

FREE



ADDICTION RECOVERY

Vol. VII Issue II Summer 2019

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Referral Resource Guide
Florida / California / Arizona



Letter from the Publisher

I established the All 4 Ur Addiction Recovery Guide in 2013 as a resource magazine for those suffering from the cunning, baffling, and powerful disease of addiction. Our publication provides not only information about the disease, but assistance in locating detox facilities, in and out patient treatment facilities, counseling services, life coaching and more. This directory includes available legal help, sober living facilities, and community services. We supply a list of resources to include free community services, transportation, sober events and activities and more. We offer assistance to family and friends affected by the disease as well.

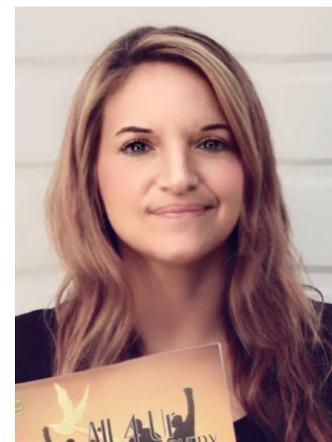
I have worked in the health care industry for over 10 years, specifically in Chemical Dependency for over five years. My experience includes Peer Counselor, Intake Coordinator, Admissions, and Marketing at several different health departments and treatment centers over the past 10 years. I assisted in developing a new treatment center on the Treasure Coast, establishing the Admissions and Business Development departments. My love for people and serving those in need has resulted in the development of the All 4 Ur Addiction Recovery Guide.

Being affected by a family member with the disease of addiction, I have experienced the pain of addiction in my own family life. I am dedicated to my own personal recovery and to providing help to those in need.

All 4 Ur Addiction Referral Recovery Guide takes great pride in our relationships. Every addict deals with specific issues, and every addict should be treated with compassion and care. Entering recovery is very taxing on the mind and body, but that should not be a deterrent. It is important that the right decision be made for the sake and well-being of the affected suffering addict. To find quality addiction help in Florida, California and Arizona make sure you call professionals. All 4 Ur Addiction has great resources at hand to aid you in making a new beginning. We are a means to help you or a loved one find sobriety, and most importantly, happiness. Our mission for this quarterly resource guide is to bring awareness and resources available to those suffering from addictions and their families who are affected by this disease.

If you have found this resource guide to be helpful, you may visit us online at www.All4UrAddiction.com
Sincerely,

Jenny Clark Spades
info@All4UrAddiction.com



Jenny Clark Spades
Publisher

Important Helplines

800-ALCOHOL · 800-COCAINE · 800-LOSTBET · 800-RELAPSE

AA WORLD SERVICES	212-870-3400	www.AA.org
AA Intergroup St. Lucie County, FL	772-873-9299	www.aastlucieintergroup.com
AA Intergroup Martin County, FL	772-283-9337	www.martincountyaa.org
AA Intergroup Orange County, CA	714-556-4555	www.oc-aa.org
NA World Services	818-773-9999	www.na.org
NA Florida Regional	863-683-8224	www.Floridana.org
NA Treasure Coast Area, FL	772-905-4409	www.treasurecoastareana.com
NA New York Area	212-926-6262	www.nycna.org
NA Orange County Area, CA	714-590-2388	www.orangecountyna.org
AA Al-Anon/Alateen Worldwide	800-344-2666	www.al-anon.alateen.org
NA Nar-Anon/Narateen Treasure Coast, FL	888-425-2666	http://nar-anon.org/Nar-Anon/Florida.html
OA Anonymous	505-891-2664	www.oa.org
Sex and Love Addicts Anonymous	210-828-7900	www.slaafws.org
211 Treasure Coast	211	www.treasurecoast.org
211 For Teenagers	211	www.teen211pbtc.org
Florida Abuse Hotline	800-962-2873	www.dcf.state.fl.us/programs/abuse/
Family Anonymous	847-294-5877	www.familiesanonymous.org
Celebrate Recovery Florida	772-287-6388	www.celebraterecovery.com



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Karina Priest, LMHC

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Let's Communicate

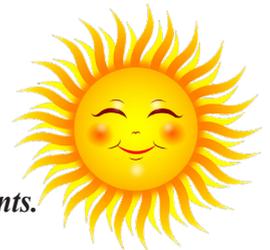
By Karina Priest LMHC

In a counseling practice dealing with marital counseling, you will be surprised to hear how often the issue of communication comes up... and maybe not.... all relationships need communication in order to work. We communicate with each other in various ways.... but we seem to have the most difficult time with talking. I often see a big lack of communication happening in the relationships having difficulties. I stress the importance of talking with our partners daily, and expressing what's on our minds and hearts. These talks don't take all day, or even hours. It's about getting used to talking daily, and keeping the communication going. There are many ways to communicate, but one I like to address is listening, hearing, and thinking before we respond. We must hear what the other person has to say, listen closely, think, and then address their point. Listening being the key word. That's seems to be the most difficult part of communicating in relationships. We have to be open to hearing another person's point of view or take on something, no matter how different from our point of view it may be. We must learn to let the person talk without trying to think of the answer. We can't really hear what's being said when we are thinking of the reply. We must also watch our body language, as we communicate plenty that way too. In communicating with our partners, we need to consider our mood, and if we

are prepared to exchange thoughts and feelings, or if we are in attack mode. Oftentimes, working with couples, it's easy to see how anger overtakes all sense of clarity. Sometimes, a partner feels like their issue is not important, and they don't address it. This often leads to bigger confrontation, disappointment, and resentment. Had the issue been addressed as it came up, it could have easily been resolved. One technique recommended is to set time daily with a partner for communication. Using a timer, paper and pen, each partner gets an opportunity to talk for 5 minutes while the other one is listening, they then switch. While a partner talks, you can take notes of things you want to go back to afterwards. The idea is to listen and hear. As you switch back and forth, each partner gets to talk without interruption and be heard. Sometimes, that alone can cause a sense of relief, and the issues may then get easily resolved. It's important to say what's on your mind, while keeping in mind that the point is not to win the argument, but rather express what we think or feel. Being concise, concrete, and clear, is the best way to go. Also, we need to address our feelings using the "I feel this way because" format, versus "you did this"..... the latter doesn't work and it will work against communication. It's always best to overcommunicate, than to not. You will be surprised how much can be solved with good effective communication every day, in every area of our lives.



SPECIAL EVENTS



All 4 Ur Addiction Recovery Guide, is not in any way associated with or endorses Any events in any way. And as such, they do not accept responsibility or liability for any events.

Florida

63rd Florida State Convention 2019

Wednesday 07/31/2019 – Sunday 08/04/2019
At the Trump National Doral Miami, 4400 NW 87th Ave, Doral, FL. For more information please contact 305-592-2000 or visit www.FloridaStateConvention.com

TCCNA X Carnival in Paradise

Saturday 08/10/2019 at 10:00 AM
At the Savannas Recreation Area, 1400 E Midway Road, Fort Pierce, FL. For more information please contact John at 772.282.7788.

The Women In Recovery Conference

Friday 08/16/2019 – Sunday 08/18/2019
At the Delray Beach Marriot, 10 North Ocean Blvd, Delray Beach, FL. For more information please contact 561-274-3200 or visit www.thewomeninrecovery.com

Florida Behavioral Health Conference

Wednesday 08/21/2019 – Friday 08/23/2019
At the Hilton Orlando, 14100 Bonnet Creek Resort Lane, Orlando, FL. For more information visit www.bhcon.org.

South Florida 30th Convention “30 Years of Recovery – Look How Far We’ve Come!”

Tuesday 08/23/2019 – Friday 08/26/2019
At the Hyatt Regency, Coconut Point 5001 Coconut Road, Bonita Springs, FL. For more information please visit <http://www.southfloridaal-anon.org/2019convention/>

Recovery At Its Best! A Path to Wellness

Wednesday 09/18/2019 at 10:00am
At Saint Michael & All Angels Episcopal Church, 2304 Periwinkle Way, Sanibel, FL. For more information please contact Kathy Y. Monroe or Anthony Morales 239-472-4775.

Recovery Symposium

Saturday 09/21/2019 at 9:30 AM
At Calvary Orlando, 1199 Clay Street, Winter Park, FL. For more information please contact Stacy Katz, Our 2 Sons, stacikatz952@gmail.com, 561-523-1038 or Cindy Singer, Our 2 Sons, our2sons2@gmail.com, 516-978-2904 or visit <https://www.eventbrite.com/e/south-florida-recovery-forum-tickets-62121829063?aff=ebapi>

Moments of Change

Monday 09/30/2019 – Thursday 10/03/2019
At the Breakers Palm Beach Hotel, 1 S County Rd, Palm Beach, FL. For more information please visit <https://foundationsevents.com/moments-of-change/>

American Association for the Treatment of Opioid Dependence, Inc. (AATOD) 2019 Conference

Thursday 10/10/2019 – Sunday 10/13/2019
At the Disney’s Coronado Spring Resort in Walt Disney World, FL. For more information visit <http://www.aatod.org/>

California

Rural Areas Campout

Friday 08/02/2019 – Sunday 08/04/2019
At the Trinity River Resort and RV Park 7420 Rush Creek Road, Lewiston, CA. For more information please contact Francis C. 530-354-1648 or Susan W. 530-737-7230 or visit <https://916northna.org/wp-content/uploads/2018/12/RACNA-Trifold-2019.pdf>

46th Annual Antelope Valley Roundup

Friday 08/16/2019 – Sunday 08/18/2019
At the University of Antelope Valley, 44055 N. Sierra Hwy., Lancaster CA. for more information please visit www.avroundup.com

35th South Bay Family Roundup

Friday 08/30/2019 – Sunday 09/01/2019
At the Torrance Marriott South Bay, 3635 Fashion Way, Torrance, CA. For more information please contact the Hotline 310-354-7660.

Service Summer Camp

Friday 08/30/2019 – Sunday 09/01/2019
At the Idyllwild Pines Camp & Conference Center, 26375 CA-243, Idyllwild-Pine Cove, CA.

Recovery Happens

Wednesday 09/04/2019 at 11:00 AM
At 1315 10th Street, West Steps of the State Capitol, Sacramento, CA. For more information please visit <http://recoveryhappens.info/#committee>

One More Ride + Opioid Epidemic Awareness Event

Saturday 09/28/2019 at 9:00 AM
At the Coronado Beach Harley-Davidson, 3201 Hoover Avenue, National City, CA. For more information please visit <https://www.eventbrite.com/e/one-more-ride-opioid-epidemic-awareness-event-registration-62865570614>

Arizona State Convention of A.A.

Friday 09/13/2019 – Sunday 09/15/2019
At the Riverside Resort Hotel And Casino, 650 S. Casino Dr. Laughlin, NV.

Woman to Woman San Diego

Friday 09/27/2019 – Sunday 09/29/2019
At the The Dana on Mission Bay, 1710 W Mission Bay Dr, San Diego CA.

68th Southern California AA Convention

Friday 09/27/2019 – Sunday 09/29/2019
At the Westin Mission Hills Resort & Spa, 71333 Dinah Shore Dr., Rancho Mirage, CA.

To get your event listed free, email us at info@all4uraddiction.com

Arizona

2019 PMS Women's Spiritual Retreat

Friday 08/16/2019 – Sunday 08/18/2019

At Cabins on Strawberry Hill, 5306 N. Highway 87, Strawberry, AZ. For more information visit https://www.arizona-na.org/events/flyers/20190816_pms.pdf

SEAZNAC V Speaker Jam

Thursday 08/29/2019 at 6:00 PM

At the convention site, Hotel Tucson City Center, AZ. For more information visit www.natucson.org/convention.html

SEAZNAC V Labor Day Weekend

Friday 08/30/2019 – Sunday 09/01/2019

At the Hotel Tucson City Center, AZ. For more information please visit <http://www.natucson.org/convention.html>

18th Annual Sharp Creek Campout

Friday 08/30/2019 – Sunday 09/02/2019

At the SHARP CREEK Camp Site, AZ. For more information please visit https://www.arizona-na.org/events/flyers/20190830_sharp.pdf

Tribute to Oldtimers & Fallen Soldiers

Saturday 09/21/2019 at 6:00 PM

At 5360 E. Pima, Tucson, AZ. For more information visit http://www.natucson.org/event_flyers/FallenSoldiers-v3.png

Speaker Jam & Dance "The Language of the Heart"

Saturday 10/19/2019 at 4:00 PM

At 5360 E. Pima, Tucson, AZ. For more information visit www.natucson.org/event_flyers/HeartJamDance-Oct19.png

Suggestion Corner

Email us with any thoughts you may have for improving our publication.

We would love to hear from you!

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What Is Self-Esteem?

By Darlene Lahcer

Self-esteem is what we think of ourselves. When it's positive, we have confidence and self-respect. We're content with ourselves and our abilities, in who we are and our competence. Self-esteem is relatively stable and enduring, though it can fluctuate. Healthy self-esteem makes us resilient and hopeful about life.

Self-Esteem Impacts Everything

Self-esteem affects not only what we think, but also how we feel and behave. It has significant ramifications for our happiness and enjoyment of life. It considerably affects events in our life, including our relationships, our work and goals, and how we care for ourselves and our children. Although difficult events, such as a breakup, illness, or loss of income, may in the short term moderate our self-esteem. We soon rebound to think positively about ourselves and our future. Even when we fail, it doesn't diminish our self-esteem. People with healthy self-esteem credit themselves when things go right, and when they don't, they consider external causes and honestly evaluate their mistakes and shortcomings. Then they improve upon them.

Healthy vs. Impaired Self-Esteem

I prefer to use the terms healthy and impaired self-esteem, rather than high and low, because narcissists and conceited individuals who appear to have high self-esteem, actually don't. Theirs is inflated, compensates for shame and insecurity, and is often unrelated to reality. Boasting is an example because it indicates that the person is dependent on others' opinion of them and reveals impaired rather than healthy self-esteem. Thus, healthy self-esteem requires that we're able to honestly and realistically assess our strengths and weaknesses. We're not too concerned about others' opinions of us. When we accept our flaws without judgment, our self-acceptance goes beyond self-esteem.

Impaired self-esteem

Impaired self-esteem negatively impacts our ability to manage adversity and life's disappointments. All of our relationships are affected, including our relationship with ourselves. When our self-esteem is impaired, we feel insecure, compare ourselves to others, and doubt and criticize ourselves. We neither recognize our worth, nor honor and express our needs and wants. Instead, we may self-sacrifice, defer to others, or try to control them and/or their feelings toward us to feel better about ourselves. For example, we might people-please, manipulate, or devalue them, provoke jealousy, or restrict their association with others. Consciously or unconsciously, we devalue ourselves, including our positive skills and attributes, making us hyper-sensitive to criticism. We may also be afraid to try new things, because we might fail.

Symptoms of Healthy and Impaired Self-Esteem

The following chart lists symptoms that reflect healthy vs. impaired self-esteem. Remember that self-esteem varies on a continuum. It's not black or white. You may relate to some, but not all.

Healthy Self Esteem

Know you're okay
Know you have value and matter
Feel competent and confident
Like yourself
Exhibit honesty and integrity
Trust yourself
Accept praise
Accept attention
Are self-responsible; honor self
Have internal locus of control
Self-efficacy to pursue goals
Have self-respect
Have self-compassion
Happy for others good fortune
Acceptance of others
Satisfied in relationships
Assertive

Optimistic
Welcome feedback

Impaired Self-Esteem

Feel not enough; always improving yourself
Lack self-worth and value; feel unimportant
Doubt self, feel incompetent, and afraid to risk
Judge and dislike yourself
Please, hide, and agree with others
Indecisive, ask others' opinions
Deflect or distrust praise
Avoid, dislike attention
Discount feelings, wants, or needs
Need others' guidance or approval
Afraid to start and do things
Allow abuse; put others first
Self-judgment, self-loathing
Envy and compare yourself to others
Judge others
Satisfied in relationships
Unhappy in relationships
Defer to others, indirect and afraid to express yourself
Feel anxious and pessimistic
Defensive of real or perceived criticism

Cause of Impaired Self-Esteem

Growing up in a dysfunctional family can lead to codependency as an adult. It also weakens your self-esteem. Often you don't have a voice. Your opinions and desires aren't taken seriously. Parents usually have low self-esteem and are unhappy with each other. They themselves neither have, nor model good relationship skills, including cooperation, healthy boundaries, assertiveness, and conflict resolution. They may be abusive, controlling, interfering, manipulative, indifferent, inconsistent, or just preoccupied. Directly or indirectly, they may shame their children's feelings and personal traits, feelings, and needs. It's not safe to be, to trust, and to express themselves.

Children feel insecure, anxious, and/or angry. As a result, they feel emotionally abandoned and conclude that they are at fault—not good enough to be acceptable to both parents. (They might still believe that they're loved.) Eventually,

they don't like themselves and feel inferior or inadequate. They grow up codependent with low self-esteem and learn to hide their feelings, walk on eggshells, withdraw, and try to please or become aggressive. This reflects how toxic shame becomes internalized.

Shame

Shame runs deeper than self-esteem. It's a profoundly painful emotion rather than a mental evaluation. Underlying toxic shame can lead to impaired or low self-esteem and other negative thoughts and feelings. It's not just that we lack confidence, but we might believe that we're bad, worthless, inferior, or unlovable. It creates feelings of false guilt and fear and hopelessness, at times, and feeling irredeemable. Shame is a major cause of depression and can lead to self-destructive behavior, eating disorders, addiction, and aggression.

Shame causes shame anxiety about anticipating shame in the future, usually in the form of rejection or judgment by other people. Shame anxiety makes it difficult to try new things, have intimate relationships, be spontaneous, or take risks. Sometimes, we don't realize that it's not others' judgments or rejection we fear, but our failure to meet our own unrealistic standards. We judge ourselves harshly for mistakes than others would. This pattern is very self-destructive with perfectionists. Our self-judgment can paralyze us so that we're indecisive, because our internal critic will judge us no matter what we decide!

Relationships

Our relationship with ourselves provides a template for our relationships with others. It impacts our relationships happiness. Self-esteem determines our communication style, boundaries, and our ability to be intimate. Research indicates that a partner with healthy self-esteem can positively influence his or her partner's self-esteem, but also shows that low self-esteem portends a negative outcome for the relationship. This can become a self-reinforcing cycle of abandonment lowering self-esteem.

Autonomy

Self-esteem is necessary if we're to feel autonomous, adequate, and comfortable on our own. Without autonomy, we become reactive and defensive. When we aren't, we're too dependent upon others, hide our true feelings, react to things personally and negatively, and have to control or manipulate our loved ones to feel secure and get our needs met. This spells disaster in relationships. Neither partner feels free to be him or herself.

Assertiveness

Self-esteem and assertiveness go hand-in-hand. Each reinforces the others. Learning to be assertive lifts our self-esteem and vice-versa. Assertiveness helps us to speak up, express ourselves, ask for your needs, and set boundaries, all of which are necessary for a healthy, successful relationship, and also why self-esteem improves relationship quality and satisfaction.

Intimacy

Thus, all three ingredients are necessary for true intimacy, which entails self-esteem and the ability to risk being authentic and vulnerable. This makes it safe for both partners to be open and honest. When our ability to speak up about our wants and needs and share vulnerable feelings is compromised, honesty and intimacy suffer.

Attachment style

As a result of insecurity, shame, and impaired self-esteem, as children, we may have developed an attachment style that, to varying degrees, is anxious

or avoidant and makes intimacy challenging. We pursue or distance ourselves from our partner and are usually attracted to someone who also has an insecure attachment style.

Abuse

Generally, we allow others to treat us in the manner in which we believe we deserve. When we don't respect ourselves, we won't expect to be treated with respect. When we don't value our feelings and needs, allow abuse, and lack the courage to reveal them. We remain unhappy, feel resentment, or might blame or withdraw. We might accept abuse or withhold behavior.

Self-sacrifice and imbalance

Similarly, we may give more than we receive in our relationships and overdo at work. Our inner critic can be judgmental of others, too. When we're critical of our partner or highly defensive, it makes it difficult to problem-solve. Insecure self-esteem can also make us suspicious, needy, or demanding of our partner.

Raising Self-Esteem

Self-esteem is generally determined by our teens. Some of us struggle all our lives with impaired self-esteem and even the resulting depression. But we can change and build healthy self-esteem. Raising self-esteem means getting to know and love yourself – building a relationship, as you would with a friend – and becoming your own best friend. This takes attentive listening, quiet time, and commitment. The alternative is to be lost at sea, continually trying to prove or improve yourself or win someone's love, while never feeling truly lovable or enough – like something is missing.

It's difficult to get outside our own thoughts and beliefs to see ourselves from another perspective. Therapy can help us change how we think, act, and what we believe. Many times, one partner in individual therapy makes positive changes, and the relationship changes for the better. Cognitive behavioral therapy has been shown to raise self-esteem. It's more powerful when combined with meditation that increases self-awareness. On your own, you can follow the guidelines in *How to Raise Your Self-Esteem*. Some things you can do:

Recognize the Signs. Be able to spot clues that your self-esteem needs uplifting. Many people think they have good self-esteem. They may be talented, beautiful, or successful, but still lack self-esteem.

Root Out False Beliefs. Learn how to identify and deprogram false beliefs and behaviors you want to change and those you want to implement.

Identify Cognitive Distortions. Impaired self-esteem can cause us to skew and distort reality. Learn to identify and challenge your cognitive distortions.

Journal. Journaling has been shown to elevate mood and decrease depression. Keeping a journal can also help you to monitor your interactions with others and your negative self-talk. To change your self-talk, see my ebook on overcoming self-criticism, *10 Steps to Self-Esteem: The Ultimate Guide to Stop Self-Criticism*.

Heal Toxic Shame. If you believe you suffer from codependency and shame, learn more about it and do the exercises in *Conquering Shame and Codependency*.

www.whatiscodependency.com

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The Difference Between Cross Addiction & Dual-Diagnosis

By *Synonymous*

People confuse the meanings of cross addiction and dual-diagnosis disorder. They are separate concepts. Cross addiction means an individual who has a substance abuse disorder and they are more than likely at a higher risk to develop an addiction to another substance; whereas, an individual with a dual-diagnosis disorder has one or more psychological disorders combined with a substance abuse disorder.

Addiction is a serious disease that many people struggle with on a daily basis. Many addicts have a cross addiction, or a dual-diagnosis, and it is harder for them to recover; therefore, keeping them in active addiction longer. There are even some studies that indicate that as many as half of individuals with a drug or alcohol addiction can also have some form of mental illness, which means that these types of addicts are not rare. The combination of cross addiction and dual-diagnoses possibilities are almost endless.

Cross Addiction

People who end up moving from one addiction to another addiction, or may start abusing another substance while trying to recover from an already active addiction, that person ends up developing a cross addiction. People struggling with one addiction oftentimes relapse by choosing a new drug of choice because they feel it is “safer” or they think they can control their new drug of choice.

For example (1), someone who is addicted to alcohol may use prescription painkillers, thinking that this choice is “safer” because a doctor prescribed them, and then over time they find themselves addicted to these prescriptions; whereas, on the other hand, it’s common for a person to abuse a substance that has similar effects to the original substance of abuse. For instance (2), a person who is addicted to heroin might start abusing prescription painkillers, or a person who was originally addicted to

cocaine may abuse a different stimulant, such as a prescription amphetamine, and they will abuse that drug in place of their previous drug of choice. These two examples are examples of cross addiction.

Dual-Diagnosis Disorders

People with dual-diagnosis disorders have a mental illness, such as anxiety or panic disorders, PTSD (Post-Traumatic Stress Disorder), ADHD (Attention Deficit Hyperactivity Disorder), depression, or bipolar disorder. When people with dual-diagnosis disorders combine their disorder with a drug or alcohol addiction, they can become difficult to treat, and until that individual has detoxed from all substances, there is no way to know whether the alcohol/drug addiction, or the individual’s mental illness, is causing the problem.

Substance abuse disorders include excessive use of alcohol, opioids, prescription drugs (barbiturates, benzodiazepines, sleep aids), Dextromethorphan (DXM) (found in cough syrups), cocaine, cannabis (marijuana), amphetamines or methamphetamines (such as meth), hallucinogens, phencyclidine (PCP or Angel dust), or any other mind-altering substance.

Impulse-control disorders can include Intermittent Explosive Disorder (compulsive outbursts of anger, Kleptomania (compulsive stealing), Pyromania (compulsive setting of fires), compulsive gambling, Trichotillomania (compulsive twirling and pulling of the hair and sometimes the urge to eat the hair), or Unspecified Impulse-Control Disorder (an individual with various impulse-control disorders, not being able single out one particular disorder because many are evident), just to name a few.

Behavioral addictions can include any of the following behaviors that a person does in excess: working, exercising, shopping,

eating, sex, pornography, using a computer compulsively, such as “surfing the Internet” or playing video games, being excessively spiritual or religiously devoted.

Treatment Centers

Cross addiction, and dual-diagnosis disorders, can come in many forms and can be difficult to treat if an individual goes to a rehabilitation facility that is not equipped with psychiatric staff that is on-hand and is ready to deal with individuals who have this diagnosis.

Treatment centers that deal with substance addiction and mental illnesses are more successful with their cross addiction and dual-diagnosis patients in the recovery process. By combining medication therapy and group therapy for the treatment of a substance addiction and for a mental health disorder is not only effective but imperative because not only is an individual abstaining from controlled substances but they are being prescribed medication for the treatment of their mental health disorder. Treating both addictions this way helps clients realize their unique relapse triggers, such as panic attacks, mood swings, or even depression.

But keep in mind, even if the treatment center has psychiatric staff and on-hand medications, there is no “quick fix”. Individuals



who have a dual-diagnosis may have to be under psychiatric care for months, or even years, because the program is designed to fit the individual's pace. A supportive rehabilitation team specializing in dual disorders and one-on-one treatment are essential because trying to face a mental health disorder can be overwhelming, especially when in recovery.

Treatment Strategies

Residential Treatment Programs: Supervised, structural support in a residential setting may help ease and remove the stresses and triggers of your past normal, daily environment.

Outpatient Treatment Programs: Many rehabilitation facilities offer alternatives for patients who don't need 24-hour supervision. Those individuals with work commitments, outpatient care may be the best way to get the proper treatment without interrupting their important life routines.

Medication Therapy: Medications, such as antidepressants, anti-psychotic medications, and anti-anxiety drugs, are often prescribed as part of a dual-diagnosis disorder. Also, anti-addiction medications are also useful when prescribed to individuals; thereby, minimizing cravings and withdrawal symptoms.

Individual Therapy: Individual therapy for dual-diagnosis disorders build motivation, identify self-destructive feelings and thoughts,

and help an individual learn new positive behaviors, reinforcing the client's sense of self-worth, and, by combating an individual's dual-diagnosis through this therapy, may prevent future relapses.

Support Groups: When an individual combines alcohol or drugs with a mental disorder, isolation can become a problem and get worse over time. Support groups, such as 12-step programs and aftercare programs and other recovery resources, during the rehabilitation process and after discharge from these programs, are imperative because an individual needs to grow and evolve in their recovery.

Transitional Housing: Halfway houses can offer detox, and rehabilitation graduates, a secure and structured environment to teach an individual how to live and find ways to still live a healthy and stable lifestyle and minimize their chance of a relapse.

Education and Counselling for Families of Loved Ones: Families of a loved one with a dual-diagnosis of a substance abuse and mental illness problem, can tear families apart because they are frustrated and heartbroken and they don't know what to do to help their loved one. Being educated and finding support groups with people with similar problems can make all the difference in the world when finding a way to cope and deal with dual-diagnosis individuals.



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What Are The Top 10 Drug Rehab Marketing Blog Mistakes?

By Charles Davis

Drug rehab SEO blog writing is a vital area that many addiction treatment centers are missing. Above all, a blog has one main purpose and that is to generate leads. Similarly, it is the most important web marketing tool. Many drug rehabilitation centers are missing the big picture when it comes to their blog.

The Main Goal of Drug Rehab SEO Blogs

The behavioral health industry has operated for years with short-term solutions in generating clients. CEO and marketing directors expect immediate results. This is because they have been able to get by with Google Adwords and buying treatment calls. The business and marketing landscape have changed. The mentality of buying or obtaining a singular thing to generate immediate calls is gone.

Ranking organically on Google for keywords is one of the biggest area's centers can generate treatment leads. However, understanding of SEO is paramount. Google uses over 200 things to rank for SEO. Think of Google as the most popular kid at school. The first thing you have to do is introduce yourself. After that, you have to become friends and let Google get to know you. Then you need to get intimate, so Google knows everything about you. The only way to do that is through content.

The main goal of blogs is to get your target audience to read it. The #1 way to accomplish this is to get your blog posts on page one of Google. However, it takes many specific components to achieve this status. This is also the best way to compete against the big players.

We look at substance abuse treatment centers websites every day. Over half of them do not even have a blog. Out of the remaining, only a few have any search engine optimization. Just throwing up a 600-800 word blog post has very little chance of ranking. A blog needs to be strategically built to rank.

Wasted Marketing Budget on AdWords and Legit Script

Remember the big picture is to get ranked organically on page one of Google for the long-tail keyword. Getting on page one could mean 1000's of high quality and targeted organic calls. Many centers think the only way to accomplish this is through AdWords and PPC. They could save big money if they spoke with a drug rehab SEO marketing consultant.

There is a high cost to play in that game. You have the initial Legit Script certification, then an annual fee. The bigger picture is you are competing against big players spending in excess of \$500,000 per month. In addition, you have to pay over and over again for the leads. Once you get organically on page one, you tend to stay there for a long time.

AdWords and PPC will produce calls however, their quality is generally poor. A small budget of \$5000 – \$10,000 a month will get eaten up quickly. A fraction of the budget would be better spent on organically ranking. In addition, with AdWords, you tend to get a lot of Medicaid and Medicare calls. Consider this, PPC ads on page one only receives 1.81% of the click-throughs. The Google Maps and top three organic listings get 60-70% of page one clicks.

The #1 mistake made in our industry is treatment centers produce blogs that are all about them. This not only shows through on their blogs but also with their poor social media marketing. You need high-quality content that is valuable to the reader. If your blog is poor, then your web marketing strategy is poor.

Top 10 Mistakes Made with Drug Rehab SEO Blog Writing

What are the top 10 mistakes made with drug rehab SEO blog writing? CEO's and Marketing Directors tend not to completely understand the common mistakes made with their blog. You may also be interested in the common mistakes made in drug rehab SEO website

development. In addition, you must be aware that blogs should touch the reader on an emotional level. If the blog post is attracting, engaging and touches on that level, chances are high they will call.

1. Google My Business Listing is incomplete and not updated regularly.
2. A long-tail keyword is not in the URL.
3. The long-tail keyword is not the blog title.
4. Improper use H Tags (H1, H2, H3, etc...)
5. ALT descriptions are not completely filled in (main title, ALT title and 2 sentence description with the keyword.
6. SERP description should be 160 characters and include the long-tail keyword.
7. Blog posts are too short, they should be at least 1,500 words.
8. Content is not attracting and engaging to the reader (blogs are not about the services offered by the center.)
9. LSI words are not used.
10. Too many orphaned posts.

Take Inventory of Blog Posts and Where They Rank on Google

Get an SEO keyword report for your treatment center. If you cannot do this, give us a call at 561-235-6195 and we will run one for you. This report will show how many words your center is ranking for and what pages they are on. It is often best to have a third party provide this information. Having this report will provide valuable intelligence on the effectiveness of your marketing. This report will also aid in finding out what your competition is doing with their drug rehab SEO marketing strategy. Some savvy operators are raking in organic rankings because many centers are not utilizing SEO. You should at the very least be ranking for your main services followed by the city your center is located in. Here are just a few you should be ranking for, there are many more. Try and Google some of the following:

- drug rehabs (followed by your city)
- inpatient drug rehabs (followed by your city)
- outpatient drug rehabs (followed by your city)

- intensive outpatient drug rehabs (followed by your city)
- sober homes (followed by your city)

Leading by Example with our Drug Rehab SEO Marketing and Blog Writing

Behavioral Health Network Resources leads by example with our drug rehab SEO blog writing. Our organization ranks for over 750 keywords. Some of these keywords are for marketing like drug rehab SEO and drug rehab marketing.

We also purposely rank for keywords that centers need to rank for. Ranking for keywords on services your website doesn't offer is more difficult. Below is a list of some ranking keywords for our organization and our customers:

- drug rehabs West Palm Beach (Behavioral Health Network Resources)
- opiate detox West Palm Beach (Behavioral Health Network Resources)
- sober homes West Palm Beach (Behavioral Health Network Resources)
- California drug rehabs (Behavioral Health Network Resources)
- drug rehabs New Jersey (SOBA College Recovery)
- young adult drug rehabs New Jersey (SOBA College Recovery)
- outpatient drug rehabs New Jersey (SOBA College Recovery)
- drug rehabs Los Angeles
- substance abuse billing (Behavioral Health Network Resources and Advanced Data Systems Corp)
- drug rehabs in Florida

These are all highly competitive keywords in large markets. Getting these profiles and blogs to rank is no easy feat. It takes strategically built blogs with distribution channels to get them to rank.

Addiction Conferences Educating on Business and Drug Rehab Marketing

We educate CEO's, Executives, and Directors on ethical business and marketing strategies. Our Addiction Conferences EMP series has held 15 c-suite conferences. These conferences provide proven strategies and techniques to survive the changes in our industry.

Each behavioral health event has 5 Executive thought leader panelists. The conferences are in a talk show host/town hall forum. We interview the panelists in front of our audiences of 100-200 attendees. We then turn over the event to the entire audience. They have been successful because they get to the operating pain points of treatment center operators.

Our next addiction conferences EMP Series event is in California on 8/6/19. The Recover is Co-host, and Rehab Marketing Pros is Co-hosting. For more information go to <https://www.benbehavioralhealthnetworkresources.com>, or call Charles Davis at 561-235-6195. Blog Content Relates to Lead Generation We get 100's of posting requests in our 60 social media groups every day. These groups have in excess of 210,000 members. They are on LinkedIn (12 groups and Facebook 40 groups.) These groups are unlike other groups in that we check all the posts before we approve of them. We do not let poor quality posts through. The content we do approve must be of high quality. They must be on a website and provide value to the reader. Check out our Facebook leading addiction professional referral group with over 19,000 members.

Many outreach professionals are attempting to post poor quality content. This does not produce calls and also damages the brand of the organization. Some of the poor-quality posts include:

- memes
- any posts that do not link through to a website
- we are an intensive outpatient treatment center and JACHO accredited
- we have beds available
- telling a story not linked to a website or blog and saying CALL XXX-XXX-XXXX, I can help.

These are only a few examples there are many more. Part of the problem is the management doesn't respect or understand how to use drug rehab social media marketing. Providing marketing tools and

developing a plan with all employees plays a critical role. Part of that is the blog writing MUST be attracting and engaging while hitting the pain point.

Learn More About Our Drug Rehab SEO Marketing Blog Writing Service

The behavioral health industry has experienced many business, operational and marketing changes over the last 12 months. Drug and alcohol addiction treatment centers are closing because they refused to change. They thought they could continue to operate without a detailed marketing plan. They thought they could survive with just boots on the ground tactics and Google AdWords. Relying only solely on these is extremely risky

Search engine optimization takes time and is a long-term strategy. We get many calls where the CEO or Marketing Director has waited too long. They are 30-60 days away from closing their doors or being forced to merge with another company.

Our drug rehab SEO blog writing service provides high-quality 1,500-word blog posts. These posts will be specific to your target keywords. We can also repurpose existing blogs and enable SEO.

We also have a 90-day SEO program that increases your SEO and teaches you how to perform search engine optimization. Give our CEO, Charles Davis a call at 561-235-6195 and let's chat about getting your center organically on page one of Google.



RECOGNIZING RELAPSE MODE

By Synonymous

Addiction is a chronic disease that cannot be cured. It never goes away. Maintaining a life in recovery is often an everyday struggle, and it must be dealt with on a daily basis. The longer an individual is in recovery, the easier it can be to deal with the disease of addiction, but the occasional craving does happen, so it can be dangerous when a person who is an addict gets complacent or comfortable in their recovery. Oftentimes, they begin to stop working on their recovery and this could backfire on them and they begin working on their next relapse. Once relapse occurs, it is difficult for the addict to get back onto the road of recovery because the desire to continue using can be overpowering.

Individuals that are recovering from any kind of addiction often experience at least one relapse, and this can be especially dangerous for someone who has abstained from using drugs for ANY length of time because that individual loses their tolerance for the drug and may end up taking the previous accustomed amount that they consumed at the height of their addiction and the end result could result in an overdose or even death.



Know the Stages of Relapse

Stage One: Denial – The addict pretends that everything is okay.

Stage Two: Avoidance and Defensive Behavior – The addict avoids thinking about their own situation and starts focusing on others. The addict starts being defensive or starts lying when questioned about things in their past or present. They may also start to feel lonely, even though they are surrounded by people.

Stage Three: Depression – Feeling lonely or left out, addicts may start feeling depressed and start developing irregular eating and sleeping patterns. When an individual starts to feel more and more lethargic, they may start abandoning daily responsibilities by making plans and not following through with them; therefore, isolating themselves further from others.

Stage Four: Behavioral Loss of Control – As the addict's depression progresses, isolation becomes more prevalent. The addict will begin to skip group support meetings or after-care treatment meetings; therefore, they stop caring about recovery or anything else happening in their lives. Beginning to feel powerless, or helpless, starts a spiral effect of turning to other things not recovery related to make themselves feel better. The addict turns to destructive-type behavior not conducive to a healthy lifestyle, thinking that this destructive behavior will not hold a serious consequence.

For example, overeating, sleeping too much, turning to the opposite sex for validation, or turning to anything, in general, to dull or numb the pain of everyday life and everyday problems. This eventually leads to fear, anger, resentment, and eventually a total loss of control where finally the physical relapse occurs.

Stage Five: Physical Relapse – Once the addict consumes the substance of their choice, by using just that ONE TIME, it can result in INTENSE cravings and the UNCONTROLLABLE desire to continue to use. At this point, an intervention is necessary for the addict because the disease has taken over again. The addict begins to

feel even more lonely, even more stressed out, and even more unfulfilled, and they begin to think that their future is hopeless, that they are unworthy of others. This downward spiral of physical relapse brings shame and guilt resulting in a relapse heading into days, weeks, or even years, of uncontrollable using.

By letting the addict know that it is not the end of the world, that they can get themselves back on track, is vital to convincing an addict to seek help by going to meetings, calling their support network, or maybe even admitting themselves into a treatment program.

Warning Signs that a Relapse is Occurring

It is easy for an addicted individual to only remember the positive parts of their drug use; thereby romanticizing their past experience, and then war-storying about them and forgetting all the anguish it may have caused them. Addicts change their people, places, and things in order to recover, but once they start revisiting their old relationships that they were involved with during their drug use and romanticizing their past experiences, it becomes harder and harder to stay on the path of recovery and relapse becomes inevitable.

After depression starts to set in, an individual will begin to avoid their interests and hobbies that they developed in recovery. The depression then gets worse with their increased isolation and avoidance of their support system. The individual may then start speaking negatively about the recovery process and start looking down on those individuals in recovery. This is a sure indicator that they are on their way to relapse

What an Individual Can Do if They Feel They are in Relapse Mode

Don't act impulsively. Wait for approximately 30 minutes and try to distract yourself by thinking or doing other things, like watching a television show or taking a walk or calling someone in your recovery network, like your sponsor or another friend in recovery. Passing the time this way can help diminish the craving of wanting to use, and when practicing this method, the cravings may start to go away quicker and easier.

Thinking about the actions and consequences of just using that one time is also a good distraction. Playing the scenario through to the end of the consequences of relapsing, such as the inability to stop using once started, the shame and guilt,

and the rock bottom you will hit, if not the same one, then a deeper rock bottom.

Stay in today, one day at a time. Don't worry about tomorrow. Pray to your Higher Power. Many people with years in recovery still struggle one day at a time. You are not alone. Thinking of recovery in terms of length can be too overwhelming for an individual that is fresh in recovery. They get intimidated or overwhelmed and end up relapsing.

If you are having a hard time with living in recovery one day at a time, try living in recovery one minute at a time. By living this way, you will surprise yourself how your time in recovery adds up, day by day, month by month, then year by year.

Boredom is a trigger for many individuals. The following are things that you can do to keep yourself on the right track in recovery to keep yourself from staying too much in your head and letting your disease fester, ultimately causing a relapse.

Things to Do in Recovery That Can Help Keep You on the Right Track

Arts and Crafts - Expressive hobbies such as music, dancing, painting or sculpting, writing, or any creative type of craft that your brain can think of, are great coping methods and serve as an outlet for frustration or anger or depression.

Entertainment - Watching television or physically going to the movie theater or attending any type of show is a good way to enrich your mind and stay away from any negativity that you may be experiencing.

Social Activities/Games/Sports - Although, it's important to be social, it is more important to socialize with the right people. Playing board games, along with social activities through games like sports, are a positive way of not only distracting your mind, but also by getting the exercise your body needs and getting the socialization that your mind needs at the same time.

Become Useful - Getting busy doing chores around the house, or starting or finishing a project around the house, is a great way to keep your brain preoccupied.

Reading - Reading is another way to keep your brain occupied and to expand your mind.

Volunteering - By volunteering, this activity helps you while you help others.

Remember that relapsing doesn't mean failure in your recovery, it can also mean growth, but what you decide to do after relapsing determines your future. Allow yourself to feel your feelings. After all, they are YOUR feelings. Don't isolate yourself. Talk to someone. Let someone know how you are feeling, what you are thinking. Talk about the reason you have relapsed, or if you haven't relapsed, talk about the reasons that you FEEL like relapsing.

There is ALWAYS a way back into recovery. Recovery is a process. After all, all of those in recovery take life on life's terms and take their recovery step-by-step, day-by-day. Surround yourself with positive influences and seek additional treatment, if needed.

Remember, it is part of our program to help those who are in need, especially when they are in relapse mode, but when you have done everything that you can possibly think of to help someone, and it doesn't seem to be working, take a step back and continue to take care of yourself in order for you to keep YOUR recovery.

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