on the street with another substance.”

After nine months in the program, Marshall left with a new identity.

“I spent my whole life not knowing who I was,” he says. “I fell in love with the Lord; I fell in love with something other than myself. Something happened to me, my heart changed.”

Learning that he was forgiven allowed him to forgive himself, he says.

“I started to get released from so much, not just drugs. It was more than that for me. “All of a sudden I started seeing broken people that were like me, [people] that I knew had a chance to be fixed because I discovered love, and love brought me back to life.”

Marshall says he was able to stop “blaming everything, every system” and begin to help others despite all of the “atrocities” he experienced in his life.

Having previously been expelled from every school he’s ever attended, he is now in his third year of college.

“I had to learn how to use the computer in the middle of the pandemic while in college for the first time,” he says. “I was on the honor roll that year.”

He was able to find a job working at the Maine Recovery Advocacy Project and spent much of his time volunteering and speaking about recovery.

“[I take] every chance I get to spread the love of Jesus or recovery,” says Marshall.

“I get to go out into the world and I get to help [people] out of their darkness and show them the places where they can get help. And whether I get paid for it or not, whether it’s a volunteer or not, my soul gets paid.”

Marshall doesn’t identify himself as an addict.

“I identify myself as a student in recovery,” he says. “As a student I remain teachable in all pathways to recovery... It’s my job as the gatekeeper to show [people] whatever their path to recovery is.”

.....
Written by a Journey team member.

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Healthy Communities a Team Effort

Wellspring helps people start their journey

by Kim Wilson

Jess (not her real name) is one young woman who has found hope, support and recovery at Infinity House, one of the programs in a continuum of services offered by Wellspring in Bangor. In her early 30s, Jess was a graduate of another of Wellspring's programs, the women's residential program. But then she relapsed, and became pregnant.

"Federal dollars mandate that a person has to wait a full year before they can be in residential treatment again but because she was pregnant, I petitioned the state to make an exception, and they granted it," says Lisa Rogers, Director of Residential Programs. "This young lady was pregnant and looking to have a safe place to maintain her recovery and give birth. She was one of those girls who still had a whole bunch of hope.

"She wanted to change her life. She wanted the best for her baby. It was so important for her, when she found out she was pregnant, to do things differently, in order for her to really show up as the kind of mom she wanted to be."

Recently, Rogers ran into Jess with her baby at a 12-step meeting. "I saw her with the little one, who's now walking and smiling, and she's doing great," she says. "She's maintained her sobriety since she left us. It was great to watch her. You could really see what a great mom she is."

"It's no small thing to do rehab," adds Rogers. "I have the utmost respect for all the clients we have the opportunity to serve. Their behaviors and lifestyle hijack who they authentically are. We help them become the best people they can



Infinity House: Melissa Mekula, Jan Gee, Alisha Goss, Jamie Jones, Lisa Rogers



IOP Team: Christian Paradis, Jacqueline Davis, Travis Lenfest, Samantha Pike



Pat Leture, Dir. Operations Rick Gwinn, Dir. HR



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Photos by Brian Delaney

Clients are encouraged to become involved with organizations such as the Bangor Area Recovery Network (BARN), which hosts dinners, barbecues and dances—"great opportunities to socialize in

a sober environment, which is key to long-term recovery...getting out of the isolation that addiction brings about," Farley says.

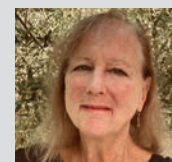
On the future of Wellspring, Farley has this to say: "Our vision is for healthy communities where people are doing well, and not in so much pain that they're reaching out for substances to help alleviate that pain.

"We really want people to thrive. Good treatment opportunities combined with strong recovery support is what helps everyone thrive—individuals, families, and communities."

be. To take their life back from the disease of addiction."

Wellspring's newest program, New Horizons, offers short-term support (3-7 days) to adults detoxing from opiates and/or alcohol. Until the opening of this facility, there was only one public detox program in the state of Maine, in Portland, and "People were traveling from Washington County and Aroostook County for hours and hours to get to a detox program," according to Suzanne Farley, Executive Director at Wellspring.

"People dying from overdose deaths only continues to rise here in Maine," she says. "It's a tragedy. We've got to stand together as a community and say 'enough is enough.' It takes all of us."



Kim Wilson is a freelance writer and editor who lives in Bath.

His Story Lives On

A ripple effect ... continued

by **Jacqueline Brown**

Bruce Pierce of Calais died in a car accident in the early morning hours of July 28, 2021. Bruce is remembered for his volunteerism in the local recovery community, and for being a kind soul who made an impact on everyone he met. Amy Day and Krystal Murphy of DownEast Recovery Support Center – Calais, where Bruce volunteered, share his story.

[Responses have been lightly edited for length.]

Amy: I met Bruce years ago in 12 step meetings during my own recovery journey. He would be so friendly to newcomers, offering to get coffee and share his phone number. I left the area and then moved back a few years later, and Bruce was still there, and still as friendly as ever. When I started with the DownEast Recovery Support Center in Machias, Bruce immediately wanted to know how he could help me get the word out, get meetings going and be there to offer support. When we opened our location in Calais, Bruce became even more involved.

What Bruce did best was share his recovery story. He wasn't afraid to talk about his struggles and how he overcame them. Hearing how others are succeeding in recovery is so important for people just starting out on their journey. Bruce made a huge impact this way.

It wouldn't matter what time of day or night it was, he would be available. Often males prefer talking to other males and Bruce was our go-to. He had a

way of always making a special connection. You knew he cared.

Bruce was also a volunteer for Meals on Wheels. He delivered meals, but always made sure to check in and find out how the person was doing. He was such a humble guy. His family had no idea just how involved he was with his community. At his memorial service, looking around and seeing all the people whose lives Bruce touched was an amazing moment for them.

Bruce's loss is felt so strongly by so many.

Krystal: One thing I loved about Bruce was his eagerness to keep learning more about recovery. Bruce had used abstinence in his recovery. This was a very important part of his story, but one day we had a really long conversation about different methods of recovery (i.e., possibly using medications) that work for different people.

Bruce seemed reluctant at first to consider that methods besides complete abstinence could work, but then he went off and did a lot of thinking, and then came back and announced to me, "You know what? I think you're right!" Bruce then made it a point to preach the idea of different forms of recovery in his conversations. He did this because he was just so committed to helping people in any way they needed.

Bruce was really loved by our community. The warm line volunteers would recognize

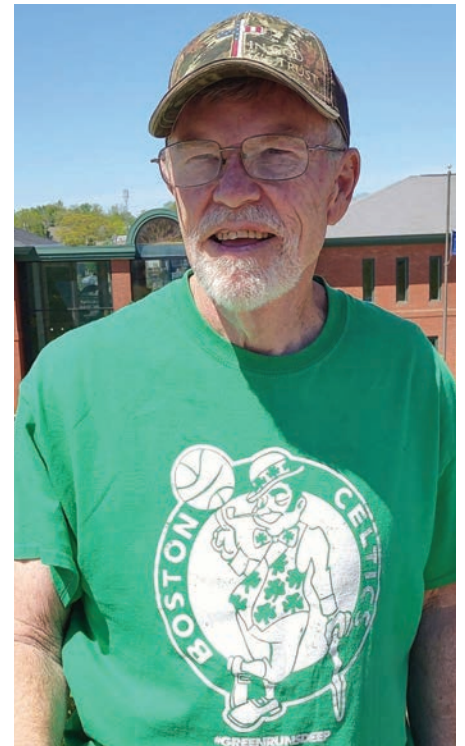


Photo credit: Krystal Murphy

his voice when he called and he would turn the call back on them, checking in to make sure they were okay. Bruce would get multiple Thanksgiving invitations. He was well fed! Bruce was also the best pet owner. You would see him out walking his dog Rambo [who sadly passed a few months prior to Bruce's death] every day.

Bruce was filled with a deep faith and truly believed that recovery for anyone was possible. I also know that he was always concerned that he wasn't reaching enough people. The truth is he reached so many, and by continuing to share his story, he is reaching even more.



Jacqueline Brown is a freelance writer from Southern Maine who regularly contributes to national and regional publications. A former public school teacher in the Boston

area, Jacqueline is the published author of several books for children, one of which won the Maine Literary Award for Children's Literature in 2018. When she's not at her computer, Jacqueline can be found looking for seaglass at her favorite beach.

Intentional Peer Supports

*Changing the world
one relationship at a time*

by Kelly Staples



“If you have come here to help me, you are wasting your time, but if your liberation is bound up with mine, then let us work together.”
(Lilla Watson, Aboriginal Activist)

At a time when the United States was rife with social justice movements including civil rights, disability rights, women’s liberation and gay liberation, the Consumer/Survivor/Ex-patient movement emerged.

On the first day of Intentional Peer Support Core Training we discuss this quote. In many ways the mental health system has a history steeped in the colonization of Consumers/Survivors/Ex-Patients.

This colonization has led to coercion, forced treatment and little hope for a future filled with purpose and joy.

This movement demands autonomy for those who seek support from the service delivery systems.

The Consumer/Survivor/Ex-Patient movement has led to substantial changes for the recipients of services. This includes the Rights of Recipients of Mental Health Services, community inclusion, and

the emergence of peer support and paid peer support roles.

When former mental health system patient Shery Mead developed Intentional Peer Support (IPS) in the 1990s in New Hampshire, it was with a vision of Consumer/Survivors/Ex-Patients collaborating to develop a mental health system that would be informed by the people who used it.

In Maine, Intentional Peer Support Specialists work within and outside of the current paradigm to inform change.

Within the system, CIPSS (Certified Intentional Peer Support Specialists) work alongside traditional mental health providers and use their lived experience and training to connect with people living with the effects of trauma, mental health issues, and/or substance use.

Often in treatment plans we see a plan that includes developing natural supports. What we don’t see is a plan to help each other learn what it means to be a friend, to become a person that others can connect and relate to. Practicing

IPS begins by the first task: Building Connection.

To do this, we must build trust.

We demonstrate that we are willing to be vulnerable, to share our experiences and to validate the experiences of the other. We honor this trust by valuing “Nothing About Us Without Us,” a term that “expresses the conviction of people with disabilities that *they* know what is best for them.” This chant became the rallying cry for the Disability Rights Movement.

Because CIPSS value the sanctity of the personal story, we build a trust where people often share in ways they’ve never shared with anyone before. Our relationship grows and we have a willingness to sit with the discomfort of having difficult conversations.

We respond to discomfort by sharing what is happening for us, “I’m afraid” rather than telling people what to do (*calm down, you need to breathe*), or what is “appropriate” (*No swearing!*). As trust builds, we’re able to go to a “place” that leads to healing and the creation of lives worth living.

Utilizing IPS, we practice healthy relationships where both people learn to ask for what they need and to negotiate how to make that happen. Many of us didn't grow up surrounded by people who modeled healthy interactions. Our peer support relationships may be the first time we've experienced an authentic connection. We learn what it means to be a friend and then develop natural supports, our community.

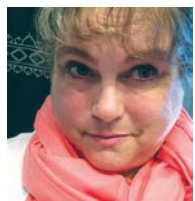
Currently IPS is practiced in Maine's state psychiatric hospitals, at peer centers, on behavioral health home teams, assertive community treatment teams, peer recovery centers, emergency departments, residential programs, the youth peer support state-wide network, on our state-wide warm line and more.

CIPSS are, as Mead says, "Changing the world one relationship at a time."

To learn more about Intentional Peer Support Training in Maine, go to, <https://www.maine.gov/dhhs/obh/training-certification/intentional-peer-support> or send an e-mail to CipssInfo.DHHS@maine.gov.

If you would like to participate in the Consumer/Survivor/Ex-Patient Movement, reach out to the Consumer Council System of Maine. "The Consumer Council System of Maine represents fellow consumers with an effective, organized voice in shaping public policy and mental health services." To learn more, go to, <https://maineccsm.org/>.

To learn more about Disability Rights in Maine, go to <https://www.drme.org/>.



Kelly Staples has spent her career working for social justice. Her work is informed by her lived experience as a survivor and a mother.



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The Anonymous Path

Joe K.



Joe K. is one of many men that came to Alcoholics Anonymous through a mandated addiction rehabilitation center. The facility mandated 12 meetings a month but participants could choose which program they wanted to attend. Joe and some other guys went to a lot of AA meetings together.

“The facility provided information and meeting lists on all of the meetings available,” he says. “The first meeting was overwhelming for me at first. Just to walk through the door ... but people were very warm and inviting and that nervous feeling subsided because of it.”

Joe did not get a sponsor for a couple of months because he wanted someone like-minded. “I was early in recovery and had a hard time believing that people understood my journey,” he says. A man who had been through the program at the same facility came in to talk, and “something just

clicked,” says Joe. “My eyes opened wide and I decided that’s who I would ask. For me it was an instant win because it wasn’t the quantity of his sobriety but the quality that he had. He was recovering and transitioning into a better person at the same time.”

Joe and his sponsor began working the steps, and like many in recovery, found the fourth step, which requires a detailed moral inventory, to be a sticking point. “It was hard; things came up,” Joe says. “I forgot they were still in there and releasing all of that in the fourth step, for me, it’s pretty key.” Joe laughs and shakes his head as he says, “I did burn the notebook that I wrote my fourth step in. I’ve heard that people do that to release everything. I remember the day that I burned it, it was in the winter and it meant something, like freedom from those resentments. I don’t hold nearly as much resentment as I used to and it’s still a work in progress.”

Joe continues to practice the steps every day beginning and ending with the third step, which states that he ‘Made a decision to turn our will and our lives over to the care of God as we understood him.’ “This is honestly the best step for me personally, because it starts my day perfectly and finishes it just as well,” he says.

One of the most humbling things Joe did during his steps was to read his fourth step inventory to his sponsor. He recalls being embarrassed, but his sponsor shared items that were on his own fourth step to reassure Joe that he was not alone in having to confront painful realities. “It took a while, but it was freeing, it was relieving,” Joe says. “I walked out of the sober house, feeling like I was on the biggest pink cloud ever.”

Joe had a chance to right previous wrongs when he came to the ninth step, which is about making amends. “I was working in a

building and I saw someone that I had done some wrong to 20-plus years ago in high school. It was pretty bad and he didn't know it was me. I pulled him aside and apologized and told him what I had done wrong and that I wasn't that same person today. It was good; we were friends almost immediately. It gave me a feeling of having honor about it."

One of the recommended practices in AA is to get involved with a home group, and Joe found a regular meeting where he feels accepted. "I need to get a job in my homegroup because that's an important factor in being involved in your home group," he says. "I'm guilty of not doing that but knowing it is a start for me and then actions will follow." When asked what is keeping him from getting a job in his home group, he honestly answers "It's a commitment. It's still a fear of mine. It's something I'm working on."

Joe loves the fellowship and the quality of friendships he has made. "It's not a lot, but again, it's quality over quantity. If I have issues, I can talk to them," he says, "I guess I've been blessed with being able to ask for help, real friends, like calling me on my BS, which is what friends do. It's different from when I was using drugs, because people weren't real friends, they were buddies,

drinking buddies. My friends today really care, which means a lot. It makes me happy. Confident."

While Joe continues to work the program and rebuild his own life, he struggles with feelings of helplessness when he sees his friends relapse. "You try and try and give them the best that you can and all the love that you can but sometimes they don't love themselves enough to come back and that's difficult," he says I can be there for them with open arms if they come back, but the difficulty lies at the moment they use,—I can't really associate or be around them. I have to stop reaching out at times for my own sake."

Joe says that the main principle AA has taught him is to care for others and have compassion. "That, to me, is probably one of the most important things that I use on an everyday basis; it doesn't matter your race, your gender, your sexual preferences," he says. The 12th step is a beautiful thing, having that awakening and caring for others. It's a new life from what I used to be."



Niki Curtis of Portland is a woman in long-term recovery whose passion is to help others and spread positivity. She loves to find creative ways to do that, including writing for Journey.



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- 12-Step workshops for families and incarcerated individuals

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In Mid-coast, getting out of jail comes with community support for recovery

by **Jacqueline Brown**

For the latest example of Maine's long tradition of neighbor helping neighbor, look no further than **Community Consultants**, a peer-to-peer recovery support program that is now part of discharge planning at the Knox County Jail.

Initiated in 2020 through a grant to Knox County Community Health Coalition from Maine Health Access Foundation (MeHAF), the program invites members of the community in recovery to attend discharge meetings at the jail. At the meetings, these "community consultants" offer inspiration and real life examples and tips for successfully re-integrating with the community while staying in recovery.

"Our end goal of discharge planning is to have people back in the community ... back with their families ... while staying in recovery. Hearing what worked for other individuals in recovery is a huge benefit and resource. There's nothing like people with similar lived experiences sharing what

worked and how to get help," said Sheriff Tim Carroll, who helps to facilitate the program in Knox County.

A wider community of support

There is growing proof that reentry support programs in prisons work, and work well. In addition to support for remaining in recovery, according to an analysis from the National Institute of Justice, recovery-related programs can produce statistically significant reductions in recidivism, helping individuals remain in communities rather than return to prison.

In peer-to-peer programs like Community Consultants, peers from the local community share their own lived experiences recovering from addiction, helping to build skills and address specific needs that people with addiction issues often face in early recovery. Connecting with a member of the local recovery community also improves social ties and identifies new positive social environments.

By tapping into local community members who offer up local resources and ways they've problem-solved their own recovery issues, Carroll believes this peer-to-peer knowledge is a game-changer for individuals embarking on life after prison.

"We want people reentering the community and going to work, paying their rent and taxes; programs like Community Consultants are part of how we get people back into the community so they can stay there," said Carroll.

Incorporating community members in discharge planning meetings also reflects a larger shift in how law enforcement responds to people with substance use and addiction issues.

"We are always looking for programs that can help," noted Carroll, adding that, "...when people see that we're there to support their recovery, they are more comfortable talking to law enforcement ... they can speak more openly. What we

often hear is, ‘this is the first time I’ve been around a cop and felt comfortable.’”

It’s personal ... for everyone

Carroll has a personal stake in making the Community Consultants program work. Two members of his extended family have experienced drug-related overdoses, including a cousin who lost his struggle with addiction not too long ago.

“He tried his best, but couldn’t get out of the cycle. It’s a disorder. These people deserve help — they are our family members and neighbors. No one is immune from this problem.”

A growing program

For now, consultants participate in discharge meetings over Zoom, due to ongoing Covid-19 restrictions. Carroll hopes that eventually consultants will be in the room at meetings.

Waldo County undersheriff Jeffrey Trafton also offers the Community Consultants program. “This is very much a joint effort and partnership between the two counties in serving our communities,” Carroll confirmed.

Any community member with recovery experience who wishes to volunteer as a consultant can contact the Knox County Sheriff’s Office to learn more.



Jacqueline Brown is a freelance writer from Southern Maine who regularly contributes to national and regional publications. A former public school teacher in the Boston

area, Jacqueline is the published author of several books for children, one of which won the Maine Literary Award for Children’s Literature in 2018. When she’s not at her computer, Jacqueline can be found looking for seaglass at her favorite beach.

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The Twelfth Step

Practicing these principles in all of our affairs

by Niki Curtis



If someone told you that you had to give away your car to keep it, you would wonder if they needed to be evaluated for a psychiatric condition. But this is the exact concept that many people involved in 12-step programs such as Alcoholics Anonymous, Narcotics Anonymous, Al-Anon, Overeaters Anonymous, and many others adopt as an important principle for recovery.

Each of the programs has a list of principles, including honesty, open mindedness, willingness, forgiveness, surrender, integrity, generosity, hope, faith, courage, humility, love, discipline, patience, perseverance, awareness and service—which are practiced through the 12 steps.

These programs all have almost the same wording for the 12th step. “Having had a spiritual awakening as a result of these Steps, we tried to carry this message to _____ and to practice these principles in all of our affairs.”

The blank involves others in the same program. Giving away something of value—ourselves—helps to sustain us in our new way of life.

A sponsor is a key part of the 12th step.

This is the person who shows a new member through the 12 steps, and shares their past experience. There is no training to be a sponsor, it only involves an individual’s own experience, which was gained when they were taken through the steps by a sponsor of their own. This rite of passage is passed on through generations of program members.

Each member choosing to share their experience with someone in the program is giving of themselves, and the reflective benefits are their own success in their related program; whether it is staying sober, staying clean, staying away from codependent relationships, or foods that are triggering. And the giving equals getting so much more.

Amanda K., a woman in long-term 12-step recovery, shares her experience with the 12th step. “When I first entered 12-step programming I had certain ideas regarding what I thought the 12 steps were and what they meant,” she says. “I can remember waiting to ‘get’ to step 12 and hoping that I would be able to start sponsoring others.

I think I thought it was more of a destination that I would arrive at. It wasn’t until after I had been in the program for a few years that

step 12 took on a much different meaning for me.

What I realized is that, for me, step 12 isn’t about helping others at the expense of myself. I learned that I can’t transmit something that I don’t have. I slowly started to come to the conclusion that I was burning out on helping others and that I needed to set some boundaries with myself regarding what I can give.

At that time I was a single mom and working a full time job as an alcohol and drug counselor in a residential program.”

Amanda says that her lack of self-care began having a negative impact on many aspects of her life, and that she knew she needed to make some adjustments. She began working with a new sponsor who helped her gain a new perspective on the 12th step.

“She reminded me step 12 was not just about helping others and being of service but also practicing spiritual principles in all of my affairs,” Amanda says. “She also reminded me that I have been working step 12 long before I ‘arrived’ at the step, and that practicing being patient, tolerant, kind and loving towards others and myself is practicing step 12.”

Amanda's practice on the 12th step now includes being as kind to herself as she is to others, and setting boundaries. "For me this step has become more of a balance versus something I just check off my to do list and that feels much better," she says.

Justin R., another 12-step program member, shares his experience. "When I first began my journey in a 12-step fellowship, I had the tendency to jump ahead of myself and predict what upcoming steps would be like," he says. "From my experience, these predictions were often pretty far from what the experience would turn out to be. Most of the time, the ever-present fear factor would creep in. When I thought about step 12, I solely attached it to the sponsorship of others within the program. As a person with the tendency to devalue themselves, I was not sure that I would be up to the task and potentially wouldn't have enough to offer."

Just like Amanda, Justin found his footing with the help of a sponsor, who read through the portion of the guiding text that describes step 12 along with him. "When I began to doubt my abilities, my sponsor asked 'do you remember the actions you have taken to stay sober?' I replied 'yes.' He then told me to simply 'share that experience with others.' Those instructions seemed like something I could do."

Justin is mindful of the time-tested fact that sharing the message of recovery with others is the best way to stay on the path forward. "From my perspective, an often overlooked or undervalued piece of step 12 is the portion that states "and to practice these principles in all our affairs." Constant evaluation of my behavior and daily practice of the prior steps has been instrumental to my recovery.

If I forget or choose not to "practice the principles" through a relationship with a higher power and self-reflection of my fears, resentments, and selfishness...I may be headed for trouble."

Justin says that practicing step 12 has been instrumental in helping him to maintain his recovery. "My appreciation and gratitude for being given the gift of recovery is something immeasurable," he says. "It has impressed upon me that this gift was given with the intention that I will pass it on. To guide people through a process that was freely relayed to you is a privilege. To witness the sparkle come back into someone's eyes and the blessings start flowing back into their lives is the most beautiful experience. When effort has been put forth to relay the message of recovery to others and practice the principles laid out within the 12-steps, the results have been something I may have never dreamed."

"Practicing principles in all our affairs" is a concept from the 12th step that can be accessed by anyone.

You don't have to be a drug addict, food addict, sex addict, alcoholic, or any other 12 stepper.

You only have to be human, and want to keep the important things in life like integrity, compassion, patience, tolerance and many others.

The question is, are you willing to give them away?



Niki Curtis of Portland is a woman in long-term recovery whose passion is to help others and spread positivity. She loves to find creative ways to do that, including writing for Journey.

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Gerard Corcoran,
207-274-3305, Gerard.Corcoran@goodwillnne.org

Aroostook County residents:

Aroostook County Action Program (ACAP):

Meghan O'Berry,
207-554-4154,
moberry@acap-me.org

Androscoggin, Franklin, Hancock, Kennebec, Oxford, Penobscot, Piscataquis, Somerset and Washington County residents:

Eastern Maine Development Corporation (EMDC):

Doug Dunbar, 207-299-5626,
OpportunityGrant@emdc.org

Be a Positive Influencer!!

by Barbara Sullivan

This column on Prevention is possible because of the support of **Be The Influence**, a collaborative group of community members from Windham and Raymond, Maine whose mission, like mine, is to promote healthy choices and help reduce teenage alcohol and other drug use. **Be The Influence** sends an interesting message: What is an influencer?

An influencer, as defined by the *Cambridge Dictionary*, is a person who impacts or changes the way other people behave.

Those of us in the field of prevention are trying to do just that— impact the decisions teenagers make when it comes to substance use. Social media is full of influencers. They are people who have built a reputation for their knowledge on a particular subject. They post regularly and create a following of people who pay attention to them.

More than half of the world's population is using social media and therefore subject to media influence. But there is another place in the world where social influencers thrive. They are in the halls of middle and high schools around the world. They are teens

who influence others with what they wear, how they act, what they say and what they believe in. It's called peer pressure.

Peer pressure is often thought of in terms of negative peer pressure but there is also much to say about positive peer pressure. Peer pressure is about perspective. Most teens assume that teenage substance use from middle to high school is much higher than it really is. My job, as a prevention specialist, is to change their perspective. I offer them the facts.

Monitoring the Future, a yearly study done by the University of Michigan, surveys use of alcohol and all other drugs by teens across the United States.

According to the 2020 survey results, only 20.5 percent of eighth graders in the US have used alcohol in the past year which means 79.5 percent of eighth graders have not. Alcohol use increases for high schoolers; 55.3 percent of seniors used alcohol this past year but **nearly half, 44.7 percent, made the healthy choice not to drink.**

The data shows that substance use in middle school through high school is lower than teens perceive.

Letting teens know that many of their peers across America choose not to drink or use drugs can

help influence their decisions on substance use. It tells them they are not alone in wanting to make healthy lifestyle choices.

Teens can be “social influencers” when they say “No” to alcohol or other drug use, when they take the keys from a friend who should not drive home from a party, when they work hard to get good grades, demonstrate having fun with healthy highs and practice daily self-care.

Positive peer pressure is influencing others to make good decisions. Ask your teen who those positive influencers are in their schools and what they are doing to influence healthy choices.

We can all **Be The Influence** by practicing healthy habits and encouraging positive decision making with our children and those people we hope to influence in our lives.



Barbara Sullivan taught middle school in Maine for 25 years where she designed a middle school substance abuse curriculum for grades 6-8. Barbara has

presented at professional conferences on the topic of alcoholism as a family disease. She is currently working as a Prevention Specialist for FCD Prevention Works, a division of the Hazelden Betty Ford Foundation.

This column brought to you by



Preventing youth substance use can start in your medicine cabinet!

Eleven percent of Maine youth report having used medication that was not prescribed to them.

National Prescription Drug Take Back Day

In addition to collecting unused, expired, or unneeded medications, Portland Public Health's Needle Exchange Program will be at the following locations, to collect and safely dispose of used sharps:

October 22, 2021 at WGME Channel 13 (9am-3pm)

October 23, 2021 at UNE School of Pharmacy (10am-2pm)

{If you can't make the event, you can still safely dispose of prescription medications at home!}

Remove expired or unused medications and safely dispose of them.

HOW TO SAFELY DISPOSE OF PRESCRIPTION MEDICATIONS AT HOME

There are safe ways to dispose of expired prescription medications at home!
Follow these recommended steps:

- 1** Find your expired and unwanted/unneeded prescription medications. Remove from container and mix with coffee grounds, cat litter, or dirt.
- 2** Place the mixture in a closed plastic bag to prevent spilling.
- 3** Throw the bag away in the garbage.
- 4** Scratch out your personal information on the empty medicine bottle to protect privacy, then throw away.

Resources: SAMHSA, FDA

Public Health
Maine Center for Disease Control & Prevention
Department of Health and Human Services

MAINE PREVENTION SERVICES

maine.gov

The Gifts of Imperfection

by Brene Brown

Review by Lisa Twombly

Practicing courage, compassion and connection in our daily lives is how we cultivate worthiness. The key word is *practice*.” This book is a practical guide to implementing practices that change the way we see and feel and share experiences, by living The Gifts of Imperfection. For those of us recovering from perfectionism, it’s a challenge, a look in the mirror and a helping hand.

The Gifts of Imperfection, Letting Go of Who You Think You’re Supposed to Be and Embrace Who You Are, by Brene Brown Ph.D., L.M.S.W., came out in a 10th Anniversary Edition last year. Along with the 10th Anniversary Edition of the book, online resources, a podcast and webinars support The Gifts of Imperfection community.

Brene Brown celebrated 25 years of sobriety in May of 2021. A self-described shame researcher and storyteller, Brene has earned the trust, the following and the first name status of Oprah. She is widely known and well trusted and is wildly popular. While her sobriety isn’t what made Brene famous, all that fame was made possible first and foremost by the fact that she is sober, as she shares with her trademark directness in interviews and in her books. For many, she gives us permission, encouragement and an example of how to turn what has been hardest

in life into our greatest gift to the world.

A short book with a long subtitle, *The Gifts of Imperfection* is organized into ten guideposts for cultivating Wholehearted Living by Letting Go of what gets in the way. For each guidepost, the practice or perspective to cultivate and the one to let go are paired.

The first guidepost, [Cultivating Authenticity, Letting Go of What People Think](#), challenges us to see authenticity—ours and everyone else’s—as a practice we chose every day, with the courage to be imperfect. It sounds so simple! It also sounds messy, bumpy, and lots of other not-so-perfect words and scenarios come to mind. But by seeing this as a practice, rather than a completed task, check-box ticked, once and for all, I remember that the point is to keep trying, remembering that others are practicing, too. Brene encourages us, “Don’t shrink. Don’t puff up. Stand on your sacred ground.”

[Guidepost #4, Cultivating Gratitude and Joy](#), encourages readers to go beyond just an attitude of gratitude, by practicing gratitude daily. Gratitude lists,

shared daily with others, a gratitude jar filled with gratitudes throughout the day and a gratitude share at the evening meal reinforce gratitude and create joy. For many in recovery, finding gratitude in the everyday can be a new and simple practice that keeps us in the moment and present with what is good in our lives today.

My partner and I share a daily gratitude practice. We end each day by looking at one another, taking turns telling each other what we are grateful for that the other did or said. Often these are small, sometimes funny, and



always appreciated acts—a smile, a meal, a small kindness—and they remind us that our life together is good, today, and filled with opportunities to experience joy.

Guidepost #10, Cultivating Laughter, Song and Dance, encourages us to let go of being cool and always in control. Wow. Talk about a tall order. I remember as a teen wanting nothing more than to be seen as cool. This included several dangerous habits and some very questionable hairdos. In adult life, Brene says this can look like covering up our goofy, passionate or heartfelt expressions of self for the sake of being accepted, and in turn betraying ourselves. When I think of the ways and times I betrayed myself over the years, it's no surprise that the cool activity of drinking turned into a coping mechanism for numbing pain. Brene suggests we sing, dance and laugh instead. Maybe you loved HipHop in the 90's or you've downloaded TikTok to watch the funny cat videos? Go for it!

Before I got sober, a friend recommended Brene Brown's TED talk on vulnerability. Speaking openly and honestly about a tender topic, with courage and vulnerability, Brene showed me that truth telling has the power to heal the storyteller as well as others listening. In Brene's words, "Owning our story and loving ourselves through that process is the bravest thing that we will ever do." In sobriety, owning my story is no longer a scary prospect, but a welcome and reassuring daily practice. Thank you, Brene Brown, for this gift.



Lisa Twombly is a Holistic Health Practitioner who is creating an online program and community, called Better Off Sober Sisterhood, for women seeking a healthy sober life.

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Hiring People in Recovery is Just Good Business

by **Jacqueline Brown**

Chameleon Group is a business-to-business call center located in Dover, New Hampshire. It's a busy and bustling workplace, and one where it would be difficult for most people to guess that approximately 70 percent of its newest employees are in recovery.

The story of how this came to be, and how hiring people in recovery has contributed to Chameleon Group's success, is a lesson in good business for any employer curious about tapping into the recovery workforce.

All it took was one person.

Dana Lariviere, CEO of Chameleon Group, vividly recalls the day he decided to take a chance on hiring someone in recovery. In 2016, an employee with an average track record at the company developed a severe attendance problem. Ultimately, the employee, a woman named Sarah, was terminated.

Two years later, Sarah got back in touch with Lariviere to explain what had happened. As Lariviere recounted, "Sarah called me up and let me know she had been addicted to heroin. She had since entered a 12-step recovery program...and had even become a certified recovery coach. She was calling to make amends...and to ask for her job back."

This call, Lariviere recounted, left him, in a word, "gobsmacked."

After doing some thinking, Lariviere decided he was going to give Sarah a second chance.



Dave Guthrie, Peter Harkins, Jean Rozema, Deb Clark, Sophia Coffey, Geoff Booker, Dana Lariviere. Photo by Brian Delaney.

"This wasn't so easy. I really had to sell this to my management team," he says.

When Lariviere finally got the green light, Sarah came back and immediately hit the ground running, doing so well that she was soon promoted to manager. Lariviere was impressed. Then a light bulb went off.

"One day I asked Sarah, 'Are there other people like you?'"

The answer was yes. So, guided by Sarah's recommendations, Lariviere began hiring other people in recovery. Chameleon Group is now designated as a "Recovery Friendly Workplace" by the state of New Hampshire.

Over time, Lariviere has figured out how to make the process of hiring people in recovery a

success. "First, any new hire in recovery must be an active member of a recovery program," he says. Lariviere also provides the ability for employees to meet with their counselor or parole officer, if applicable, on site.

"We've found that recovery is all about resources, so we do our best to connect people."

Lariviere has also found that additional training is sometimes needed to bridge skill gaps for these new employees. "Depending on what happened before they entered recovery, these people might not have all the life skills they need for success, or they had jobs that didn't require much business knowledge." To help strengthen job skills, Chameleon Group offers peer-to-peer mentoring.

Geoff Booker is one of the employees in recovery at Chameleon Group. He was hired after Sarah's initial success. "I was still in rehab when I learned about Chameleon hiring people in recovery. Two days after I got out, I came over and got a job. Sales was new, but I was willing to learn."

Four years later, Booker is now Chameleon's Director of Sales. This meteoric rise up the job ladder is a stunning career success, and much more. Working for Chameleon represents a total turnaround for his life.

"I was a homeless addict. Now I have a job, a house, and I am back in school," Booker described.

For Lariviere, it's the success of people like Geoff that confirms how much the decision to hire people in recovery has been a win-win for his business.

"These people are fiercely loyal to our company. They go the extra mile because it was for them."



Jacqueline Brown is a freelance writer from Southern Maine who regularly contributes to national and regional publications. A former public school teacher in the Boston

area, Jacqueline is the published author of several books for children, one of which won the Maine Literary Award for Children's Literature in 2018. When she's not at her computer, Jacqueline can be found looking for seaglass at her favorite beach.

"I'm in the police station. And I asked them to come pick me up and to keep me safe until I could get a ride out of town. And she said, 'I'm on my way.' So that was the beginning of turning everything around."

— Amy Alexander

Tips for Maine Employers Hiring People in Recovery

Hiring people in recovery could be a pivotal way to help stem the worker crisis facing many Maine businesses. Lariviere, who is also a member of the New Hampshire Recovery Friendly Workplace Advisory Council, offers five tips to encourage fellow employers to take a chance on people in recovery.

1. Speak with other businesses who have done it.

There can be a "fear factor" that employers must overcome at first. You need to know that you are not alone. Resources like the NH Recovery Friendly Workplace Initiative can help you find connections with businesses that have made this work.

2. You don't need to reinvent the wheel.

At Chameleon Group, so many of our policies for recovery came from what other businesses had shared with us based on what they had found to be successful. We adapted these policies to suit our needs and came up with some of our own. You won't be an automatic subject matter expert on hiring employees in recovery, but you don't need to be.

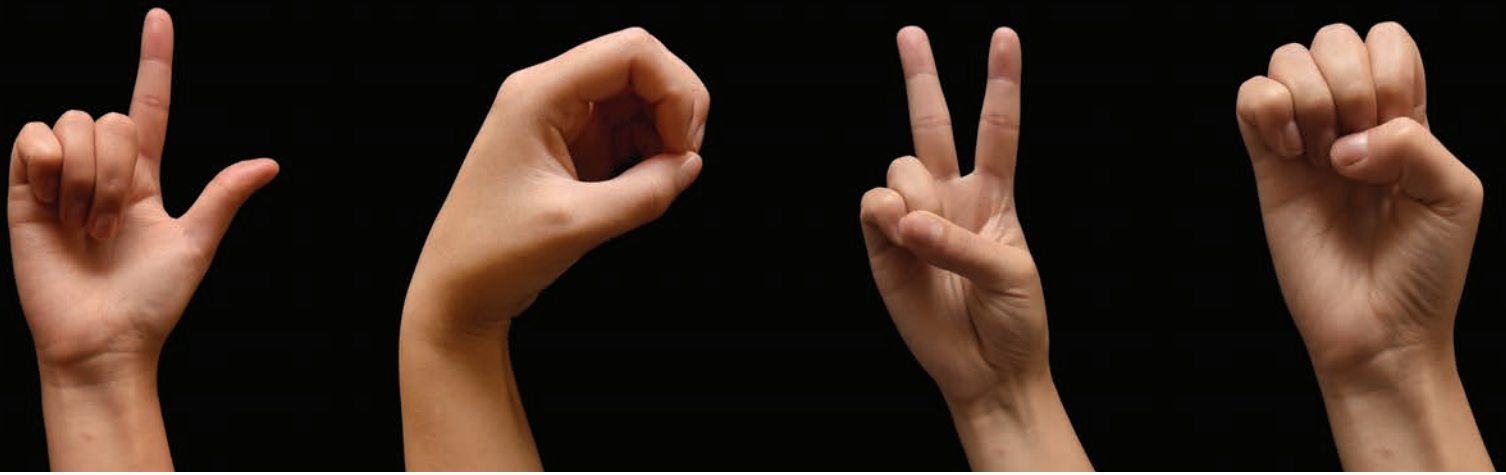
3. You need buy-in from other stakeholders. There will be pushback and you need to be prepared to make

the case about the benefits of this approach. Our experience working with people in recovery is that they are extremely motivated and focused. If there is a sense that "we don't want to work with addicts," my response to that is every business has people with addictions. In our business, we just happen to know who they are.

4. Not everyone will work out, and that's okay. Have we had some failures? Yes, but overall this is something that works and I wouldn't do it any other way. New employees in recovery are just like other new employees: some will work out and others will not. What matters to us is that even when an employee doesn't work out, they still tell us that they're leaving with an improved sense of self worth. We take that as a feather in our cap, especially when we hear how they've moved on elsewhere to do great things.

5. Focus on the future.

When you hire people in recovery, you might be hiring someone who was in jail, or has a very difficult background. To make the transition a success, adopt the mantra: "I don't care where you've been, I just care where you are going."



What's Your (Ally) Language of Love?

Find a way that works for you

by Alison Jones Webb

Maybe you've heard about the five languages of love. Introduced in the 2015 book, *The Five Love Languages: The Secret to Love That Lasts*, by marriage counselor Gary Chapman, they're the primary ways that we give and receive love.

Chapman developed these five "languages" based on how people express and receive romantic love: saying supportive things, doing helpful things, giving and receiving gifts, spending meaningful time together, and physical touch. I think they can also work to express our ally love.

A recovery ally provides meaningful non-judgemental support, empathy, and encouragement to people in recovery. We can do this using the five love languages in the following ways:

• Say supportive things.

Offering encouragement to people in recovery and their families not only supports them, but also helps others understand the importance of empathy, respect, and compassion. You can reach even more people by reposting

positive messages about recovery when you see them on Facebook and Instagram. Consider using person-first language—"a person with addiction" or "a person with substance use disorder"—and be ready to accept responsibility when you make a mistake or say something that ends up being stigmatizing.

Recognize that research constantly updates our knowledge and influences our attitudes, so if recommended language usage changes, be open to changing your language. If you don't know the "right" terminology in a particular situation, it's always a good idea to ask the people you're with, "What's the best way for me to talk about this?"

• Do helpful things.

Before you look for ways to be of service in the recovery community, take some time to explore your attitudes toward recovery. What is your definition? Is it consistent with what people in recovery say? What experiences have you had with people in recovery? Does knowing they are in recovery change the way you think about them? What have you learned from

them about recovery? Where could you learn more about recovery in your community?

Then, reach out to people in recovery and ask what they think is the most supportive thing you can do. You might be surprised at the answers. Many people in recovery that I've talked to say, "learn about recovery and help reduce stigma."

• Give gifts.

Your gifts are your talents, personal and professional networks, financial resources, and political connections. Use your contacts with the media to change the way addiction issues are reported. Help raise funds for recovery support services in your town. Create work opportunities for people in recovery. Convince decision makers in local and state organizations and agencies of the importance of keeping recovery at the center of their work. Write a reference letter in support of a person in recovery. The possibilities are limitless.

• Spend meaningful time.

Start by learning about the many pathways of recovery, including

12-step programs, SMART recovery, and faith and spirituality.

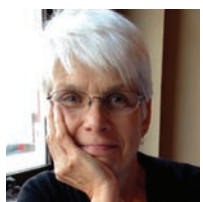
Make it a priority to show up for important recovery events and to celebrate milestones of the people you love. Spend time in conversations about recovery with your colleagues and neighbors, creating a safe space for people to ask questions and learn about recovery. Attend every recovery related event in your community. Invite your colleagues and neighbors to go, too. Your presence goes a long way toward changing local norms about recovery.

• **Reach out and touch someone.**

Some people like physical touch and others don't. If you're the "huggy" type, be sure and ask first. There are other ways to reach out and touch someone, though. Connecting people in recovery with volunteer opportunities is one way. Find out about the recovery support services in your town, such as recovery community centers, and make a visit.

Ask what types of volunteer tasks people in recovery might like and then make connections in the community. For example, humane societies can find dog walkers; clothing closets can find people to help sort and price used clothing; food pantries can find people to help lift boxes, fill shelves, and serve meals. The list goes on and on.

I encourage you to spend some time thinking about your language of (ally) love, and then find the best ways to give it and share the process with a friend ... who may be wondering how they can support the recovery community!



Alison Jones Webb is a public health professional who has worked in the field of substance use prevention, treatment and recovery in Maine for over 15 years.



An Angel's Wing Inc.

A 501c3 Bakery & Thrift Store devoted to ending substance use disorder and overdose deaths - funding recovery paths for those in need

December 11, 12, 18, 19

Fill a bag for \$1.00 for presents for the children includes children's clothing, shoes, jackets, books, toys, etc.

Santa will be present with presents (cookie, book and stuffy)!

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www.bangorrecovery.org



Recovery is a process.
There are many pathways to recovery.
Recovery overcomes shame and stigma.
Supporting recovery is a community responsibility.

ARE YOU A PEER RECOVERY COACH?

Portland Recovery Community Center is hosting an online workshop to show you how to become a certified peer recovery coach with the state of Maine. Whether you've just completed Recovery Coach Academy, or are actively coaching, this event is for you!

SAVE THE DATE:
NOVEMBER 10, 2021

This virtual session will outline the process to become a Certified Peer Recovery Coach and include sessions on self-care for recovery coaching and ethics. To learn more, visit our website at portlandrecovery.org, and scan the QR code to register!



Christopher Poulos

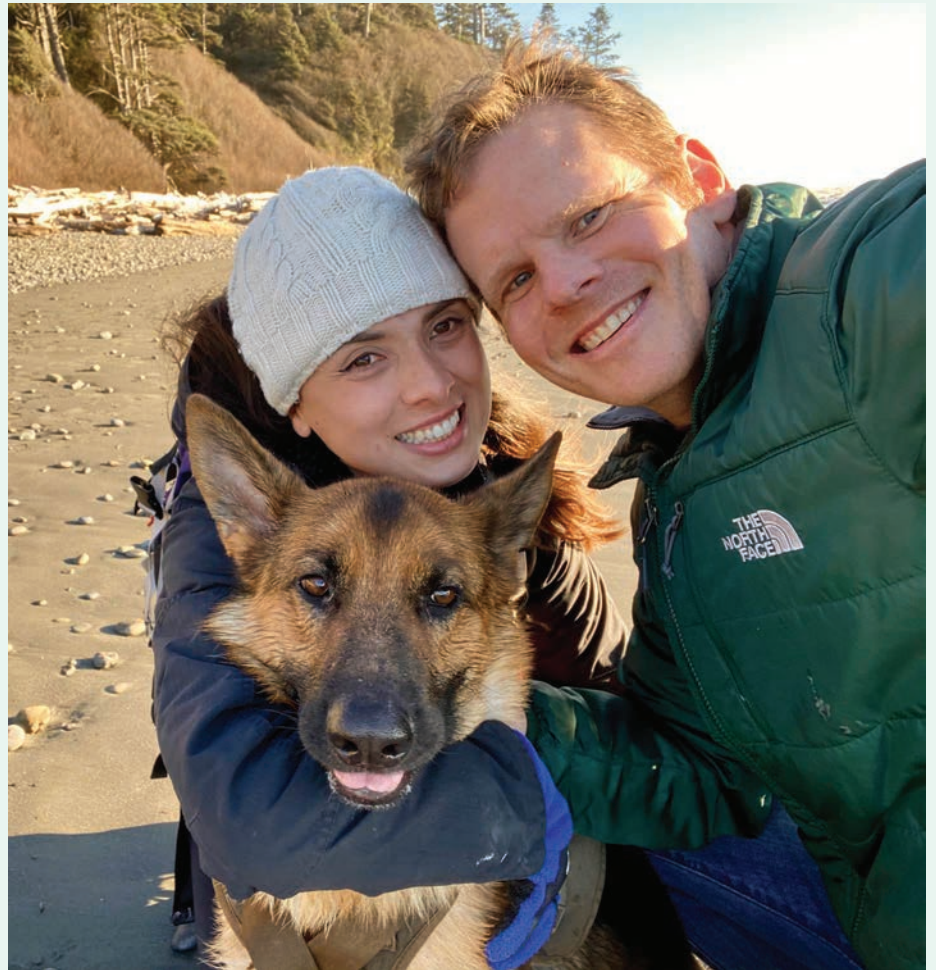
From Prison to Law School to Mountain Rescue

Christopher Poulos was born and raised in Portland, Maine, graduated from the University of Maine School of Law in 2016, and is now the executive director of the Washington Statewide Reentry Council in Olympia, Washington. He married his long-time girlfriend in a tiny, outdoor wedding ceremony last year at their home along the Puget Sound, and he's part of a mountain rescue team. Chris has a great life, but it wasn't always like this.

"I was 12 or 13 when I discovered that using drugs and alcohol melted away all of my internal anxiety, pain, and fear," Chris says. "I added pills and cocaine, and then I spent the next decade of my life chasing that feeling of relief and belonging. I self-medicated by using substances to treat unresolved trauma and, for a while, it worked."

By the time he was 24, he could no longer get that feeling of relief, no matter how much cocaine, opiates, or alcohol he consumed. "I was really at a point where I felt so broken and desperate and in such pain that I knew I needed to either seek help or no longer continue living," he says.

With the help of a doctor, his mother, other people in recovery, and an intensive outpatient program, he started his recovery. Within a few months, he had a job at a call center, was in the



Chris and Angela Poulos and Katahdin. (Photo provided by Chris Poulos.)

process of resuming classes at the University of Southern Maine, and his health and life were improving. And then came the day that federal agents surrounded his mother's home and Chris was indicted on five federal drug-trafficking and gun charges for conduct that occurred before he entered recovery. His court-appointed attorney was inept. In a phone call, the attorney suggested he just

stay in jail until he was convicted, so he could put time served in jail toward his inevitable prison sentence. Chris recognized that this attorney was unwilling to even attempt to provide him with strong representation and defense.

With the help of family, Chris was able to hire a skilled private attorney, and within hours, he was released from jail and returned

to working and focusing on his recovery. “That day is the reason I’m an attorney today. I knew I was privileged because I was able to gather the financial resources to hire a good attorney. As I walked out of jail that day, I committed to someday becoming an attorney to fight systemic inequality.”

Chris still ended up serving time in a federal prison, where he continued to work on his recovery. While he served his sentence and finished college, he never wavered from his goal to become a lawyer.

Getting into law school was a challenge, though. The dean was reluctant to risk the school’s reputation by admitting a person with a felony conviction. In a meeting with the dean, Chris was able to speak up for himself in an assertive and appropriate manner for the first time in his life. “I asked him why I should be excluded from the chance of being a lawyer. If the judge didn’t give me a life sentence, why was the dean?”

The dean was also concerned that even if Chris was admitted to and graduated from law school, he might not be able to get a license to practice. “Chris’ argument was persuasive, however, and following an investigation and discussions among the admissions committee, he was finally admitted. “The initially reluctant dean chaired the committee that unanimously recommended my admission and, ultimately, warmly welcomed me to the school.”

After three demanding years of law school, Chris thought that the bar admission process would be relatively simple. “I figured that I’d apply, answer some questions about my past in an informal manner, and all would be good,” he says. “By the time I applied to the bar I had years of recovery under my belt and myriad positive

community involvement and professional experience.”

As a law student, Chris represented youth facing criminal charges and served as a mentor at Long Creek Youth Development Center. He interned with the White House Office of National Drug Control Policy, which required national security clearance. He continued to sponsor people seeking recovery from addiction, including those who were incarcerated.

“I initially thought I’d pass the character evaluation for bar admission with relative ease but it wasn’t that straightforward,” he says. “Under Maine state law, if you have a felony conviction, you’re *presumed to be unfit* to practice law. You have to prove your character and fitness through a formal hearing process. I hired a lawyer and had to go through incredibly adversarial hearings where a criminal prosecutor cross-examined me for several hours. He brought up things I hadn’t thought about in over ten years.”

Now, Chris works on prison reform and reentry support in Washington state and has even taught a law school course that he designed. He’s passionate about making it easier for people leaving incarceration to get health insurance, education, employment, and whatever they need to successfully transition back into society. He’s also working on voting rights for people in prison.

Chris’ accomplishments are many. His story has been told in The New York Times and the Washington Post, and he has given a TED talk. He continues to challenge himself, having recently joined Olympic Mountain Rescue, an all-volunteer organization based on Washington’s Olympic Peninsula that is devoted to saving lives through rescue and mountain

safety education. The parallels to Chris’ work in recovery are easy to draw. “I need to be part of something bigger than myself,” he says.

Being involved with a group of people dealing with potentially life or death survival decisions satisfies something deep within me. It’s similar to the feeling I get from being part of a 12-step program. The mountain rescue group is a way to bring an element of service to my interest in outdoor activities, like hiking and mountain climbing. I’m still learning though; I don’t think I’ll be hanging off the edge of a cliff to bring somebody up yet, but I’m part of the team and I’m able to help in any way that I can!”

Chris continues to advocate for the fair treatment of people with past-convictions, who, like he was, are routinely denied access to work, education opportunities, and housing based on behavior that often occurred when they were in active addiction.

That mountain is an especially challenging one to climb, but having reached its summit, he is determined to pull others up to join him.

.....
Written by a Journey team member.

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The Process of Intimacy

by Elaine Shamos, MPH & Glenn J. Simpson, LMSW-cc, CADC

Once a committed couple enters the recovery process, the most common concern they relate to us is about finding or improving intimacy in their relationship.

Why Intimacy is Difficult for Couples in Recovery

While the partner with substance use disorder (SUD) may have become sober, honest with themselves, made amends, and living with a spiritual program, they may not feel they have a satisfying, close relationship. Why? Recovery is necessarily a selfish process. Early in sobriety, they may experience new feelings that can be overwhelming, including guilt and shame over past behavior. Their instinct may be to keep their partner at arm's length. They may also be super sensitive out of fear of losing their partner.

Likewise, the partner may be reluctant "to rock the boat" once experiencing their newly sober partner. They may have learned to cover their feelings and not express their needs. Depending on their recovery status, they may believe they can sustain their partner's sobriety by not speaking honestly about their reactions.

Few people living with SUD grew up learning how an emotionally healthy family shows closeness. Most people with SUD began their addictions early, thus missing when mature intimacy is learned. Addiction dictates not caring about others or the effects of their behavior on people who love and depend on them. The



disease teaches manipulation to get what they need without taking responsibility and making sure their "secret" is sacred within their relationships. Many people with SUD also have experienced traumatic events of violence as children and have not dealt with that impact, which later affects their significant relationships.

The partner typically learns early on in life to take responsibility for others' behaviors, cover up their feelings, keep busy, become an overachiever, submissive, or overly controlling. Major traumatic events not dealt with, including domestic violence and sexual

abuse may affect their post-traumatic stress symptoms and their fear of intimacy.

Together, the couple follows the unwritten law to not talk about anything that is difficult or uncomfortable. This fear keeps them from connecting and sharing with each other on a deep level, leading to very little real intimacy.

Why Intimacy is Not Just Sex

Many of us think of intimacy as sex. Trying to find intimacy by having sex before building a close relationship creates the illusion of intimacy, which fades quickly,

leaving people feeling empty and searching for something more. While a healthy sexual relationship is a component, intimacy is a feeling of closeness, safety, connectedness, and trust.

Recovering people, perhaps more than any other group, need to learn how to be intimate.

To achieve this, they must learn new behaviors and move towards closeness. Intimacy is a cooperative process that necessitates acceptance in the direction of trust.

Since each new small step involves the risk of rejection, the process develops slowly. However, as intimacy evolves, each person begins feeling genuine care and concern for the other. It is this feeling that allows them to open up to each other more and more.

Allowing vulnerability is the essence of intimacy.

The work involves becoming comfortable with each other's discomforts and differences, being free to share feelings without shame and guilt, learning to listen and hear the other with empathy and without taking things personally, staying true to oneself

in the presence of the other, and learning to apologize and to forgive.

The foundation of healthy intimacy is trust.

However, many of us have difficulty trusting others. The ability to trust develops early in life, and depends on the parents' consistency in making the child's world safe and comforting for them. When this is not true, the child can become overly cautious and have trouble learning to trust others. As this mistrust follows in our adult lives, intimacy becomes difficult and even small risks become impossible.

Relationship problems caused by the effects of living with SUD and complicated by a problematic childhood always become more pronounced once the recovery process begins. This is because the maladaptive behavior is no longer providing a place to hide problems. For true intimacy to begin, many barriers must be removed.

Why Self-recovery Increases Intimacy

As both recovering partners learn to open up and become more vulnerable and discover

who they are, true intimacy can become available to them in relationship recovery. Twelve-step sponsorship, support groups, therapy, coaching, etc can facilitate engaging in this process of self-recovery. It is this self-recovery that allows for intimacy in relationships with each other. When self-recovery is working for both partners, it may feel like a brand new relationship—getting to know each other all over again!

Relationship recovery is an ever-evolving journey of excitement and true intimacy.



Elaine Shamos, MPH & Glenn J. Simpson, LCSW-cc, CADC, from Portland, are new contributors to the Journey editorial team, and they can be reached at facebook.com/CouplesinRecovery.

"I first discovered alcohol when I was about 12 or 13. I was invited to this party that my older sisters were throwing and my parents were going to be there."



– Mary Atwood



**Blue Sky
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No Single One, There Are Many Paths

The gifts are in the journey, not the destination

by **Leslie Clark**

There is no pathway to recovery. Unless you're talking about what got you there in the first place—waking up in jail, a trip to the emergency room, an ultimatum from your boss or your life partner—recovery is not a destination. It's a life-long journey and the gifts are in the journey itself. That's why we distinguish the pathways of recovery from pathways to recovery.

Each person's pathway of recovery is uniquely their own and fortunately there are so many ways to explore and discover what works for them.

Until a few years ago, I thought of "recovery" as synonymous with Alcoholics Anonymous and other 12-step programs, such as Narcotics Anonymous. I had never heard of the concept of

multiple pathways. On any given day in a recovery community center, someone might go to an A.A. meeting and then taking a recovery yoga class. Or perhaps they attend a meeting of Recovery Dharma and then meet one-on-one with a peer recovery coach. Or, they could decide to start a support group to address an unmet need, like Dads in Recovery. There are so many choices and rich offerings. And the best part is that people don't have to choose just one.

Recovery community centers provide a home for people to explore and discover multiple pathways of recovery, including individualized peer support services and social activities. Some people may choose to use medication as a tool. Some may seek strategies to reduce risk and

prevent harm. The most common mutual aid pathways of recovery include All Recovery meetings, 12-step meetings, Life Ring, SMART, Wellbriety, Recovery Dharma, Natural Recovery, and Celebrate Recovery.

At the heart of all of these is finding a new way of life, connecting with peers, learning from others, and growing psychologically and emotionally.



Leslie M. Clark, MSW is executive director of Portland Recovery Community Center (PRCC) which serves as Maine's recovery hub. Leslie speaks openly as a person in long-

term recovery to help reduce stigma and advocate for resources and effective public policy.



**Portland
Recovery Community
Center**

102 Bishop Street Portland, ME 04103
207-553-2575 • portlandrecovery.org

Spreading Recovery Throughout Maine



Portland Recovery Community Center (PRCC) is Maine's Recovery Hub. We build recovery community throughout the state of Maine, which often bridge the gap between treatment and sustained recovery. **We are your people.** We are people in recovery who know what it's like and are on the journey with you. Whether you're new or you've been on this path for a while, **recovery community centers offer the home base you need in your recovery journey.** Membership is free and multiple pathways are honored. Find a Recovery Community Center near you by visiting portlandrecovery.org — **and find your people.**

Recovery Community Centers in Maine

Aroostook Recovery Center of Hope (Houlton) • Bangor Area Recovery Network (Bangor) • Bath Recovery Community Center (Bath) • Harbor Peer & Wellness Center (Boothbay Harbor) • Coastal Recovery Community Center (Rockland) • DownEast Recovery Support Center (Calais, Machias) • INSPIRE Recovery Community Center Ellsworth • Lakes Region Recovery Center (Bridgton) • Larry Labonte Recovery Center (Rumford) • Portland Recovery Community Center (Portland) • Pir2Peer Recovery Center (Millinocket) • REST Center (Lewiston) • Roads to Recovery Community Center (Caribou) • Save a Life Recovery Resource Center (Lincoln) • Your Place Recovery Center (Ellsworth)

Statewide RESOURCES

These resources are gathered from a variety of sources. Our goal is to provide information on nonprofits that provide free or affordable services that benefit the recovery community.

CRISIS HOTLINE

Maine Crisis Hotline

Maine Behavioral Health
888 568 1112

24 hour hotline, mobile assessment & crisis intervention

National Human Trafficking Resource Center/ Polaris Project

888 373 7888

National, toll-free hotline, available to answer calls and texts from anywhere in the country, 24 hours a day, 7 days a week, every day of the year.

Safe Voices (domestic violence)

800 559 2927

Maine Coalition Against Sexual Assault

800 871 7741

Confidential services, free of charge. Provides information, crisis counseling, and emotional support and advocacy.

Maine Access Points

207 319 8823 (call or text)
info@maineaccesspoints.org

We provide state-wide naloxone distribution, overdose prevention education, support and aftercare.

www.maineaccesspoints.org

POISON CENTER

Maine Medical Center

800 222 1222

The NNEPC poison help line is available 24/7 by phone, chat and text to provide treatment advice for poisonings or to answer poison-related questions.

HOTLINES

Intentional Warm Line

50 Moody St Saco
866 771 9276

Confidential telephone support services for non-crisis situations, including, but not limited to: Peer-to-peer support, social connection, sharing personal victories, overcoming fear, grief or sadness, developing effective strategies for the future, assistance with referrals to community resources, talking to someone when feeling sad, lonely, or discouraged.

Maine Tobacco Helpline

800 207 1230

M-Th 10a-8p, F 10a-5p,
S 10a-2p

If you call after hours please leave a message. Staff will call you back.

Domestic Violence Support

866 834 4357

Information, crisis counseling, emotional support and advocacy.

MISCELLANEOUS

211 Maine

Directory connecting people to variety of health and human services in Maine that can be accessed online or on the phone.

Medical Professional's Health Program

20 Pelton Hill Rd Manchester
8a-4p
207 623 9266 x5

Assessment/screenings for medical professionals who might have substance use disorders/mental health disorders. Referrals. Monitoring.

Wellness Mobile

207 520 1683

Outreach vehicle and materials for recovery or prevention.

FREE Mutual-Aid RECOVERY PROGRAMS

We are fortunate to live during a time when there are many options for finding and sustaining lasting recovery from addiction. We are all individuals and while there are many aspects of our personal journeys that may be similar to those of others, we are each called to discover for ourselves what works and what doesn't work for us. Our goal is to provide options and shine a light on different approaches that people use to maintain lasting recovery without endorsing specific approaches or recovery programs.

We ultimately leave it up to you, the reader, to decide what works best for you, while presenting you with multiple pathways to recovery.

Alcoholics Anonymous (AA)

207-774-4335/800-737-6237
www.aa.org

Al-Anon /Alateen

www.maineafg.org
207-284-1844 / 800-498-1844

Adult Children of Alcoholics

(ACOA or ACA)
A 12-step, 12-tradition program for men and women who grew up in dysfunctional homes
207-322-6284
www.adultchildren.org

Cocaine Anonymous (CA)

617-539-6090 / 800-347-8998
(meeting info only)
www.ca.org

Codependents Anonymous

602-277-7991 / 888-444-2359
www.coda.org

Debtors Anonymous (DA)

Debtors Anonymous offers hope for people whose use of unsecured debt causes problems and suffering. 800-421-2383 / 800-974-0062
<https://debtorsanonymous.org/>

Drug Addicts Anonymous (DAA)

A fellowship of men and women who have recovered from addiction and are committed to helping those who still suffer, based on the 12 steps
970-761-5189
www.daausa.org

Food Addicts in Recovery

Anonymous (FA) is a free 12-step recovery program for anyone suffering from food obsession, overeating, bulimia and under-eating. www.foodaddicts.org

Gambler's Anonymous (GA)

718-352-1671 / 888-830-2271
<http://newenglandga.com>

Heroin Anonymous (HA)

A fellowship of heroin addicts who help each other practice complete abstinence from drugs and alcohol 347-858-3601
www.heroinanonymous.org

H.O.P.E. Group

A safe place where people come together to find wellness by sharing their stories and listening with an open heart and mind to others
727-420-2964 (Liz)
www.hopehealing.org

Marijuana Anonymous (MA)

A fellowship of people who share their experience, strength and hope to recover from marijuana addiction 609-529-6332 / 800-766-6779
www.marijuana-anonymous.org

Narcotics Anonymous (NA)

A support program for people in recovery from drug addiction based on the 12 steps of AA
www.namaine.org
818-773-9999/800-974-0062

Overeaters Anonymous (OA)

is a community of people who support each other in order to recover from compulsive eating and food behaviors. We welcome everyone who feels they have a problem with food.
Dial 211 for meeting info.
<http://oamaine.org>

Sex and Love Addicts Anonymous (SLAA)

A program of recovery for people addicted to sex and love, based on the 12 steps of AA
207-323-5143 / 800-204-2803
www.slaafws.org

SMART Recovery

Mutual-support meetings that are free and open to anyone seeking science-based, self-empowered addiction recovery
440-951-5337
www.smartrecovery.org

Wellbriety Movement

(White Bison)
A sustainable grassroots movement that provides culturally based healing for indigenous people
207-992-0411 / 877-871-1495
<https://wellbriety.com>

Peer-Run RECOVERY CENTERS

A place where hopes, goals, dreams, and values are explored together.

The togetherness, also known as peer support, is empowering and provides a trusting environment and for someone ready for a different life.

Change begins and community is formed.

Each person is encouraged to share what they know and how they have come to know it.

Unbiased knowledge creates a platform for opportunities to contribute and be creative while nurturing personal development, wellness, and vocational connections.

Peer Centers are offered to anyone seeking life changes at **no cost, no referral** and **no registration**.

A. Perry Center (formerly Amistad)

835 Forest Ave., Portland, 04103
(207) 615-3691

B. Beacon House Peer and Recovery Center

3 Canal St., Rumford, 04276
(207) 418-0079 / (207)369-0868

C. Biddeford Peer Support Center

15 York St., Biddeford, 04005
(207) 358-4414

D. Harvest Inn Peer Center

43 Hatch Drive, Caribou, 04736
(207) 492-1386 / (207)498-0247

E. LINC Center

38 Memorial Dr, Augusta, 04330
(207) 530-0391 / (207)430-4001

F. Rockland Peer Support Center

12 Union St., Rockland, 04841
(207) 317-3012

G. Sanford Peer Support Center

19 Washington Street
Sanford, 04073
(207) 956-2984

H. Together Place Peer Run Recovery Center

2 Second St., Bangor, 04401
(207) 941-2897

I. Valley Peer Run Recovery Ctr

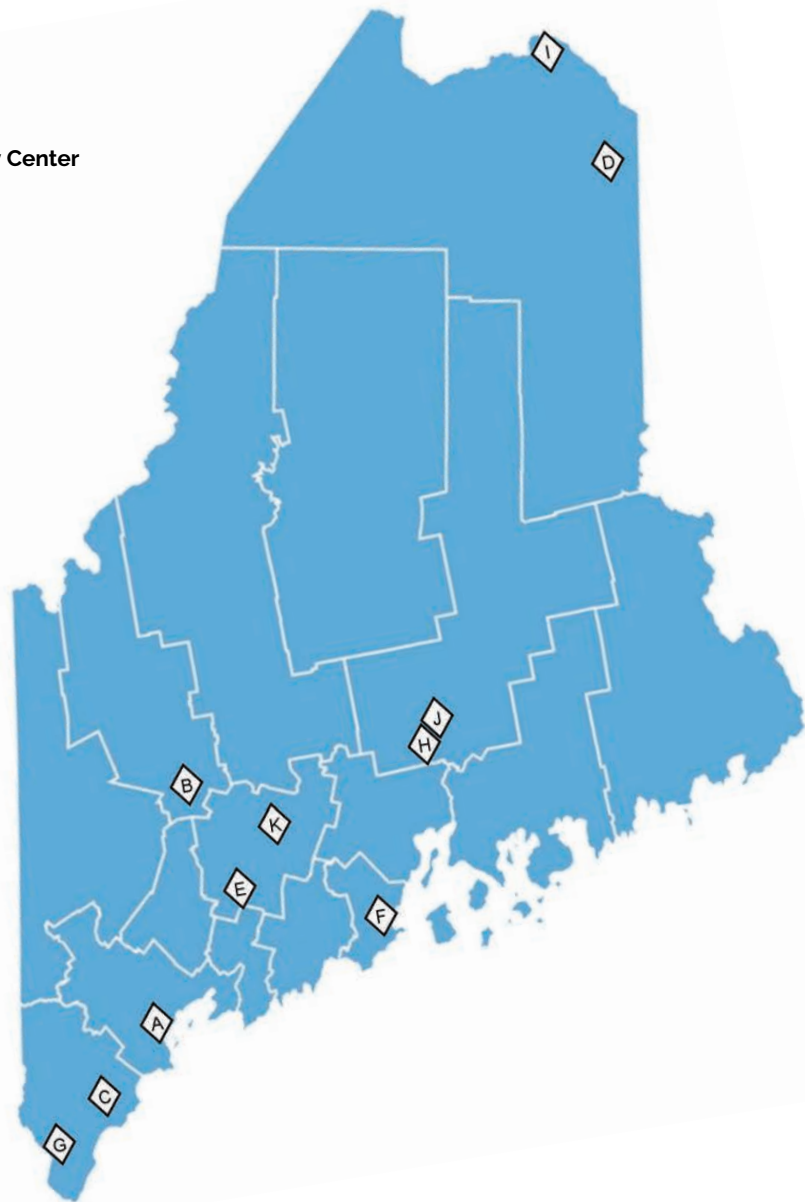
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