

# Journey

making recovery from addiction visible

Dec 2022 / Jan 2023 • Issue 24

**Amran  
Osman**  
breaking  
down  
barriers

**Changing Our Lives**  
Practice, helpers and helping

**A Family Recovery Story**  
Simple, Not Easy

A woman with long blonde hair, wearing a dark jacket and pants, stands on a sandy beach. She is lifting a young child into the air. The child is wearing a patterned shirt and dark pants. The background shows a vast ocean with waves crashing against a rocky shore under a bright blue sky with scattered white clouds. The text 'SUBSTANCE USE DISORDER CAN HAPPEN TO ANYONE WE ARE HERE TO HELP' is overlaid in large, white, sans-serif capital letters across the middle of the image.

# SUBSTANCE USE DISORDER CAN HAPPEN TO ANYONE WE ARE HERE TO HELP

After close to a decade of taking substances, Nicole knew it was up to her to take her situation seriously for the sake of her children. Like many who live with substance use disorder, Nicole lost sight of herself and even thought about suicide.

“There were years when I was homeless and sleeping out of my car.”

Through Maine Behavioral Healthcare, Nicole receives Suboxone treatment to control cravings, sees a Psychiatrist, attends therapy groups and receives counseling, case management and peer support. With the help of her care team, Nicole is now preparing for a career in nursing and looks forward to providing a better life for her children.

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Dec 2022 / Jan 2023 • Issue 24

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*Journey* is a woman-owned, independent media brand launched in 2019.

Our mission is to amplify hope by making inspiring personal recovery stories, recovery programs and resources more visible.

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## **Cover**

*Amran Osman photo*  
by Brian Delaney



## *Forever Thanked*

People recover in communities and while recovery is an individual's responsibility, entire communities benefit when recovery from addiction is visible.

Thanks to advertisers, subscribers, sponsors and private gifts; many people help us keep the magazine free and play a part in amplifying hope!

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We crafted this very last issue of 2022 about emotional well-being—a common topic around the holidays.

Sometimes seen as the hardest time of the year for people in the recovery community, many of us ‘double down’ on our self-care in an effort to protect our recovery from the stress of the holidays.

As I reflect on my own tools for managing stress, I’m grateful for the visual reminders I have around my home, office and even in my car; reminders of tools that are well-honed, because I turn to them so often throughout the year.

Many years ago, a wise friend suggested that I bring my fears, doubts, insecurities and worrisome thoughts to the ocean.

Her advice was to pick up a rock and imagine that emotion going into the rock, throwing the rock into the ocean, and then picking up a smaller, lighter rock and imagine the opposite emotion going into the smaller rock.



And then bringing that smaller rock home.

I’ve done this THOUSANDS of times over the past twenty plus years.

It’s taught me a few things:

- the importance of taking the time to experience the emotion
- the necessity of having a place to put it (because it doesn’t serve me well to hold on to it), and give it to something more powerful than myself
- that the experience is enriched and the moments are extended because I have visual reminders around me
- the benefit of having the rocks—accumulated one or two at a time—remind me that I have tools to help with difficult emotions

I shared this once with a group of friends in a church basement and found out from a police officer in the room that taking rocks from that particular beach is actually against the law.

And later that day, I may ... or may not ... have added another rock for my collection.

I hope, dear reader, that you have an inventory of tools that work for you during stressful times, and that you find joy, happiness and many stacked moments of serenity for yourself this holiday season.

*Carolyn*

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# visible recove

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22

# ry saves lives

# Generational Noor

*Breaking down barriers when it comes to seeking help*

by Amy Paradysz

**Y**ou must be the change you wish to see in the world.”

Those famous words—spoken by Ghandi—aptly describe the attitude of Amran Osman, a 24-year-old immigrant who grew up in Lewiston. Since she lost one of her brothers to an overdose, she has stepped up to be the change in her community’s response to substance use.

“In the Somali community, people weren’t talking about substance use disorder,” Amran says. “People who were going through it were kind of shunned. There’s a fear of talking to parents that if you say you tried something you might be kicked out of the house or beaten on.”

Talking with other young people in the Somali communities in Lewiston and Portland, Amran heard that they, like her, want to increase awareness about substance use and how to get help. She started gathering these youths and, in September, launched a nonprofit called Generational Noor to de-stigmatize the conversation and make existing resources more accessible, multilingual and culturally sensitive. “Noor” means ‘light’ in Arabic and is the last name of all my siblings, who I helped raise and who I love,” Amran explains.

She started with a roundtable discussion at Gateway Community Services, where she works as a community resource coordinator. Forty people showed up.

“Then we had a roundtable in Lewiston and a lot of parents came



Amran Osman. Photo by Brian Delaney.

out, which made me realize that a lot of them were willing to see a shift in the narrative,” Amran says. “They realized that a lot of people were being lost and they want to tackle the issue. We need to talk about mental health and the reasons for turning to substance use. What’s their backstory? What trauma have they been through? Parents don’t know how to talk about it if they came from a culture where mental health wasn’t talked about.”

Many asylee and immigrant youths have lived through war, only to be displaced in the middle of adolescence, growing up in a culture their parents can’t quite understand. Because drug use is not permissible under Islam, Muslim

parents struggle to imagine their children using a substance. “But these youths are juggling two cultures and trying to fit in,” Amran says. And, here in Maine, surveys indicate that 1 in 10 high school students have taken a prescription drug not prescribed to them.

Amran suspects that there’s more access to drugs here than “back home” in Somalia. But she can’t say because she has never been there. She was born in Kenya during her family’s flight from Somalia, and she has been in Maine since she was 3.

She studied political science and international relations at the University of Southern Maine,

where she served on the Student Senate as Director of Racial Equity and Inclusion. She graduated in 2021, and she's already a leader among first-generation Mainers who, like her, want to change the cultural norms of their community to be more transparent about mental health, drug use, addiction and treatment. Generational Noor started with four people, and now there are 27 youths on the group text for volunteers.

"This generation is the one that is going to start breaking down barriers when it comes to seeking help," Amran says.

Generational Noor is an all-volunteer effort, supported by a dozen board members, including university students, youth coordinators, community consultants and Portland City Councilor Pious Ali.

Future goals include working with community organizations to increase cultural competency, including translating resources into more languages, expanding telehealth and texting-based supports, and supporting single-gender recovery treatment options.

"We want to work with organizations to help people get the help they need and deserve," Amran said. "The conversations are a starter, but our long-term goal is to be sure that people can access help and that the help is more culturally competent. The resources are there. It's about reaching and working with different communities."

For more information, visit [generationalnoor.com](http://generationalnoor.com).



Amy Paradysz is a freelance writer from Scarborough; she can be reached at [amyparadysz@gmail.com](mailto:amyparadysz@gmail.com).



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# Thriving During the Holidays

by Rebecca Kurtz

**T**he seasonal holidays and months that follow can be a challenge for people in or seeking recovery. Despite being known as the “most wonderful time of the year” it is not always so. Demands on our time and energy often leaving us feeling tired, disappointed, and depressed. But there are practical tips and strategies that we can use and share with each other to beat the winter blues and enjoy the season.

Between late November and New Year’s and through the dark winter months, many Mainers, including those in recovery from substance use disorder, struggle with anxiety, grief, and depression as a range of stressors collide in our lives.

The stressors include those associated with the holidays such as financial strain, family conflicts, the expectations of others, recent losses, the inability to be with one’s family and friends, and the general “busyness” that historically defines this time of year.

They also include the stressor of Seasonal Affective Disorder (SAD). A form of major depressive disorder, SAD has symptoms of fatigue, depression, hopelessness, and social withdrawal and begins to impact people as Maine’s days become shorter and the hours of available sunlight decrease. In Maine up to 15% of its residents struggle with SAD each year.

In a recent study by the American Psychological Association, over

38% of people surveyed said their stress increased during the holiday season and contributed to physical illness, depression, anxiety, and substance misuse.

Similarly, an estimated 55% of Americans experienced the holiday blues, while 75% of Generation Z respondents (ages 10 to 25) and 65% of single adults felt lonelier than their counterparts. The National Alliance on Mental Illness (NAMI) revealed that approximately 24% of people with a diagnosed mental illness including substance use disorder find that the holidays make their condition “a lot” worse and 40% “somewhat” worse.”

Bottom line: Almost **everybody** is impacted by the holidays and Maine’s winter blues.

## Holiday Blues in the Recovery Community

For people seeking or living in recovery from substance use disorder, the impacts of the holidays and SAD can be even more intense. Not only do we struggle with the “standard” list of stressors, we often face the pressure to drink alcohol at family or employee parties or use other



substances in social situations “to fit in” or “join the fun.” Unresolved conflicts with family members, complex grief, and remorse can leave us feeling lonely and isolated. The feeling of connection that is so vital to recovery can seem impossible to regain.

## There is Hope

Despite all the statistics and trends in the past, there is room for hope. This is partly due to the fact that recovering people are among the most **resourceful, courageous and compassionate** people around. The bonds we form and the communities we create empower us and inspire our growth. And the strategies we share enable us to forge a community network of informal and formal resources to support our well-being. So, despite the swirl of holiday stress and SAD, we know there is hope; we have a toolbox of tips that can guide us through whatever comes our way.

## Ten Tips to Survive and Thrive Through the Holidays

**1. Breathe.** It may sound silly or simple, but when we are stressed or anxious our breathing can become shallower, which can negatively impact our moods. Practice taking 3-4 slow deep breaths.

**2. Set boundaries.** Give yourself permission to say No, to prohibit triggering conversations or activities in your home, to leave a party early or skip it altogether.

**3. Prioritize the important activities;** spend your time, energy and resources on the ones you enjoy or cherish most, and let go of the rest.

**4. Set realistic expectations** for yourself and others.

**5. Gratitude:** Seek reasons to be grateful, and write a list of five per day.

**6. Stay Present:** Don't compare today with the good old days—stay out of the past and celebrate the present.

**7. Give to others:** Lift the spirits of others through a gift of your time. Walk dogs at an animal shelter, help deliver meals, donate time to a food pantry, or shovel a neighbor's walk.

**8. Make a budget:** Keep track of your holiday spending to reduce depression and anxiety when the bills arrive.

**9. Practice self-care:** Get plenty of sleep, eat healthy foods, and carve out 30 minutes a day to exercise, in 10-minute bursts if you have to.

**10. Create an escape plan:** If you go to a party or event, park where you can leave quickly, have a list of phone contacts ready, and bring your own beverages or snacks. Better yet, go with another person in recovery or an ally who can support you.

## Formal and/or Professional Supports

Self-help tips can be incredibly effective. But sometimes we need to seek professional support to

stay ahead of the blues. Before the holiday season takes off and the days get short, take some time to explore a few until you find one(s) that fits You. If you have a therapist, make the most of your time together; prepare notes on concerns or questions you want to address. If you think you have SAD, or have already been diagnosed, talk with your doctor about light therapy, medication and talk therapy.

Put the Crisis number on the speed dial (888) 568-1112 or 988 (new crisis helpline) so you will have it ready if you or a peer needs it. Consider connecting with a recovery coach or certified peer support specialist, or if you have one, increase the frequency you see them. Attend peer support groups on-line or in-person. Enjoy coffee and connection at any one of Maine's Recovery Community Centers, attend "alcathons" or other events sponsored by recovery communities around Maine.

Check out the support at the end of your fingertips: download apps that focus on self-care strategies like yoga, exercise, meditation, sound bathing, and safety planning. Finally, ask for help.... it can be the most difficult thing we do, but when we ask a friend to support us, we give them a priceless gift to which none can compare.

The holidays and Maine's dark winters are difficult for nearly everyone. But for those of us in recovery there is tremendous hope.

We know that self-care is an essential part of our recovery and through intentional actions we can replace unhealthy behaviors with those that cultivate growth, inspire hope, and support our emotional well-being. By using a few simple tips,

asking for help and spending time with your recovering friends, the holidays can become a time of joyful community connection and personal growth – truly a time of celebration!

.....  
*Rebecca Kurtz is the Peer Recovery Manager at NAMI Maine. As a person in long term recovery from substance use and other mental health challenges, she believes in second chances and the value of compassion and connection. She is passionate about eliminating stigma and empowering people in recovery.*

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# A Family Affair

## Gatehouse Treatment

by Kim Wilson



“There are an estimated 20.2 million adults every year who are diagnosed with a substance use disorder,” according to Donna McHugh, Vice President of Clinical Outreach at GateHouse Treatment. “And each of those people has a family.”

While only one person may have the disease of addiction, family members and close friends are impacted in a variety of ways. Addiction is a family disease.

“We believe that when someone with substance abuse problems decides to get help, it’s important that the family members seek support too,” Donna says. “We help families understand addiction, learn how to communicate and set boundaries, and what they need to do to care for themselves. Families need to go through recovery, too.” For a family whose loved one is a client at GateHouse, there are many opportunities to become involved.

According to Mitch Pierce, CEO at GateHouse, “Part of the orientation process is to call the family, to put them at ease that the client actually ‘made it through the door’ and is safe. If you have a loved one who struggles with substances, there are a lot of sleepless nights.”

This call begins a dialogue between the facility and the family which will continue throughout the client’s treatment.

“After the client gets settled into the program for a couple of weeks, we will start to engage the family in sessions with the client,” Mitch says. “The purpose of these sessions is to educate the families on the disease, as well as their role in their

loved one’s recovery process, and to help them understand the difference between helping and enabling. How to navigate that fine line.”

From there, family therapy sessions occur in general once a month, and intensive family weekends are held quarterly.

The weekend is “an interactive event,” Mitch explains. “They’re engaging with other families. The ideal outcome is families relating and connecting to one another, and exchanging emails at the end of the weekend.

“It’s an emotional weekend,” he adds. “There should be an emotional experience; if not, we’re not doing our jobs.”

Brian Kiloski, Clinical Outreach Coordinator at GateHouse, who is in active recovery himself, says, “I’m super grateful for the support my family received, especially in the beginning of my journey. Because we separately did the work, and then we did the work together, I’ve managed to rebuild a healthy relationship within my family. That is the most important thing in my life.

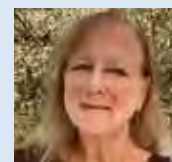
“I’m proud to be in recovery,” he adds, “and through support, my parents are able to tell people that their son is in recovery, which can spark an interest in another family for their loved one to receive help as well. That’s why the family dynamic is so important.”

Brian’s experience has informed his work at GateHouse. “My job is to find proper placement for people,” he explains, and the need is tremendous. “Today I’m working on finding placement for three people,” he says. “I talk with police officers, organizations, help lines, counseling groups, and health care staff. It took a long time to build this network, and it’s invaluable in helping me support the community.”

In addition to GateHouse’s in-facility programs, they also offer a free, open-to-the-public educational program called *Addiction Is a Family Affair*. “Our hope is to do that at least once a month,” Mitch says. “Our goal is to get families to talk to one another.

“We can’t provide services to the client only,” he adds. “We have a duty to be working with the people who are part of this person’s support group out of treatment. We want to set people up for success when they leave here.”

GateHouse Treatment facilities are located in Nashua, NH, and Madison, TN. For more information, visit [www.gatehousetreatment.com](http://www.gatehousetreatment.com) or call Brian Kiloski at 844-679-2424.



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

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 **GateHouse**  
TREATMENT

# stig·ma

**DEFINITION** a socially accepted negative attitude or idea about people with substance use disorder that can lead to shame and discrimination which:

- creates a significant barrier to wellness and good health
- isolates and separates people who use substances

## STIGMATIZING LANGUAGE

- can shame people and stop them from asking for help
- causes people to struggle with feelings of worthlessness
- dehumanizes a person by assigning a label
- affects how people are treated by society

How people self-identify is up to them, but it's time to change our language as a society.

### TERMS TO AVOID

### WHY

### PREFERRED

"addict"  
"abuser"  
"junkie"  
"user"

These terms are demeaning because they label a person solely by his/her illness or behavior and imply a permanency to the condition.

Person with a substance use disorder.

"clean"  
"dirty"

These words associate symptoms (i.e. positive drug tests) with judgement statements about cleanliness.

Negative, positive, abstinent, substance-free, actively using.

"habit"  
"drug habit"

These terms deny the medical nature of the condition and imply that resolution of the problem is simply a matter of willpower in being able to stop the habitual behavior.

Substance use disorder, regular substance use.

"opioid replacement"  
"methadone maintenance"

These words imply that treatment medications are equal to street drugs and suggest a lateral move from illegal to legal addiction.

Medication-assisted treatment, medication-assisted recovery.

# Know Your Rights

## Learn more about the new Good Samaritan Law in Maine

by **Beth Ellis D'Ovidio**

**A**nyone may come across a person who is or seems to be overdosing.

Most people would want to help in this situation and call 9-1-1 or stay with the person until help arrives.

But ...

what if there's an outstanding arrest warrant for the would-be good Samaritan?

The person may be afraid to get involved because of the risk of getting in trouble or getting their loved one in trouble in the process.

In 2019 to encourage people to get the help they need at an overdose, Governor Mills signed the original Good Samaritan (Good Sam) bill into law. The intention was to make it easier to do the right thing - save a person's life - without worrying that you might ruin your own life (or theirs) in the process.

The law, while well-intended, was limited. It only protected the person who called 9-1-1 and the person who was overdosing from being charged with five minor criminal offenses. Oftentimes, there are a number of people at the scene of the emergency who are helping. The protection needs to extend to everyone present.

"In Maine, we are a very close community and everything comes from the grassroots up," said Courtney Gary-Allen, Organizing Director of the Maine Recovery Advocacy Project (ME-RAP). "Within months of the signing



Senator Chloe Maxmin and organizers, Courtney Gary-Allen, Wendy, and Rachel Allen, embrace outside the Maine State Senate after the successful bi-partisan vote in favor of LD 1862.

of the first Good Samaritan Law, people in recovery and harm reductionists were hearing from our network that folks still did not feel safe calling for help when someone was overdosing. ”

In response to these concerns, ME-RAP organizers began hosting listening sessions across the State of Maine with people in recovery, people who use drugs, and the reentry community to learn more about how the law should be expanded and what protections were needed to get people to call 9-1-1.

In partnership with Senator Chloe Maxmin of Nobleboro, the organizers drafted and proposed LD 1862: “An Act To Strengthen

Maine’s Good Samaritan Laws Concerning Drug-related Medical Assistance.” The proposed legislation would cover everyone at the scene of an overdose from being charged with most non-violent crimes, including all forms of community supervision violations, and warrants for arrest.

The immunity would not extend to sex crimes, crimes against children, or violent crimes.

Passing legislation of this importance would take an all-hands-on-deck approach. Over the next few months, organizers launched the #ExpandGoodSam4ME campaign, a grassroots campaign led by and for the people most directly

**The Good Samaritan Law protects the person who is overdosing and anyone who is helping that person from being arrested for most non-violent crimes, including all drug crimes, all forms of community supervision violations, and outstanding warrants. In an effort to protect the most vulnerable in our state, the New Good Samaritan Law protections do not extend to crimes against children, sex crimes, or violent crimes.**

impacted by the Good Sam Law, and worked to enlist supporters across the state to stand in support of the bill.

Together, this coalition hosted informational sessions on the proposed legislation, organized over four hours of public testimony in support of the bill, and hosted press conferences, rallies, and demonstrations at the State House. They spent countless hours phone banking and teaching others why it was important to protect the lives of people who use drugs.

In the end all of the advocacy efforts resulted in overwhelming support from the legislature. On May 3, 2022, Governor Janet Mills signed into law the strongest Good Samaritan law in the nation.

“The expansion of the Good Samaritan law affirms what we already knew: People who use drugs do not deserve to die. It sends a clear message that in Maine, we believe saving peoples’ lives are more important than charging them with minor criminal offenses,” said Gary-Allen. “The challenge now is to let everyone know about the expanded law.”

In the coming months, OPTIONS (Overdose Prevention Through

Intensive Outreach Naloxone and Safety), in partnership with many of the organizers who helped to pass the law, will be launching a public awareness and education campaign about the new Good Samaritan law. In the same way that the campaign to expand the law required an all-hands-on-deck approach, the campaign to teach people about the new law will as well. So, more positive changes to come!

Keep informed by following the OPTIONS Facebook page and sharing information about the law.



*Beth D'Ovidio is an enthusiastic PR/communications professional with extensive experience writing compelling content for PR, marketing, and social media. 20 years of experience resulting in proven success developing and implementing media strategies, plans and campaigns across traditional and digital channels to create and promote client/employers' brand.*



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The Family Restored Support Group is an educational support group for families having difficulty navigating a loved one's addiction. Our meetings are facilitated by individuals in long-term recovery that offer a unique perspective from first-hand experience. Families have the opportunity to discuss their concerns and build community with other families.

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 267 Falmouth Road  
 Falmouth, ME

**Ongoing Meetings**

**Portland, Maine**  
**Thursdays, 6:00-7:30pm**  
**Portland Recovery Community Center**

**Virtual - Tuesdays and Wednesdays, 6:00-7:30pm**  
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 for meeting links

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# Personal Recovery *story*

## Simple, Not Easy

### *Recovery for a Family with Carly and Brinn Flagg*

by **Gabrielle Gilbert**

**T**he Flagg sisters understand feeling alone and like they don't fit in. Luckily, they've been on a journey together and found each other at the other end of it. Five years apart, Carly and Brinn Flagg grew up in a loving, tight knit family with their parents and middle sister Haley.

It would be simplistic and incorrect to say that a loving tight-knit family will protect someone from feelings of inadequacy or insecurity. It would be simplistic and incorrect to say that a loving tight-knit family could protect someone from the disease of addiction. However, if that family sticks together, they can pull each other out with love.

The youngest of the bunch, Carly Flagg, held her uncomfortable feelings the tightest. Despite having a loving home and "doing everything right," she felt she just didn't fit in. Carly became an addict.

From marijuana and drinking to opiates and heroin, Carly worked to fill a void she couldn't explain. She dropped out of college after one semester, moved in with her parents, and created for herself an "unmanageable life." Her desperate disease had her swiping her father's golf clubs, the contents



*Left to right: Carly, Brinn, Haley and Brinn's late dog Sanchez. Kaitlin Toto Photography.*

of her sister's purse, her mother's engagement ring, anything she could grab and sell so she could maintain her addiction. Her family had supported her through a handful of treatment centers and sober living facilities and nothing had stuck yet. It was all simple, but it wasn't easy.

Carly's turning point came with a fright. Her father had found her overdosed in the family bathroom, just in time. She was in the ICU for four days.

**She asked herself, "What am I going to do? Because if I keep**

**doing what I've been doing, I'm going to die."**

Up until this point, Carly said of her parents: "They would do anything to make sure I was safe." And while that still held true, Carly could see something different in her mother's eyes. The pain and fear, but worst of all, the exhaustion. Her mother couldn't do it anymore. Carly couldn't do it anymore.

Carly sought out her recovery with a new dedication and motivation. She went to Spring Hill Recovery Center in Massachusetts for 45 days and found success. They

encouraged her to move 5 hours away to Portland, Maine.

Founded in 2010, Grace House for Women, the first managed women's recovery residence, is where Carly stayed when she took the advice and moved to Maine. She stayed there for 9 months. Carly worked a 12-Step program, made difficult amends, and found herself and a community of women who she fit in with.

"I don't know how people get sober without [community]," she says.

Her official sobriety date is October 4, 2014.

While Carly was struggling, her family struggled with her. Her oldest sister, Brinn, was in Brooklyn. Brinn tried to distance herself, so she wouldn't have to watch. She tried to convince her family that Carly's substance use was a real issue, but they just couldn't see it.

At a distance, Brinn felt the weight of her sister's battle, but had no one to talk to about it, no community to surround herself with, and no support. Now, she started to feel like she didn't fit in. Brinn kept herself busy, but felt unfulfilled at her start-up job, unseen in her group of friends and uninvolved with her family. So Brinn took a page from her little sister's book and moved to Maine as well.

Now, both sisters have a support system and a community, in their family and in their city. The two of them spend more time together than ever, powerlifting and helping each other grow. They also find they fit in wherever they go. Both sisters have discovered confidence in themselves they didn't know existed.

Carly has also found her own

self worth and tools for stronger communication, saying, "I don't shut down anymore. Catholic family members usually don't want to talk about anything. Now, I'm a big proponent of talking it through. I remember a lot of yelling when we were growing up and we don't do that anymore because we can talk it out. We have the tools to have a tough conversation... I don't even know how this is possible, but I love them way more than I could have before I was in addiction and while I was even in addiction."

Brinn has begun to trust herself again, saying, "I think when you are in this with somebody who's struggling, there's a lot of moments where you just don't trust your own intuition. When you work any program - it could be a 12 step, it could be working with your peers, it could be with a therapist, really it's work. You know, Carly says it the right way: It's simple, but it's hard.

"I think that's when you start to regain the pieces that were lost. Where you're like, okay, I wasn't crazy. I'm not alone. My experience is definitely shared by others. Those feelings are not unique to me. I'm a unique person, but the feelings that I have somebody else has [also] experienced and that is okay. And share that experience so that you can help others.

**"That was what slowly did it for me, was saying like, 'I can trust myself in this...I can trust that things are going to work out no matter what.'"**

Through this recovery, their whole family has been on a journey.

The sisters leave space to be grateful for their family's strength and support that they can come out of this stronger than ever.

They also acknowledge that, in some regards, they're very lucky.

Lucky that their family had the resources to help through Carly's addiction, financially and emotionally.

Lucky that they have each other. Both Carly and Brinn acknowledge that their situation could have been much more difficult and chaotic had their circumstances been different and that many people dealing with recovery are not so lucky.

Within their own recovery communities, the Flagg family has learned that recovery is about coming together.



*G. Gilbert is an endlessly curious freelance writer, poet, and visual artist waking up in Southern Maine.*



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# From Livin' La Vida Loca to Recovering at El Rancho de la Vida

by **Beth Ellis D'Ovidio**

**M**any of us have heard the saying “it takes a village to raise a child.” It also takes a village to support and encourage someone who is on the early path to recovery from alcohol and other substances. This idea is the essence of El Rancho de la Vida, one of Maine’s Recovery Residences.

Co-Founder and Executive Director Jamie Lebish had a vision which has become the guiding philosophy at the residence. That vision was to offer a peaceful one-stop alternative for people in early recovery needing a safe, non-judgmental place where they recover from substance use disorder. “We believe that every individual is a human being, who has dignity and value, and whose success in recovery is best achieved by treating the whole person,” said Lebish.

El Rancho de la Vida, located in Somerset County, is Maine’s first co-ed recovery residence. It is also the only residence in the state to earn a Maine Association of Recovery Residences (MARR) Level IV Certification. This certification is reserved for those residences that have a clinical staff and a state-issued license for residential treatment. “We worked hard for that certification,” Lebish said. “It involved many steps and a good bit of time to earn.”

Another distinguishing characteristic that makes El Rancho unique is having couples live in the same bedroom at the residence when space allows. “In fact, our Program Manager, Carrie Stackpole and her husband were here together in recovery,” said Lebish. There



Left to right: Jamie Lebish, Executive Director/Founder; Katherine Caldwell, Director of Operations at El Rancho de la Vida; Carrie Stackpole, CADC, Program Manager at El Rancho de la Vida

are four bedrooms in the house with two beds in three rooms and three beds in the fourth bedroom. One room must be available to accommodate a couple.

As part of the holistic approach, El Rancho provides training in life skills that will help prepare the client in moving forward after treatment. This includes educational assistance and opportunities, all located on-campus or nearby, which helps bridge transportation gaps that may exist. Opportunities range from GED prep to accessing classes at Kennebec Valley Community College. Another useful skill for productive living is financial literacy, which is also covered at the ranch.

It is equally important to afford residents opportunities for social interaction. Residents at El Rancho have something to do together each evening during their six-month stay, including cooking classes, Forest and Nature therapy, and other activities volunteers arrange. They have a house meeting and dinner weekly.

El Rancho is located on the Good Will-Hinckley campus of over 600 acres in Fairfield, Maine.

“Our residents are close to a general store, a post office and there is a Community College on campus, which a number of our residents have attended during their stay,” said co-founder Kathy Anderson-Caldwell.

Both co-founders are passionate about their aspirations and hopes for growth and expansion, mainly due to their personal substance use stories. “I had nowhere lower to go, I had lost my family, my home, my job,” said Lebish. “I was living in a refrigerator box in Seattle.” He is now in recovery for 24 years. Anderson-Caldwell was an ally for a close family member with substance use disorder.

Their passion has fueled the desire to expand and to provide a holistic and one stop recovery hub. They have already expanded by opening the Shiller House, a substance-free home for those who have completed the six-month recovery program and then need a place to live.

Both Lebish and Anderson-Caldwell recognize that for many there is no available housing. "Often by the time you reach this stage in recovery, you don't necessarily have a job to go to, you've often alienated your family, you might not have money for first/last month deposits," said Lebish. Residents at the Shiller Ranch are free to stay as long as they are paying their rent and contributing to house chores.

The primary house rule is maintaining a substance free environment. If any resident violates the substance free policy, they are evicted. To date there have been no violations. "We know once they leave us, they are going to be exposed to all kinds of temptations. And we know it takes quite a while to feel comfortable with being out of the protected environment," said Lebish. "If you really, really want to stay sober you will. So far there have been no relapses."

Down the road, the two leaders hope to add a Residential detox (ASAM level 3) program and a Residential treatment center (ASAM level 3). While there is no shortage of determination, commitment and passion, these goals come with a cost. "We need funding. I would open as many houses as possible if we had the funding," said Lebish. El Rancho de la Vida is a non-profit model by design. "I don't want to make a profit from human suffering."

If you would like to learn more about El Rancho de la Vida or to make a donation, visit [www.erdlv.org](http://www.erdlv.org).



*Beth D'Ovidio is an enthusiastic PR/communications professional with extensive experience writing compelling content for PR, marketing, and social media. 20 years of experience resulting in proven success developing and implementing media strategies, plans and campaigns across traditional and digital channels to create and promote client/employers' brand.*

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# Changing Our Lives

## Practice, helpers and helping

by Joanna Free

*“If you want to change your life, change your life.” —Jen Sincero*

**F**umbling, flailing and freaking out: these would describe my early recovery.

At six months in, I went to rehab, not because I'd started using again, but because I didn't know how to live, so I was spending a lot of time thinking about dying. I was also working in the field of mental health, doing my best to hide the despair that greeted me every morning and the turbulence I felt inside.

Like a lot of others in early recovery, I stayed busy.

I was smober—free of tobacco and other substances that had ruled the day—but not emotionally smober. I was dopamine deficient, afraid of my own shadow and yours, too, and had no clear path to changing that. Yet.

The thing is: if—when—we stick around, and stay connected with others who get this, *truly* get it, there's an opportunity for change—actually, an opportunity for complete transformation. I say this, not only from my own experience but in observation of so many other fumbling, flailing, and triumphant souls who've graced my path.

Colleagues, clients and fellow travelers in and out of long term recovery are living examples of what it looks like when we do what works and when we don't.

Do you see them, too? The ones who remind you why you came into recovery and the ones who show you what can happen once you do.

In my first five years in the field of addiction treatment, I was part of a clinical team in Athens, Georgia that included an aftercare coordinator, Vivian. Miss Vivian. She'd been in recovery for a very long time and alive for much longer. She'd seen a lot of pain and some miracles, too.

When someone we'd both worked with returned to use and died shortly thereafter, I was devastated. Vivian came in each day, head held high, still clear in her mission.

“How do you do it?” I asked. “I know you loved him, too.”

Vivian looked at me and said, “Oh, I've cried, too, but some of us have to die so the rest of us can live.” It sounded so cold, so sharp to me at the time!

For Miss Vivian, his death was one more reminder of why she was in recovery and supporting the recovery of others. She knew how she needed to feel to show up each day, so everything either supported or stimulated that state of being.

She made it so, and she prayed it so. Her faith was as strong as her backbone had grown.

I don't have the kind of faith or the backbone Miss Vivian had. What I do have today, though, is community.

Some of us can live along the edges of humanity and can do fine or at least OK that way. I watch those loners with curiosity now, knowing it's not me. I need to be in the



village, and serving the village, too. I'm a person who needs people.

Barbra Streisand once sang that “people who need people are the luckiest people in the world.”

It didn't *feel* lucky. In early recovery, I didn't know I needed people to live and to change my insides and outsides, my brain and my life.

Discovering I did, I didn't like it. I felt needy and broken and awkward, asking for help, and then more help, and different help, too.

For the kind of change I want inside me and in my life, I need community, period. I don't have to like that I need people. Trust me, I didn't, until I did.

Now I put the energy I'd once put into toughing it out alone into growing and nurturing connection. I promise you, it's a much higher yield investment, and it feels better, too, for all of us.

Changing our life means changing our life. Easy? No! For most of us, it takes practice, it takes helpers, and helping others, too.

That works, and it's worth it. As are we.



Joanna Free is the (grateful) author of *BUTTKICKERS: Twenty Ways to Leave Tobacco* and a (proud) writer for *Journey Magazine*.

# Looking for a safe place to live in recovery in Maine?

The single most important question to ask is, “Is this house MARR certified, and if not, why not?”

Maine Association of Recovery Residences [MARR] manages the ethical and safety standards for recovery residences and provides certification as an affiliate of:



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# MAINE MOM

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## Support to Pregnant Women Living with, or in Recovery from, Opioid Use Disorder

by Beth Ellis D'Ovidio

A woman's reaction to finding out she is pregnant depends on her circumstances.

Fear and questions are common.

Am I able to do this? Is this the right time?

Can I afford this...and on and on.

Imagine how amplified these doubts and fears are if the woman is in recovery or struggling with an ongoing opioid use disorder. Fortunately, in our state, the MaineMOM Initiative is at the ready to help pregnant women who are actively using substances or who are working to maintain their recovery.

The program provides a central hub for women receiving MaineCare to access support, including basic everyday needs, in addition to prenatal and perinatal care.

Dr. Alane O'Connor is the medical advisor of the Maine Maternal

Opioid Misuse (MaineMOM) Initiative. "Moms who are using substances or are in recovery have far more concerns and complications than women who are not," said Dr. O'Connor. "Many of these moms are unsheltered, food insecure, lack transportation, or live with domestic violence."

Their needs are more complex, and more support is necessary. Providing those supports is the key purpose of MaineMOM.

MaineMOM team members consider all the woman's necessities. And in the process attempt to remove barriers that are keeping her from receiving the care she needs. Dr. O'Connor provides examples of what some of these needs may be.

"She may need a place to live. Others may need help with picking up their prescriptions. Some may need to borrow a telephone to make an appointment." MaineMOM connects all the dots as the

central place for coordinating all the services.

"The toughest appointment is the first. Some women are at their lowest point and are afraid. It takes a lot of courage for them to take this first step. We see many tears at first appointments," said Dr. O'Connor. "Often the woman is experiencing shame, low self-esteem and wondering 'how did I ever get here?'"

There is no room for shaming or judging at MainMOM. It is a place of support, nurturing and overcoming challenges with plenty of help. When a mom reaches out to the program, team members meet her where she is at the time.

The program uses a team approach in caring for the moms' needs. This includes an obstetric provider, substance use treatment prescriber and counselor, patient navigator, nurse care manager, and peer recovery coach for each mom.

The program provides all the traditional perinatal and postnatal care for up to 12 months post birth. At the same time, it addresses the specific needs of the moms—a treatment plan for counseling, recovery support, and treatment, including medications. And, it includes coordinating referrals for other services she might need during and after pregnancy like health care, housing, transportation, childcare, and more.

“Sometimes, it just means having someone sitting with her for support when she is making a phone call...MaineMOM is available to help coordinate the services,” said Dr. O’Connor.

She gave another example of a time a patient needed a ride from court to her appointment. MaineMOM arranged transportation for her.

“The goal is to provide as much support and remove as many barriers as possible to help in her recovery journey,” said Dr. O’Connor.

Traditionally, all of these services have been separate. A woman would have to go to one location for housing assistance, a different place for food assistance, another for medical care, etc.

This would require repeated time away from work, transportation challenges, securing childcare and many other barriers. MaineMOM eliminates as much of that as possible.

Moms in the program often form strong bonds with their peer recovery coach. The recovery coach has been in the same situation as the new mom.

They have been through many of the same struggles which makes it easy to form a close bond with the new mom. In many cases, pregnant

moms and their recovery coaches have formed strong partnerships and stay connected even after the mom has completed the program.

Many women have turned their lives around for the better through the kindness, support and help of MaineMOM. Some have returned to school and others have been able to regain custody of their children.

“It is such a beautiful thing to see,” said Dr. O’Connor.

Maine is one of ten states selected to receive funding from Centers for Medicare and Medicaid Services (CMS) to improve care for pregnant and postpartum women who are living with or in recovery from opioid use disorder and their infants. Maine is the only recipient that provides the services throughout the state.

There are currently 19 Service locations in medical care centers, hospitals or private doctor’s offices.

Each location provides a safe and comfortable space for moms.

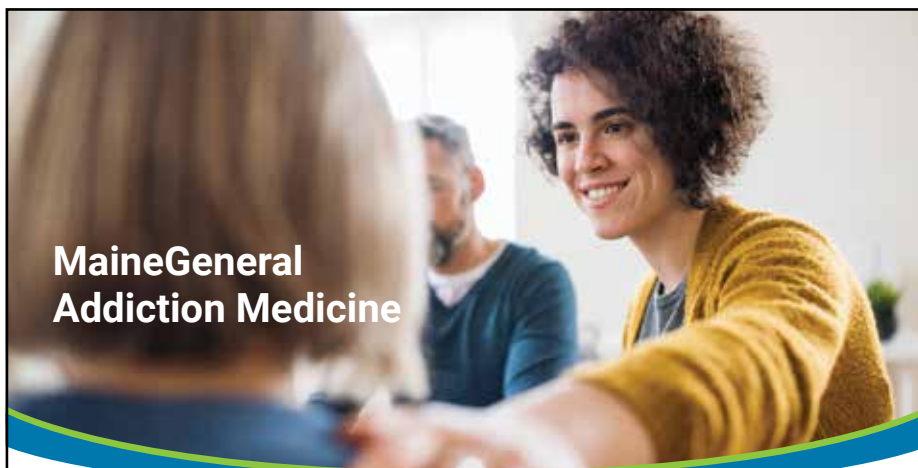
Currently MaineMOM is assisting 67 moms and since the program began in 2020 it has provided support and hope to a total of 105 Maine mothers.

If you or a loved one is pregnant and needs help, MaineMOM is there for you. Reach out. Take that first step to keep you and your baby healthy and safe.

Let MaineMOM be the lifeline you need. They are there, and ready to lend you a hand. Visit [www.mainemom.org](http://www.mainemom.org) or call 1-888-644-1130.



*Beth D'Ovidio is an enthusiastic PR/communications professional with extensive experience writing compelling content for PR, marketing, and social media. 20 years of experience resulting in proven success developing and implementing media strategies, plans and campaigns across traditional and digital channels to create and promote client/employers' brand.*



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# Personal Recovery *story*

## Better Every Day

### *Dave Smith's Story*

by **Gabrielle Gilbert**

A young addict recently asked his friend in recovery if he ever, you know, thought about getting high again or thought about drinking again. Dave, the friend, took a moment and looked at his life: a 20-year marriage, a strong relationship with his son, 12 grandchildren, active fellowship and community, a new home, a good job and a sense of peace.

He realized that, yes, the thought comes up now and then, but he would lose everything he has in an instant.

Wisely, Dave replied “I don’t want to do it more than I want to do it.”

Dave is a recovering addict.

Growing up in Cumberland County, Dave had a tumultuous start in life with a broken home and abuse he could count on. He felt resentment towards his parents. His father had been stationed in Vietnam during the war and chose not to come home to his family. His mother had battled her own issues and left Dave with a man who shouldn’t have taken care of children.

When Dave was 16, that man passed on and Dave bought himself a pint of gin. The party began. What happened next wasn’t pretty: chugging the bottle, puking, passing out, feeling awful. That’s when Dave decided he wanted to feel awful the rest of his life. He prioritized feeling awful.

It started with alcohol, but Dave would have taken anything and he couldn’t just take a little. He experienced prison time off and on, sold drugs, got a job and an apartment and then he got arrested one last time in 1998.

Dave was in Cumberland County jail for nine months. His probation officer suggested that Dave consider rehab and so he gave it a shot, tired of the party, tired of feeling awful. He stayed at the Hope House in Bangor for a 28-day program but he needed more time. So he turned to Wellspring Inc. Treatment Center where they had a nine-month residential program.

A third of the way through, Dave was getting the hang of it, of sobriety and how to fill his time with something better. Things started looking up and Dave got scared. Once the residency was over, could he keep it up? How was he going to implement all he was learning?

“I say this often,” Dave says, “sometimes it isn’t when my life’s going bad, that I worry. It’s when my life is going good.”

He began the search for a sponsor. When he found Joe, he didn’t think they would have much in common. Joe was an older gentleman, and he was an alcoholic. Dave wondered how this old alcoholic was going to relate to himself, a young addict. The two found that simple common ground in the solution Joe offered, and Dave was inspired to become a



sponsor to other young addicts who needed help.

Joe took Dave through a 12-Step program and supported him through his ups and downs. Dave went to live in a sober living environment for nine months with three roommates in recovery.

From there, he began building a life he fell in love with. He applied for culinary school, got in, graduated at the top of his class, and felt the pride of being the first in his family to go to college.

Things were really starting to get good for Dave. New career path, happily married to a woman in recovery herself, maintaining sobriety and working hard—and that’s when he started to worry again.

Dave’s career “became God” and things were starting to fall to the wayside. He had been missing his meetings. He had an argument with his sponsor.

Worst of all, he hurt his back and had to go to the hospital. They gave Dave painkillers and the party started all over again. Before this, Dave was seven years sober and he drank it away.

His relapse lasted a year until he and his wife had an argument. That night, Dave called his sponsor, who said to him, “I’d be more than honored to help you.” Dave decided he had to detox on his living room floor. It took him five days. Since then, Dave has been 15 years sober.

“I learned a lot of things from that point” Dave admits, humbled.

“One thing I learned is that I have to be involved in the fellowship all the time. I need to always be on a committee (or) working to help other people in recovery.

“And the other thing I learned, I have to make my recovery a priority over everything else. It’s gotta be a priority over my marriage. It’s gotta be a priority over being a dad or a granddad, a priority especially over work. Because if I lose that recovery, I’ll lose everything.”

Dave is holding tightly to the beautiful things in his life. He keeps his recovery at the forefront of his mind and reminds the people in his life often that his recovery is “the foremost part” of who he is.

He and his wife dedicate much of their time in meetings, hosting meetings in their new Windham home after making the move from Bangor, and he is currently sponsoring others in their recovery struggles.

Dave has gone out of his way to form peaceful and honest relationships with those in his life, especially his family. He made amends with his father in his later years, creating a hospice in his own home for his father before he passed six years ago and creating a true home for himself.

Every day, Dave is less fearful of the good things and grateful for them instead.

“I thank God for, you know, letting me wake up today and (I) ask him to help me to be a better person,” he says. “My goal is that tomorrow, I want to be a better person than I am today.”



*G. Gilbert is an endlessly curious freelance writer, poet, and visual artist waking up in Southern Maine.*



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# 3 Self-Care Tips for Surviving the Holiday Season

*Reduce stress and protect your recovery progress with tips from Groups*

by Dave Kostos



If you're in recovery this holiday season, you may face people and places that trigger stress and cravings.

To prepare and stay safe into the new year, use these self-care tips from **Groups Recover Together**.

## 1) Use a self-care checklist

Keep yourself accountable for self-care practices with the checklist below. Remember, your self-care practices won't be the same as others. The team at Groups recommends focusing on activities that recharge your batteries the most.

- Take care of your hygiene
- Take care of your mental health
- Follow a sleep schedule
- Balance alone time and time with others
- Stay active
- Reach out to a supportive friend

## 2) Build a self-soothe box

Overcome stress with items that ground and center you. For portable relaxation, build a self-

soothe box: a small collection of comforting things that you can carry with you. Try to address all five senses.

- **Sight:** Pictures of loved ones or a trip souvenir
- **Sound:** A music box or a favorite song
- **Smell:** A relaxing candle, perfume, or flower petals
- **Taste:** A favorite candy or snack
- **Touch:** Stress balls, putty, or soft and smooth fabric

## 3) Set your boundaries

When it comes to holiday stress about money, time, or difficult family members, firm boundaries help stop negative thoughts that lead to cravings and lapses.

Have boundaries for:

- What conversations you won't engage in
- How long you're willing to be with people
- How much money you'll spend
- What activities you won't participate in

Remember: boundaries are essential to staying well. It may be uncomfortable to leave situations, but you're doing it to reach your recovery goals, not to hurt others. Call a friend who is willing to support the boundaries you need.

Don't let holiday triggers threaten your recovery progress. Get the holiday help you need with Groups: (888) 391-5978.



*Dave Kostos is a writer, editor, storyteller, and the Senior Manager of Content at Groups Recover Together. In this role, he helps people around the country find lasting recovery from substance use disorders. Learn how*

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# One Gratitude at a Time

by Susan Lebel Young

Thank you!

**H**ow do we emerge from bed in the morning? If we pay attention to first thoughts, they might not reflect an attitude of gratitude.

Maybe our first thoughts sound more like, “Argh! It’s too early to get up. Who dreamed up this ridiculous work schedule?”

Maybe our first thought is not, “Thank goodness I have a job.”

Maybe our first thought screams, “OUCH! This pain in my hip... worse today than yesterday.”

This brings me to a mantra from Jon Kabat-Zinn, “If we are alive, there is always more right than wrong, always, no matter what is wrong.”

He urges us to focus on what’s right, what’s working not as a way into positive thinking, rather as a way to expand the way we see the world.

Not to take away alarm-clock blues, but to widen what that alarm clock means, employment perhaps.

Not to minimize hip pain but to open to the miracle that “I have a body.”

What if, in the middle of the suffering of what is not working, we open one tiny or one huge space for gratitude?

What could we possibly be thankful for?

My hip hurts and every ounce of awareness seems lodged there.

But wait, can I, on purpose, choose to focus bigger?

My heart beat all night on its own.

I breathe; my lungs know what to do.

I open my eyes; I can see. My ears are working; I hear the birds.

I can feel the soft touch of my comfy warm blankets around me.

First thoughts are important to pay attention to, yes. They show up automatically, not always filled with gratefulness.

But we do have control over second and third thoughts.

If your hip hurts, do your toes also hurt? If not, can you have gratitude for happy toes?



*Susan Lebel Young MSED, MSC, has written for local papers since 2005, is the author of three books, and is mostly retired from her mindfulness-based psychotherapy practice. She lives and loves, works and writes, in her beloved*

*Southern Maine, and can be reached at [www.susanlebelyoung.com](http://www.susanlebelyoung.com) and [sly313@aol.com](mailto:sly313@aol.com)*

**SHARE YOUR STORY!**  
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[recovery-journey.com/  
share-your-story/](http://recovery-journey.com/share-your-story/)

# Becoming an Authentic Couple

by Elaine Shamos, MPH and Glenn J Simpson, LCSW-cc, CADC

The key to unlocking true intimacy as a couple, is discovering your authentic self.

Couples in early recovery often start their relationships from a place of codependence, that is where one or both parties feel a need to please the other at the expense of their own needs. For lots of reasons, they may not yet have found their voice to be authentic with their partner.

People with codependency issues often had problems with their families of origin, trauma, or social norms; and have adapted by being secretive or inauthentic. Early sobriety often puts pressure on the sober partner to fix, control, or put their own needs on hold. All of these situations can put couples on an authenticity hold.

In recovery, people begin to explore the wounds they bring to the relationship, and work towards becoming their more authentic self. With trust, one can then share these insights with each other. This can be a very intense time for couples, bringing both more intimacy but also fear, as the dynamic of the co-dependent relationship is disrupted. Moving toward interdependence often requires the help of a couple's therapist to guide this process.

Six steps to consider while moving towards authenticity in your relationship:

- When you both get “triggered” at the same time, determine whose unmet needs get addressed first, understanding you will take turns asking for what you need.

- Be emotionally vulnerable by telling the truth, even if it may create a conflict. Redefine intimacy to include conflict.
- Agree to stay engaged during deep conflicts. This creates safety from behaviors such as withdrawing, engaging in addictive behaviors, walking away, or escaping into another relationship.
- Respect each other's boundaries. Renegotiate as needed.
- Develop spiritual practices together such as meditation, attending meetings together, walking or exercising together.
- Ask for support from your partner when resolving conflicts. We are all perfectly imperfect. Be gentle with yourself and each other. Express gratitude

and compassion. Seek professional help if needed.

It is possible for both people in the relationship to live their authentic selves and recover together as an authentic couple.

Taking responsibility for one's life is hard work but the rewards are truthfulness, integrity, and a move towards the authentic self.

Ultimately, it is a move towards becoming a trusting and intimate authentic couple.



*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.*



**For employers with fair chance hiring practices to connect with people eager to get to work**

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Who:

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may have:

- employment gaps
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- struggle finding employees
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**visit Job Board on [journey-magazine.com](http://journey-magazine.com)**





# Recovery Discovery for NoMoPhobia

by Karen St. Clair

Welcome to the reality of just how dependent we've become on technology and in particular, our smartphones as we explore how they're changing our physical and social lives.

Smartphones can cause stress.

Multiple studies have shown that excessive smartphone use can lead to brain changes that are linked to depression and anxiety. Although smartphone addiction is not yet classified as an official disorder in the latest edition of the DSM, internet addiction in general is listed as a disorder in need of further research, as an issue of "significant public health importance."

It's known as NoMoPhobia; the irrational fear of being without your smartphone.

Even though our phones are causing us heightened levels of anxiety, we literally can't bear to be away from them. One study found that when people could hear their phones ringing but couldn't answer them, their levels of the stress hormone cortisol spiked. Another study found that up to 90% of people feel phantom vibrations, and that we can go into panic mode when our phones are on low battery.

People of all ages may realize just how dependent they are on their phones and yet be unaware of the signs of NoMoPhobia. A common subconscious thought may be, "Why should I change my habits? "It's just the way it is these days!" It may be

"the way it is" but ultimately, is it a healthy choice?

**Q.** What are we giving up while our heads are looking down at our smartphone's constantly day and night?

**A.** Human Connection, Thinking, Creativity and multiple Hours of productivity per day

*"Phones are inanimate objects. We talk Through them, not To them."* —KOS

Here are sample responses to a statement that I ask within my EFT Tapping practice as we begin our work to lessen the effects of NoMoPhobia:

## If I did not have my cell phone with me, I would feel...

- anxious because I couldn't communicate instantly with friends
- worried that my friends couldn't reach me
- uncomfortable without constant access to information
- afraid of getting stranded somewhere without my phone
- weird because I wouldn't know what to do

These responses combine thoughts and emotions which manifest as limiting beliefs such as "my friends won't like me if I don't respond immediately."

Research shows that when exposed to social media or sugar, the response in our brain is the same: It produces the "feel-good" neurochemical called dopamine, which brings on feelings of pleasure and motivation. And when we're



repeatedly exposed to pleasure-producing stimuli like the ping of our cellphones, our bodies react and adjust. Then we need more with repeated use, just to feel a marginal pleasure boost – and, eventually, just to feel "normal."

Change begins with awareness.

*"Take the time to be aware of the hours you spend on your phone."*  
— Ruby Taylor, representing a well-informed teenage cohort in Southern Maine.

EFT Tapping is a science-based holistic modality with lasting success utilized by millions of people across the globe. Share your response to the cellphone statement above at [karen@karenstclairEFT.com](mailto:karen@karenstclairEFT.com)



*Karen St.Clair is an Accredited Certified EFT International Trainer NQT, Reiki Master of Masters, International Best Selling Author, Speaker, Founder of Reiki Tap Renewal<sup>SM</sup>*

*and a highly skilled professional with a true gift for facilitating her clients' life-changing outcomes. [karenstclairEFT.com](http://karenstclairEFT.com)*

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# The Importance of Youth Voices

by Janet Dosseva, MPH, PS-C

Youth voices are often overlooked. However, the children of today are the leaders of tomorrow and have valuable perspectives. The Westbrook Partners for Prevention (WPPF) coalition strives to empower youth and help elevate their voices for the issues that are important to them. Most recently, this included working alongside a small group of high school students to create prevention messaging and promote mental health, resiliency, and alternatives to substance use. WPPF participated in a summer youth employment program known as “Gateway to Opportunity.”

Gateway to Opportunity connects high school youth participants and a college-aged team leader to paid learning opportunities. The program is six weeks long and focuses on 21st Century skill-building. WPPF was one of eight host sites in Maine this past summer. The WPPF group learned about foundational public health concepts, substance use prevention and harm reduction strategies, team work, advertising/effective messaging, and social media content creation, to name a few. They were also connected to local career opportunities and learned about employment applications, resume and cover letter writing, and financial literacy.

We highly encourage you to talk with the young people in your lives whether it’s about challenges they’re facing, local community topics, substance use and recovery, or simply about the things they’re passionate about. These are incredibly valuable conversations which we will be continuing during the school year with our Youth Leadership Coalition students.

## TIPS FROM OUR YOUTH GROUP

- Check in with us, even if it seems like we’re not listening.
- Grades aren’t always representative of someone’s intelligence or abilities.
- There’s a lot of stigma still in talking about substance use and mental health. Please listen when we do talk and don’t dismiss what we say.
- Be more open-minded and listen and participate in the things we like doing.



Thank you to our partners involved with our G20 project: Westbrook School Department, Maine Youth Action Network, City of Westbrook, Rinck Advertising, My Place Teen Center, Voices of Hope!

## FOLLOW WPPF TO SEE MORE OF OUR YOUTH-CREATED MESSAGING



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@westbrookPFP



@westbrookPFP



westbrookpartnersforprevention.org



This article is written by Janet Dosseva, MPH, PS-C, Program Director for Westbrook Partners for Prevention



### About Westbrook Partners for Prevention (WPPF)

WPPF is a grant-funded substance use prevention coalition in Westbrook, Maine. The coalition is made up of diverse community stakeholders, collaboratively working to reduce and prevent youth substance use rates. WPPF works diligently to increase awareness and provide education and resources to both the adult and youth communities.

To learn more about Gateway to Opportunity and potentially be a host site: [www.myan.org/programming/youth-employment-and-internships/](http://www.myan.org/programming/youth-employment-and-internships/)

# Maine Voices of Recovery

## Stories Restoring Hope

by Jamie Lovley



**R**achelle Bell is the Recovery Services Manager at both the Maine Coastal Regional Reentry Center and at Volunteers of America's Project Connect. She works with the incarcerated populations in Waldo and Knox counties in programs that allow people facing drug charges access to life-saving treatment resources.

Her passion for helping the incarcerated population began in 2019 when she interned at the Maine Coastal Regional Reentry Center while she was studying to be a substance use counselor. "In my first meeting in the reentry center, I realized these people aren't scary, they were just like me. The only difference between them and me is that I never got caught when I was using. That was the only difference."

This year Rachelle celebrated two accomplishments, finishing her bachelor's degree in mental health and counseling, and achieving ten years in sobriety. Today Rachelle gets to help others access recovery resources that helped her in her own journey years ago.

Rachelle first encountered substance use disorder in her childhood, when her stepfather's alcohol abuse created chaos and violence in her home. She found herself using food as a way to exert control in her life. From there she moved on to alcohol, marijuana, and hallucinogens in her teens.

In her early twenties, she began to self-medicate with opiates to cope with symptoms of PTSD. "Alcohol and opiates let me come out of my shell, made me relax. I got that power back. I was comfortably numb. Then I became dependent."

From age 23 to 33, Rachelle was using substances on a daily basis.

If she wasn't using, she was looking for substances or recovering from them. "I felt I was functioning using substances, but there were times I was homeless. I was putting myself in dangerous situations, buying and selling drugs, and making very bad decisions."

When Rachelle wanted to start a family, she decided it was time to reach out for help. "I went to a 12-step recovery program for food addiction. Two months in I knew my problem was bigger than I realized and I told my sponsor I needed more help getting sober."

At the time she didn't know anything about recovery coaching or the restorative arts.

Today she is a part of the Waldo County Recovery Committee, working together with providers and community members to provide

*Maine Voices of Recovery is a series written by Jamie Lovley and created by Knox County Community Health Coalition in partnership with the community. The goal of the series is to teach the community about recovery, dispel misunderstanding about substance use disorder in the state of Maine, and record stories of how long-term recovery does work. All names have been used with permission.*

comprehensive and connected resources to those who need them.

Rachelle surrounded herself with women in recovery who supported her and knew what she was going through. "I didn't even know how to live without substances. It was like growing up all over again. I was a child." She began Suboxone treatment, went to recovery meetings regularly, and attended counseling for the trauma she had tried so hard to address on her own.

Rachelle believes that education in the community about medication-assisted treatment is important to fighting the stigma around substance use disorder and increasing the network of support for those struggling with opioid misuse.

"I'm living proof that it works. I was on Suboxone for eight months, and I don't think I would have been able to get off opiates without it. I tried over and over again and failed. I used it as prescribed and had other supports around me, and that's key."

Building up a network of supportive women in recovery and creating a mentor relationship with a sponsor helped Rachelle navigate the difficult transitions in early recovery. Other women who had

gone through similar struggles inspired her and built her up. Through this, and a counselor who truly believed in her, Rachelle found new self-worth and hope.

“Until substance use disorder affects someone personally, people have stigmatizing thoughts. When it happens close to home people realize it can affect anyone. It doesn’t discriminate, no one is immune, and it impacts this whole country.”

Today Rachelle has a seven-year-old son, a gift of recovery. “I know that if I pick up, if I take that one sip, everything I have today will be gone. It’s only a matter of time. Having a child of my own gives me hope.”

Today Rachelle finds great pride in the work she does with the incarcerated community and as a certified alcohol and drug counselor.

Her story and impact in the community are beacons of hope to those around her. “One of the scariest things about getting sober is the unknown. I lived so long with substances I didn’t know how else to live my life. If I can do it, anyone can and it’s so worth it.”

No two recovery stories look the same. If you believe you have a problem with substance use, reach out for help.

Call 211 for resources in Maine. For a list of local recovery meetings, visit: <https://csoaamaine.org/meetings/> <https://namaine.org/meetings-by-table/>



*Jamie Lovley is a social worker living in Mid Coast, Maine. She works in substance use recovery at a residential treatment facility and is the Substance Use Prevention Specialist at Knox County Community Health Coalition. She*

*is passionate about using her experience in journalism and in social work to write recovery stories that fight stigma and inspire hope.*

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...period.

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[salinc@salrecoverynetwork.org](mailto:salinc@salrecoverynetwork.org)  
[salrecoverynetwork.org](http://salrecoverynetwork.org)

**INSPIRE RECOVERY CENTER**  
*In Support Of People In Recovery*  
A Project of Healthy Acadia

24 Church Street, Ellsworth  
**207.412.2288**

INSPIRE honors all pathways to recovery. We offer a safe, fun, and welcoming space to connect with members of the community.

- Support Groups
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- Parenting Classes
- Recovery Coaching for Affected Others
- Re-entry and Community Resource Navigation
- Fresh coffee available daily
- Monthly Community Lunch

All of our programs and events are free and confidential. email [inspire@healthyacadia.org](mailto:inspire@healthyacadia.org) for more info!

**GRACE HOUSE**  
**Healing through empowerment**

We provide the support and structure necessary for women who are willing to work to maintain a productive, spiritual lifestyle.

**(207) 615-4356**      [www.gracehouseforwomen.com](http://www.gracehouseforwomen.com)

# Bangor Area Recovery Network

Supporting life beyond addiction

**(207) 561-9444**  
[www.bangorrecovery.org](http://www.bangorrecovery.org)

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

## Pir2Peer Recovery Community Center

*Inspiring Hope for Recovery in the Katahdin Region*

**Our mission:**  
 To support people seeking recovery by establishing a personalized path to recovery through coordinating services, resources, and referrals.

**We offer:**

- Recovery Meetings
- Safe space to socialize
- Distributing free Naltrexone
- Recovery Coaching & Recovery Coach Training
- Job skills preparation
- GED Readiness
- Resource Coordination
- Prison Re-integration

**447-9500**  
 1009 Central St  
 Millinocket

# Spreading Recovery Throughout Maine

Portland Recovery Community Center (PRCC) is Maine's Recovery Hub. We build recovery community throughout the state of Maine. **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](http://portlandrecovery.org) — **and find your people.**

102 Bishop Street Portland, ME 04103  
 207-553-2575 • [portlandrecovery.org](http://portlandrecovery.org)

The Larry Labonte Recovery Center

**We are a community-based, all-inclusive recovery center helping people who are struggling with addiction and the families of these individuals.**

**Recovery meetings:**  
 SMART Recovery, All Recovery and 12-Step Programs

**Recovery Coaching:**  
 Meeting 1-on-1

**Naloxone (Narcan) Training and Distribution:**  
 Used to reverse the effects of an opioid overdose

**(207)-418-4983**

412 Waldo St, Rumford, Maine  
 Open: Monday - Friday 10 am - 4 pm  
[info@llrecoverycenter.com](mailto:info@llrecoverycenter.com)

**Everyone Is Welcome!**

Lakes Region Recovery Center is a safe place that encourages and maintains a culture which is welcoming and non-judgmental to people in recovery and their families.

- Recovery Groups
- Recovery Coaching
- Resources
- Telephone Recovery Support
- Wellness Programs
- Recovery Activities & Events
- Family Support Groups

**(207) 803-8707**  
[www.lrrcbridgton.org](http://www.lrrcbridgton.org)

Like us on Facebook  
 @LakesRegionRecoveryCenter  
 25 Hospital Drive Bridgton Maine

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2 Bangor Street Suite 2  
 Augusta

**We are building a strong recovery. reentry. community. together**

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[info@thearrc.org](mailto:info@thearrc.org)

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# 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](http://www.aa.org)

## **Al-Anon / Alateen**

207-284-1844 / 800-498-1844  
[www.maineafg.org](http://www.maineafg.org)

## **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](http://www.adultchildren.org)

## **Cocaine Anonymous (CA)**

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

## **Codependents Anonymous**

602-277-7991 / 888-444-2359  
[www.coda.org](http://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  
[www.debtorsanonymous.org](http://www.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](http://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](http://www.foodaddicts.org)

## **Gambler's Anonymous (GA)**

718-352-1671 / 888-830-2271  
[www.newenglandga.com](http://www.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](http://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](http://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](http://www.marijuana-anonymous.org)

## **Narcotics Anonymous (NA)**

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

## **Nar-Anon**

A 12-step program for families and friends of addicts.  
[www.Nar-Anon.org](http://www.Nar-Anon.org)  
800-477-6291

## **Nicotine Anonymous**

[www.nicotine-anonymous.org](http://www.nicotine-anonymous.org)  
469-737-9304

## **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.  
[www.oamaine.org](http://www.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](http://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](http://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  
[www.wellbriety.com](http://www.wellbriety.com)

# Statewide Resources

## CRISIS HOTLINES

### 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.



# Recovery Centers

### Aroostook Recovery Center of Hope

36 North Street #1, Houlton  
207-254-2213

### ARRC Augusta Recovery Reentry Center

2 Bangor St, Suite 2, Augusta  
207-226-3438

### Bangor Area Recovery Center

142 Center Street, Brewer  
207-561-9444

### Bath Recovery Community Center

97 Commercial Street, Bath  
207-389-4236

### Beacon House Peer and Recovery Center

3 Canal Street, Rumford  
207-418-0079 / 207-369-0868

### Beacon of Hope Recovery Center

19 VFW Street, Lincoln  
207-403-9100

### Biddeford Peer Support Center

15 York Street, Biddeford  
207-358-4414

### Boothbay Harbor Peer & Wellness Center

35 School Street, Boothbay Harbor  
207-315-6236

### Coastal Recovery Community Center

11 White Street, Rockland  
207-691-3697

### DownEast Recovery Support Center

311 Main Street, Calais  
207-952-9279

### Down East Recovery Support Center

11 Free Street, Machias  
207-259-6238

### Harvest Inn Peer Center

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

### INSPIRE Recovery Center

24 Church Street, Ellsworth  
207-412-2288

### Lakes Region Recovery Center

25 Hospital Drive, Suite E, Bridgton  
207-803-8707

### Larry Labonte Recovery Center

412 Waldo Street, Rumford  
207-418-4983

### LINC Center

38 Memorial Drive, Augusta  
207-530-0391 / 207-430-4001

### Perry Center (formerly Amistad)

835 Forest Avenue, Portland  
207-772-1956

### Pir2Peer Recovery Center

1009 Central Street, Millinocket  
207-723-1327

### Portland Recovery Community Center

102 Bishop Street, Portland  
207-553-2575

### REST Center

205 Main Street, Lewiston  
207-783-7378

### Rockland Peer Support Center

12 Union Street, Rockland  
207-317-3012

### Sanford Peer Support Center

19 Washington Street, Sanford  
207-956-2984

### Together Place Peer Run Recovery Center

2 Second Street, Bangor  
207-941-2897

### Valley Peer Run Recovery Center

272 Main Street, Suite 101, Madawaska  
207-728-4806 / 207-316-7375

### Wabanaki Health & Wellness Center

157 Park Street, Suite 5, Bangor  
207-951-7526

### Roads to Recovery Community Center

1 Water Street, Caribou  
207-493-1278



— **Maine's Good Samaritan Law** —

**PROTECTS A PERSON WHO:**

- in good faith, seeks medical assistance for a person experiencing a drug-related overdose
- is experiencing an overdose and needs medical assistance
- is “rendering aid” at the scene of an overdose. *“Rendering aid” means performing any action that involves looking after a person who is experiencing a suspected drug-related overdose.*

**PROTECTS THEM FROM:**

- arrest and prosecution for most non-violent crimes, including ALL drug crimes
- revocations of bail, probation, supervised community confinement, community confinement monitoring, deferred disposition, and administrative release for most non-violent crimes, including all drug crimes
- arrest on outstanding warrants for most non-violent crimes, including all drug crimes

**IT DOES NOT PROTECT A PERSON:**

who commits excluded crimes, including but not limited to:

**Violent crimes:**

Murder/Manslaughter

Violation of a protection order

Domestic violence

**Sex crimes:**

Gross sexual assault

Unlawful sexual contact

Sexual abuse of minors

**Crimes against children:**

Abandonment of a child

Most crimes committed against someone under 18 years of age

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# PROVIDING SUPPORT WHEN IT'S NEEDED MOST

RALI Maine and  
our partners are working  
together to reduce stigma  
and share resources to support  
mental health and fight  
substance misuse.

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Join us and learn more at [rali-me.org](https://rali-me.org).

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