

Contact Numbers

Serenity Lane
Alumni Office
10920 SW Barbur Blvd,
Portland, OR 97219

Information:
Shely Rahimi
503-244-4500 ext 8103
alumni@serenitylane.org

National Websites:

Alcoholics Anonymous (AA)
www.aa.org or
www.alcoholicsanonymous.org

Narcotics Anonymous (NA)
www.na.org

Cocaine Anonymous (CA)
www.ca.org

For Family & Friends:
Al-Anon & Alateen:
www.OregonAl-Anon.org

Adult Children of
Alcoholics (ACA)
www.adultchildren.org

Serenity Lane...
1-800-543-9905
www.serenitylane.org

Stepping Together

Summer
2011

Serenity Lane's Alumni Newsletter

Saving lives and helping put families back together since 1973

Love & Forgiveness



Love others as you love yourself.

Although these words are those that many recognize from the Christian Gospels and connect them with Jesus, this life rule is evident in a myriad of writings. As far back as the 12th Century BCE in Ancient Egypt this wisdom for life choices was enshrined in a scroll entitled, The Eloquent Peasant.

This law was included by the editors in the Hebrew Old Testament. The Golden Rule as it has been called is to be found in the writings of Socrates and Plato; Buddhism; Hinduism and Islam's Qur'an to choose just a few. It would seem from such wide spread, chronologically and geographically attestation that there is probably something to it.

Love is the very essence of life; but too often we have not allowed ourselves to feel it or we have not had the privilege of having it modeled for us. Love is not an accident. It can and must be cultivated. Love is discovered as we mentally focus our minds away from negative to positive thinking. In a logical progression of awareness and forgiveness the channel opens to the ultimate reachable goal of love.

Notice that we must begin in our quest for love with ourselves. The Rule says, "Love others as you love yourself." It is impossible to be aware of other persons without being cognizant of whom we are and how we fit into the world we are creating. Forgiving is impossible while you have not forgiven yourself. Respect for others presupposes awareness and forgiveness, and self-respect becomes self-evident.

The Cistercian monk, Thomas Merton writes: "There is only one true flight from the world; it is not an escape from conflict, anguish, and suffering, but the flight from disunity and separation, to unity and peace in the love of other men."

It then becomes our individual responsibility to be conscious, aware and forgiving so love, as it blossoms, cannot help us but make the choice for sobriety as the only loving option for ourselves and those with whom we share our lives. ■

by Kathleen Smith, R.N.
Director of Hospital Services,
Serenity Lane.





Newsletter Committee:

Shely Rahimi; Editor
Angie Delaplain; Graphic Design
Mary Daniels; Director

LETTER FROM THE EDITOR & ALUMNI COORDINATOR

"The only reward of virtue is virtue; the only way to have a friend is to be one."

– Ralph Waldo Emerson

Dear Alumni,

One of the most valuable resources in our psychological, spiritual and emotional well-being is friendship. Studies show that the impact of friendships can even outweigh the positive effects of one's relationship to a spouse or family member.

Solid friendships are essential to maintaining health and balance and are one of the most rewarding and comforting aspects of life. Meaningful connections bring about a sense of belonging and in times of crisis and times of joy, we know we can call upon this select group of people to share and enhance our experiences. For those estranged from their families, friends serve a vital role as the people to celebrate with and commiserate with.

While technology and the development of social networking make it possible to associate with people from all over the globe and rediscover lost relationships across your entire lifespan, it can also lead to more isolation and detachment from the physical world. It is important to create a time and space for face-to-face interactions and continue to be present, attentive and actively nurture the significant connections in your life.

In this spirit of camaraderie and unity, we are holding our annual alumni picnic in Eugene's Alton Baker Park on Sunday, August 28, 2011. I encourage you all to embrace this opportunity to come together and build lasting memories as we collectively rejoice in the extraordinary gift of recovery.

Friendships are the foundation of a strong support system. Surrounding yourself with caring and loyal people will give you the strength to handle any challenge, while also intensifying your appreciation of the simple beauty in life.

Sincerely,

Shely Rahimi

Shely Rahimi, Editor & Alumni Coordinator

Outpatient Happenings



• Eugene

Annual Alumni Picnic

- **WHEN:** Sunday, August 28.
- **WHERE:** Alton Baker Park, Shelter #2
- **TIME:** 1-4 pm
- **LUNCH:** The picnic will be catered again by Hole in the Wall BBQ. Lunch will be served from **1-3pm**. Desserts provided by our very own Serenity Lane kitchen.
- **ENTERTAINMENT:** will be provided for the whole family. Door prizes too! Pack up your family and come join the fun!



• Eugene

A group of recovery support patients and alumni have formed a support group in Eugene called "Bridging the Gap." If you are interested in participating you can call Craigen B. at 541-222-0867. They are anxious to expand the group.

• Portland East

SL's Portland/East office has moved across the parking lot. With much more square footage, we now have adequate space for expanded patient groups and more privacy for our counselors. The new address is:

SL Portland/East
12662 S.E. Stark
Plaza 125, Building A,
Portland, OR 97233

Autobiography in Five Short Chapters

by Portia Nelson

I walk down the street
There is a deep hole in the sidewalk.
I fall in, I am lost...I am helpless.
It isn't my fault.
It takes me forever to find my way out.

I walk down the same street.
There is a deep hole in the sidewalk.
I pretend I don't see it, I fall in again.
I can't believe I'm in the same place.
But it isn't my fault.
It still takes me a long time to get out.

I walk down the same street.
There is a deep hole in the sidewalk.
I see it there, I still fall in...It's a habit.
My eyes are open.
I know where I am.
It is my fault.
I get out immediately.

I walk down the same street.
There is a deep hole in the sidewalk.
I walk around it.

I walk down another street.

Preventing Relapse When You Need Surgery

By Peggy L. Ferguson, Ph.D.

You are ultimately responsible for your own addiction recovery. When you know that you have to have surgery, it is important to keep everyone treating you informed about your recovery and addiction history, including the names of the drugs, the amounts, the lengths of time that you took them, and your last use. You are responsible for asking a lot of questions of the medical team. Questions like the following are appropriate:

- **How long will surgery take?**
- **What is the procedure and what will it entail?**
- **What kinds of anesthesia will be administered?**
- **How long will I need pain medications after surgery?**
- **What kinds of pain medications do you usually prescribe for post-op?**
- **What kinds of different choices for pain medications are available to recovering addicts who are concerned about having their addiction triggered?**
- **What doctors will I be working with for post-op procedures and checkups?**

Make sure that all the medical professionals that you are working with understand that you are an alcoholic/addict in recovery. Maintain complete honesty all the way through the process. If you are scared, say it. If you are given a medication that has a mood/mind altering effect, or has triggered some euphoric recall or craving, tell them. Your feedback on how you are reacting each step of the way can help inform your medical team in the most beneficial ways and additionally be most protective of your continuing recovery.

It is also crucial to be completely honest and communicative to those in your support network. When planning surgery, consult with your AA/NA friends or buddies who have already experienced what you are going through. Talk to the old guys/gals in the group, even if you don't normally hang out with them. Ask them whether they have been through it or been witness to others going through it. Ask for any recommendations that they may have.

Recovery wisdom encourages any recovering persons going through surgery to have as many "program" folks

around him/her as possible for support. This means having people in recovery doing a kind of "babysitting" with you, not around the clock, but "checking in and checking on." Be honest with them about what you are thinking, feeling, and doing.

When you feel lousy, you probably won't want a lot of company. Do it anyway. This is when you need it most. After you go home, you may still be on pain medications. It is crucial that you give your pain medications to someone else to dispense to you. This may be a spouse, a sponsor, a nursing service, but someone other than you should be in charge of the medications. You may think that you are not vulnerable for relapse, since you feel confident. Not wanting to relapse is insufficient to prevent relapse.

Giving control of the pain medications to someone else may feel completely unjustified and it may seem like an unnecessary step, especially in light of surrendering control to the medical professionals with surgery.

Making it through surgery and post-op pain management is a major challenge to your continued recovery. It takes a lot of awareness and utilization of recovery skills that you may just be beginning to develop. To maintain recovery, give the meds to someone who will not give in to your anger and frustration. They should make sure that they

continued...



- ▶ know exactly what the prescription directions say and whether there is any leeway in dosing. Addicts often hear something other than what the doctor or pharmacist says about doses or the fear of the pain may drive dishonest behavior.

It's more than the physical response to surgery that drives the perception of pain. It is very easy to get into a circular pattern when the pain creates anxiety or fear, which leads to more pain and tension and the perceived need for more medication. The body craving medication can create emotional or psychological symptoms as well as an increased perception of pain, which drives the need for more pain medications.

Remember too, that mind/mood altering medications drug your thinking and feeling as well as your physical body. An example would be distorted beliefs about the motives of others. If you think that you are in pain because the treatment team is ignoring your needs, you will probably feel angry and frustrated. Your communication of that anger and frustration may be acted out if you are not proficient at appropriate expression and management of emotions. You might argue with the spouse who is administering your pain medications. If you distrust the motives or knowledge of the doctor or nursing staff, you may feel justified in manipulating them for more (or different) drugs.

The more the psychological or emotional turmoil associated with the pain, the more the tendency to act it out, producing more turmoil, which can be experienced as more pain, and increased need for drugs. This turns into a self-reinforcing circular pattern. This sounds complicated. In fact, when you stay honest and talk about your experiences, physical and emotional, from the beginning, you are better able to identify the thoughts you are having about pain, the emotions attached to it, and to move from acting out feelings, to working through them, asking for help, and practicing effective relapse prevention. This whole description applies to the short term recovery period after surgery. For chronic pain issues or long term recovery necessitating mind altering drugs over an extended period of time, it is even more complicated. ■

by Peggy L. Ferguson, Ph.D.,
www.peggyferguson.com



Happiness is a Habit

- 1. LIVE A SIMPLE LIFE.** Be temperate in your habits. Avoid self-seeking and selfishness. Make simplicity the keynote of your daily plans. Simple things are best.
- 2. THINK CONSTRUCTIVELY.** Train yourself to think clearly and accurately. Store your mind with useful thoughts. Stand guard at the door of your mind.
- 3. CULTIVATE A YIELDING DISPOSITION.** Resist the common tendency to always want your own way. Try to see the other's viewpoint.
- 4. BE GRATEFUL.** Begin the day with gratitude for your opportunities. Be glad for the privilege of life and work.
- 5. WORK WITH RIGHT MOTIVES.** The highest purpose of your life should be to grow in spiritual grace and power.
- 6. BE INTERESTED IN OTHERS.** Divert your mind from self-centeredness. In the degree that you give, serve and help, you will experience the by-product of happiness.
- 7. LIVE IN A DAY TIGHT COMPARTMENT.** That is, live one day at a time. Concentrate on your immediate task. Make the most of today. Plan for tomorrow, but live for today.
- 8. HAVE A HOBBY.** Nature study, walking, gardening, music, golfing, carpentry, stamp collecting, sketching, voice culture, foreign language, chess, books, photography, social service, public speaking, travel, authorship. Cultivate an avocation to which you turn for diversion and relaxation.



Care should be taken after having a drinking or using dream to avoid any other cues or triggers, and to treat the dream as a cue or trigger in its own right.

Drinking and/or using dreams that occur in later recovery after extended abstinence could possibly signal heightened vulnerability to relapse. One should maintain conscious awareness of any possible triggers and employ the necessary recovery skills. It is, however, fairly common for recovering people to have drinking/using dreams around their recovery anniversaries, especially in the first few years.

It is important to avoid shaming or blaming yourself if you experience drinking or using dreams. Although conscious awareness is called for, drinking/using dreams do not signal failure in recovery efforts.

As with any increase in triggers or cues, people in recovery should utilize good trigger management activities such as the ones listed below:

- **step up meeting attendance**
- **maintain an appropriate scheduled routine**
- **increase use of appropriate living skills**
- **maintain close connections to recovery support people**
- **get physical exercise**
- **use good nutrition**
- **manage stress appropriately**
- **deal with feelings appropriately as they come up**
- **deliberately make good choices about the people, places and things that you spend time with**

Drinking and/or using dreams do not have to create a problem for you. It is important to keep in mind that they are not your fault. They are indeed, a normal part of recovery, (especially early on). They can also serve as a signal to pay attention. ■

by Peggy L. Ferguson, Ph.D.,

www.peggyferguson.com

Drinking/Using Dreams - A Normal Part of Recovery.

by Peggy L. Ferguson, Ph.D.

When you have a drinking or using dream, you may wake up not really knowing if it actually happened. Many people in early recovery find it disturbing and frightening when they experience a "using" dream. Drinking and using dreams are those dreams where the central theme or experience is about drinking or using.

Common examples include:

- Being in a position to be tempted to drink or use other drugs
- Having the feeling or the sense that you did use, or experiencing yourself in the act of drinking and/or using
- Successfully avoiding drinking or using

These dreams can feel so real that, upon awakening, they can leave you confused about whether you had actually used. They can also set a disturbing tone for your day. It can involve an unsettling feeling that creates or exacerbates anxiety, tension, or stress. You may even be embarrassed to tell others that you had a drinking or using dream.

These frightening dreams are a normal part of the healing process and do not mean that you are not working a good program of recovery. The more days, weeks, and months that you remain abstinent from alcohol and other mood altering drugs, the fewer the drinking or using dreams you will have.

The Emotional & Highs & Lows of Early Recovery

by Peggy L. Ferguson, Ph.D.



When someone makes a decision to get the help that they need to quit drinking and using other drugs, everything begins to change. As an addict's body begins to detox and as she is consciously trying to interrupt the momentum of addicted use of a chemical (including alcohol), she goes through all kinds of changes. Physical detox can involve a wide range of possible symptoms, including physical, psychological, and emotional. The addict who is involved in trying to separate herself from the chemical often experiences an emotional rollercoaster. Depression is common. Anxiety and fear are common.

Mood swings are equally common. She might cycle quickly from sadness, shame, and guilt to hope and joy about quitting. Early recovery is also a time of introspection. As emotions are changing quickly, the newly recovering person tries to make sense of this flood of emotion. They are also assessing their relationships, their work, their social life, their motivations, their beliefs, and their history, trying to make sense of it all. Because emotions are often so unstable in early recovery, family members often make the assumption that the addict is still using. They don't know how else to explain it, since they expect that the addict will begin to be better immediately and steadily. However, a roller coaster effect of emotional high and lows is to be expected in early recovery as the chemicals leave your body, a little at a time, and as you confront issues that have been stuffed come to the foreground.

Address Changes/Deletions

Help us keep our mailing list current: send changes or deletions to:

Shely Rahimi
Serenity Lane Alumni Office
10920 SW Barbur Blvd
Portland, OR 97219

or email to: alumni@serenitylane.org
or call Shely at **503-244-4500 ext 8103**

In early recovery, feelings return to life. Recall that alcohol and other mood altering drugs do just that; they alter your mood. Your feelings or emotions are part of your mood. Think about the times that you used alcohol or other mood altering drugs to change how you felt, whether you were bored, angry, tired, hurt, sad, lonely, or helpless.

Alcoholics and addicts even use chemicals to alter positive feelings such as joy. So, if over a long period of time, you had been using drugs to numb those feelings and you stopped numbing them, they would rebound with a vengeance.

When you or your addicted loved one feels those ups and downs, recognize that the body and mind are detoxing. Being aware that a rollercoaster effect on the emotions are common to early recovery helps to keep this temporary condition in its proper perspective. Another helpful way to look at these highs and lows is to acknowledge the need for new feelings management skills and to develop new skills regarding those uncomfortable, pesky feelings.

Early recovery is a golden opportunity to learn how to appropriately identify, label, own, express, and work through feelings. Some alcoholics and addicts know how to manage their feelings. If you don't, now is a good time to learn. You are going to need those skills for the rest of your life.

by Peggy L. Ferguson, Ph.D.,
www.peggyferguson.com

Serenity Lane/Stepping Together
2133 Centennial Plaza
Eugene, OR 97401

**RETURN
SERVICE
REQUESTED**

DATED MATERIAL

Non-Profit Org.
U.S. Postage
PAID
Eugene, OR
Permit No 17

Inside:

- Love & Forgiveness
- Friendship
- Happenings
- Prevention
- Happiness is a Habit
- Dreams
- Emotions

Gratitude for the gift of life is the primary wellspring of all faiths, the hallmark of the mystic, the source of all true art....It is a privilege to be alive in this time when we can choose to take part in the self-healing of our world.

Joanna Mac

