

ROAD TO RECOVERY NEWSLETTER

Created by Dual Recovery at Warren Washington Association for Mental Health to support individuals in recovery

A DAY IN THE LIFE OF A Woman in Recovery

BY AMY JOHNSON

I consider it a real honor to be able to share my experience, strength, and hope with all of you. My goals have always been to connect and relate to my peers, as well as to help others who do not struggle with mental health and substance use disorders understand it better from the perspective of someone who deals with both daily. However, I have not spoken about my experience with medication-assisted treatment (MAT), specifically suboxone, in part because it is a highly personal decision, but also because it tends to be somewhat of a hot button issue that people have strong opinions about (see Hot Topic segment). But, it is important to me to share my experience about suboxone, especially since it has been such an integral part of my recovery.

Going on suboxone was not an easy decision for me. I worried I was just swapping one drug for another and questioned if I could really consider myself sober if I did. But this was truly a decision between life or death for me. I was using both opioids and benzodiazepines so heavily that my life was in jeopardy on a daily basis. I wanted more than anything to get better and suboxone has really helped me to overcome major hurdles in my recovery. I take it just like I would any of my other medications. It does not create a euphoric feeling, nor does it get me high in any way. At this point in my recovery, I use suboxone to help manage cravings and maintain my sobriety. In the beginning, suboxone played a crucial role in opioid detox and post-acute withdrawal symptoms. I was unable to go more than a day or two without opioids prior to taking suboxone because of how intense the acute and post-acute withdrawals were for me. I credit Suboxone as one of the major reasons I have been able to get sober and turn my life around. It may not be a medication that is for everyone, but the benefits have far exceeded any risks for me, and I could not be more grateful.

**INTERESTED IN SHARING A PIECE OF YOUR RECOVERY STORY?
PLEASE CONTACT REBECCA RYAN AT RRYAN@WWAMH.ORG**

IN THIS ISSUE:

**A DAY IN THE LIFE OF
A Woman in Recovery**

PAGE 01

**HEALTH & WELLNESS
Self-Care: More Important
Than Ever**

PAGE 02

**HOT TOPIC OF THE MONTH
Medication-Assisted Treatment**

PAGE 03-04

**LIFESTYLES
Be Your Own Valentine**

PAGE 04

**COMMUNITY UPDATES
& RESOURCES**

PAGE 05



HEALTH & WELLNESS

Self-Care: More Important Than Ever

BY AMY JOHNSON

I have spoken about the importance of self-care before, but it is certainly a worthy topic to revisit. Self-care is one of the best things you can do to help you be the best version of yourself. It also works wonders to reduce stress and calm the mind. Self-care often involves trying different things and finding what works best for your body and mind to function optimally. But sometimes we find ourselves in a rut and need some inspiration to get motivated. So, here are some self-care practices that I am absolutely loving right now:

HAVING A ROUTINE:

Developing a solid routine of any kind can be beneficial. It helps you know what to expect and can increase your productivity. Studies show that even just getting out of your pajamas and dressed for the day will elevate your mood. I find that taking the time each morning and night on a consistent basis to practice a good beauty and skincare routine really helps me feel pampered and at my best. It is also something I look forward to that boosts my confidence and self-esteem.

GUIDED MEDITATION:

Meditation and deep breathing exercises are self-care practices I always find myself going back to, especially in times of great stress and anxiety. I used to only listen to guided meditation in the evenings to help relax and prepare for sleep, but I have recently incorporated a short session in the morning as well. The first thing I used to do when I woke up in the morning is get on my phone, but now I dedicate the first half-hour or so to meditating, which helps clear my mind and put me in the best frame of mind to tackle the day.

MUSIC:

Simply put, music is good for the soul. Not to mention there is an abundance of research out there that shows music is beneficial to your mental health and increases dopamine levels in the brain. I took the time recently to create an AM and PM playlist that has the power to transform my mood from upbeat and energized to relaxed and calm. I continue to explore different genres of music and ways to positively incorporate it into my life. What are some of your favorite ways to practice self-care?



SELF-CARE
comes first



HOT TOPIC OF THE MONTH

Medication-Assisted Treatment

BY AMY JOHNSON

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), medication-assisted treatment (MAT) is the use of medications in combination with counseling and behavioral therapies to provide a “whole patient” approach to the treatment of substance use disorder (SUD). In addition to suboxone, there are also other medications that have been approved by the Food and Drug Administration (FDA) that are commonly used to help reduce withdrawal symptoms and cravings associated with alcohol and opioid use disorders. Federal law requires that all individuals receiving MAT must be in counseling, which includes different forms of behavioral therapies. If you or someone you know is interested in learning more about MAT or where you can find a provider, call SAMHSA at 240-276-2700 or visit <https://www.samhsa.gov/>.

The Suboxone Debate

Suboxone is the brand name for a prescription drug that is used to treat opioid addiction. It contains the ingredients buprenorphine, which is a partial opioid agonist that works by blocking opiate receptors in the brain and reducing cravings, and naloxone, which helps reverse the effects of opioids. The two drugs work in tandem to reduce withdrawal symptoms and cravings associated with opioid addiction. According to the National Center for Biotechnology Information, suboxone was approved by the FDA in 2002 and between 2003 and 2013, prescriptions for Suboxone increased from 150,000 to 2.1 million. There are over 9 million



individuals on Suboxone in this country today. Whether or not to go on a suboxone maintained program is one of the biggest questions people with opioid use disorder (OUD) face when trying to get sober. Among addicts and addiction specialists alike, the answer to that question is sharply divided. Both sides make a compelling argument.

According to an article by Jennifer Matesa on thefix.com, those in support of long-term suboxone treatment view it as a much better alternative to a life of crime, unemployment, poverty, and the uncomfortable feelings associated with opioid withdrawal. It has also been found to really help with the chronic depression that can often follow detox. Furthermore, many providers of suboxone feel it can really help opioid addicted individuals engage better and stay longer in an addiction treatment program. Dr. Alan Leshner, former director of the National Institute of Drug Abuse (NIDA), believes, "Buprenorphine is the most important advance certainly in heroin and opiate treatment if not all addiction treatments in the last 30 years".

Colombia School of Medicine was the first suboxone program in the United States and reported an 88% success rate after just six months.



Suboxone Debate (Cont. from page 03)

On the other hand, those who oppose suboxone view its prolonged use as a looming disaster in the addiction treatment field with potentially devastating results. Many feel that switching from one opiate to another does nothing to heal the neurological aspects of addiction or get to the root psychological causes. Many also point out that anecdotal evidence does in fact suggest suboxone can be abused. Dr. Steven Scanian, psychiatrist and addiction specialist, agrees, stating, “The idea that the naloxone in suboxone prevents abuse is just dishonest advertising”.

As I mentioned before, both sides make very valid points which can cause things to get a bit confusing. However, the decision of whether to go on MAT is an extremely personal one and ultimately comes down to what you are comfortable with. It is important to educate yourself to help you understand all of your options and work closely with your providers to decide what is best for you.

LIFESTYLES Be Your Own Valentine



BY AMY JOHNSON

Dating in early recovery can be difficult waters to navigate and bring up a lot of emotions you may not be prepared to cope with. In fact, many treatment programs and addiction specialists discourage it and stress the importance of focusing on yourself during this trying time. For some, Valentine’s Day is a time to celebrate the love you share with another. For others, it can make being single feel depressing instead of empowering. Being newly sober and single on Valentine’s Day can pose a huge hurdle in your recovery and easily trigger a relapse. Do not let being single and lonely be an excuse to drown your sorrows with drugs and alcohol. Here are a few tips on how to have a fun and empowering Valentine’s Day.

SHARE THE LOVE:

Although Valentine’s Day is marketed to be all about romantic relationships, that does not have to be the case. Chances are your addiction negatively impacted your relationship with your loved ones so, use this holiday to show them how much you value and appreciate them. Even just a small gesture, like a thoughtful card, can go a long way and make you feel good about yourself as well.

PRACTICE SELF-LOVE:

I love a good self-care moment and Valentine’s Day is the perfect excuse to pamper and show yourself some serious love. Drugs and alcohol can take a huge toll on you mentally and physically and self-care can really aid in the healing process. Try an at-home spa day or maybe go for a nice leisurely nature walk. Another helpful tip is to write down everything you love about yourself and being sober.

LEAN ON YOUR SUPPORTS:

Having a reliable support system is an integral part of recovery regardless of the occasion but talking with others who are sober and single or attending a support group can help you feel connected and not so alone. Your first Valentine’s Day may be challenging, but it does not have to be isolating or lead to relapse.





COMMUNITY UPDATES & RESOURCES

FREE THERAPEUTIC NATURE OUTINGS

The Council for Prevention is now offering personalized healing experiences through winter activities such as hiking, snowshoeing, sledding, cross country skiing, and more. Whether you are looking for an intensive snowshoe through the High Peaks or a quiet solo sit by the river, their guides will work with you to build an experience that is suitable for your group. Anyone is welcome to participate and the maximum group size is 6 (all ages welcome). There is no cost to participate and some specialized gear will be provided. For more information or to sign up your group, contact Caitlin Righi at 518-538-9730 or caitlinrighi@councilforprevention.org.

LOCAL RECOVERY RESOURCES

Hope & Healing Center, Hudson Falls | Website: www.facebook.com/HopeAndHealingRCOC/ | Peer Support: 518-812-5813
Healing Springs, Saratoga | Website: www.sararecovery.org/healing-springs/ | Peer Support: 518-306-3048
AA Meeting Schedule: www.district13.aahmbny.org/ | AA Hotline: 518-793-1113
NA Meeting Schedule: www.abcdrna.org/ | NA Hotline: 888-399-5519

PLEASE VISIT WWW.WWAMH.ORG TO FIND A COPY OF OUR MONTHLY NEWSLETTER AND GROUP INFO FOR DUAL RECOVERY



THE DUAL RECOVERY TEAM



Amy Johnson



Amy began her journey with Warren Washington Association for Mental Health as a resident in treatment housing. Amy's experiences on her road to recovery led her to her current position as a Peer Specialist and she now celebrates over two years in recovery. Amy is very passionate about her role in supporting her peers in their recovery journeys and is excited to express some of that passion here within each newsletter. Amy has her bachelor degree in Childhood Education from SUNY Plattsburgh and she is also a Certified Recovery Coach. If you would like to get to know her more, or are in need of peer support, please feel free to reach out to her via email or phone.

 AJOHNSON@WWAMH.ORG
 518-401-5991

Rebecca Ryan



Rebecca is a Licensed Master Social Worker (LMSW) and has been working for Warren Washington Association for Mental Health since 2014. Rebecca became the Director of Dual Recovery in September of 2019 and has been eagerly exploring new ways to serve and support not only members, but the community at large. The purpose of this monthly newsletter is to provide you with some fun articles, personal stories, seasonal updates, and more that can hopefully help in each of your recovery journeys. Please feel free to reach out to Rebecca with any thoughts or ideas for future newsletters, or if you are interested in learning more about Dual Recovery. Happy reading!

 RRYAN@WWAMH.ORG
 518-793-2352 X265