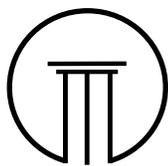


**Suncoast Institute on
Chemical Dependency**

Information Booklet

Information about addiction disease and recovery resources on Florida's Suncoast.



**Suncoast Institute on
Chemical Dependency**
Addiction Education and
Recovery Resources

Suncoast Institute
P.O Box 2228
Venice, FL 34284
www.sicd-fl.org

The Suncoast Institute offers free educational programs on alcohol and drug abuse, addiction disease, its prevention, and the recovery process -- as well as helpful resources for families, congregations, and communities.

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The Serenity Prayer

God, grant me the serenity
to accept the things
I cannot change,
the courage to change
the things that I can,
and the wisdom
to know the difference.

by Reinhold Niebuhr

12 Step Recovery Groups

Al-Anon Family Meetings

www.al-anon.org 757-563-1600

Alcoholics Anonymous

www.aa.org 941-951-6810

Cocaine Anonymous www.CA.org

Gamblers Anonymous

www.gamblersanonymous.org 941-947-7928

Families Anonymous

<https://www.familiesanonymous.org> 833-503-1450

Narcotics Anonymous

www.na.org 941-957-7910

Nar-Anon Family Groups

<https://naranonfl.org/> 888-947-8885

Information, Publications, Webinars

Addiction Policy Forum: www.addictionpolicy.org/what-is-addiction

National Institute on Drug Abuse: www.drugabuse.gov/

Substance Abuse & Mental Health Services Admin.

www.store.samhsa.gov

National Institute on Alcohol Abuse and Alcoholism:

www.niaaa.nih.gov/publications: www.niaaa.nih.gov/

Get Smart About Drugs (a DEA Resource)

<https://www.getsmartaboutdrugs.gov/>

National Association for Children of Addiction

<https://nacoa.org/resources/>

Association for Addiction Professionals: www.naadac.org/webinar

Drug Free World: [www/drugfreeworld.org/drugfacts](http://www.drugfreeworld.org/drugfacts)

Drug Free Sarasota: www.drugfreesarasota.org/resources/

Drug Free Youth: www.dfyinitiative.org/about-dfy/

Partnership for Drug Free Kids: <https://drugfree.org>,

Hazelden Betty Ford: www.hazelden.org/web/go/webinars

Suncoast Institute on Chemical Dependency

Suncoast Institute is a faith-based 501(c)3 not-for-profit corporation organized in and registered with the State of Florida.

Mission

Suncoast Institute's mission is to offer free addiction education and recovery resources to families, churches, and communities — to everyone seeking a better understanding of addiction disease and its many related problems. As a faith-based organization, we call upon God for help, guidance, and purpose in fulfilling our mission.

Goals

- ◆ Create a greater awareness and better understanding of addiction disease and its devastating mental, emotional, physical, and spiritual process, as well as its painful impact on individual and family.
- ◆ Recognize, communicate effectively with, and offer appropriate referral resources to those needing help.
- ◆ Pursue active collaboration between the communities of faith, recovery, and medical science, effectively promoting education, prevention, and the recovery process.

Anti-Discrimination Policy

As a faith-based not-for-profit organization, the Suncoast Institute on Chemical Dependency respects individuals of all races and religions and welcomes all to benefit from our services.

Addiction Is A Serious Problem

- A recent report by the DEA indicated nearly 108,000 drug overdose deaths occurred in the United States last year, with most being caused by methamphetamine and fentanyl. This calculates to a daily average of more than 290 deaths.
- The CDC also reported that a drug known as eutylone (or bath salt) has resulted in 182 deaths in Florida from January to June of 2021, and 77% of those eutylone-involved deaths involved illicitly manufactured fentanyl, cocaine or meth.
- According to the CDC, everyone has a role to play:
 - (1) Learn about the risks of opioids.
 - (2) Learn about naloxone, its availability, and how to use it.
 - (3) Help those with opioid use disorder find the right care.
- NIH (National Institutes of Health) and NIDA (National Institute on Drug Abuse) reported an estimated 1.4 million people in the U.S. had a substance use disorder related to prescription opioids in 2019.
- According to *Drugabusestatistics.org*, the state of Florida had 5,268 opioid overdose deaths in one year.
- The Surgeon General's 2016 report states, "Current research supports the understanding that addiction to alcohol or drugs is a chronic disease of the brain" — and that it "should be treated as a medical issue like any other disease."
- Nearly 88,000 people die each year from alcohol-related causes, making it the third leading preventable cause of death in the United States. (CDC)
- Research shows that marijuana can lower the IQ of teens who smoke it regularly. Further, about 9% of people who use marijuana become dependent on it. That number increases to about 1 in 6 among those who start using it as a teen, and to 25% to 50% among daily users. (NIDA)

The Life Recovery Bible, NLT, 2nd Edition. Tyndale House.

The Bible, interspersed with the principles of recovery. Includes key Bible characters, passages, and thoughts important to recovery through the Word of God.

The Life Recovery Devotional: Daily Meditations from Scripture for Each Step in Recovery. S. Arterburn, D. Stoop. The twelve steps of recovery with Scripture readings.

The Twelve Step Prayer Book. Compiled by Bill P. & Lisa D. Twelve step prayers and inspirational readings. Vol. 1

DVDs

Recovering Nation: Religion & the Struggle Against Addiction
Hanley Family Foundation. Clinicians and clergy discuss addiction disease and the recovery process, and their own related struggles.

Lost Childhood: Growing Up in an Alcoholic Family. A 30-minute award-winning documentary that begins in 1986 at a summer camp for young children of alcoholics, then interviews two of them 17 years later, exploring the long-term impact of growing up with alcoholism.

Memo to Self: Protecting Sobriety with the Science of Safety.
Institute of Addiction Studies. Dr. Kevin McCauley describes his own experience and how it is possible to get through the challenges of early sobriety and into longterm recovery.

My Name is Bill W. About Bill Wilson's journey from alcoholism to recovery and the founding of Alcoholics Anonymous (AA).

Pleasure Unwoven: An Explanation of the Brain Disease of Addiction. Dr. Kevin McCauley. An interesting and in-depth look at the debate over whether or not addiction really is a disease.

When Love is Not Enough: The Lois Wilson Story. The story of Lois Wilson's love, devotion and hope from her difficult journey with Bill's alcoholism and founding of AA to her own endeavor with starting a support group that was the beginning of Alanon.

The Ten Toughest Questions Families and Friends Ask about Addiction and Recovery. Joe Herzanek provides helpful, very straight-forward answers.

Books and DVD's on Addiction and Recovery

Addictive Thinking: Understanding Self-Deception. Abraham J. Twerski, MD. How self-deceptive thought can undermine self-esteem and sobriety.

Addiction & Grace: Love & Spirituality in the Healing of Addiction. G.G. May, MD. A psychiatrist's view of addictions beyond drugs and alcohol to work, sex, gambling, etc. A guide to spirituality and grace by letting go of control.

Beautiful Boy: A Father's Journey Through His Son's Addiction. David Sheff. A fiercely candid memoir of Sheff's painful years of loving a child who was addicted to drugs and seemed to be beyond help.

Broken: My Story of Addiction and Redemption. William Cope Moyers. A memoir of William Cope Moyers' harrowing journey through addiction disease. This is a shocking and unforgettable story of this successful businessman's journey from cocaine addiction to recovery.

Codependent No More: How to Stop Controlling Others and Start Caring for Yourself. Melody Beattie. A look into how we can fall into codependency as we try to help an addicted loved one.

Dying for a Drink: What You and Your Family Should Know about Alcoholism. Andrew Spickard Jr., MD, Barbara R. Thompson. Offers a compelling look at alcohol abuse, its symptoms, effect on family dynamics, and the hope that treatment provides.

Love First: A New Approach to Intervention for Alcoholism and Drug Addiction. Jeff Jay and Debra Jay. Dispels the myths that they must first hit "bottom" and that intervention has to be confrontational.

Now What? An Insider's Guide to Addiction and Recovery. William Cope Moyers. About recognizing when someone needs help; finding quality treatment; navigating the process; and establishing a support system after treatment.

Setting Boundaries with Your Adult Children: Six Steps to Hope and Healing for Struggling Parents. Allison Bottke. How to stop enabling, stop blaming yourself, and stop the flow of money.

What Is Addiction and What Are the Symptoms?

Addiction Is A Brain Disease

According to a NIDA publication entitled *Drugs, Brains, and Behavior: The Science of Addiction*, addiction is

"a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use despite harmful consequences. It is considered a brain disease because drugs change the brain — they change its structure and how it works. These brain changes can be long lasting, and can lead to the harmful behaviors seen in people who abuse drugs."

Symptoms of Addiction Disease

- Continued use in spite of serious negative consequences.
- Build up of tolerance, resulting in the need for increasingly larger amounts of the substance to get the same effect or to alleviate withdrawal symptoms.
- Loss of control, leading to using more than intended and/or the inability to quit.
- Craving, an overpowering urge to use can cause anxiety, irritability, and extreme mood swings. Craving can become so strong that it overpowers any thoughts of stopping use of the substance— the brain has been "hijacked."
- Physical dependence which causes withdrawal symptoms when one attempts to stop use, i.e., nausea, sweating, shakiness, anxiety, depression.

Addiction is a Deadly but Treatable Disease

Alcohol and drug addiction is a disease that can happen in the best of families, and it can be fatal if allowed to continue without "treatment." For those who are ready for recovery, different levels of care are available based on individual need, i. e., hospitalization for detox; residential treatment; sober living residences; Intensive Outpatient Treatment (IOP), Medication Assisted Treatment (MAT); outpatient counseling; AA and NA meetings, etc. Recovery programs focusing on the mental, emotional, spiritual, and physical aspects of addiction, including the 12-Step recovery process, are recommended.

Basic Terms and Definitions

Addiction Disease

According to a NIDA publication entitled *Drugs, Brains, and Behavior: The Science of Addiction*, addiction is “a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences. It is considered a brain disease because drugs change the brain – they change its structure and how it works. These brain changes can be long lasting, and can lead to the harmful behaviors seen in people who abuse drugs.”

Substance Use Disorder (SUD)

A recent SAMHSA (Substance Abuse and Mental Health Services Association) report indicates that the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) now defines substance use disorders as mild, moderate, or severe, depending on the number of diagnostic criteria met by the individual. SUDs are diagnosed when recurrent use of alcohol or drugs causes “clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.”

Alcohol Use Disorder (AUD)

According to SAMHSA, certain diagnostic criteria must be met to be diagnosed with an AUD. Some of those criteria include problems controlling alcohol intake, continued use in spite of negative consequences, drowsiness, nausea, development of a tolerance, drinking that leads to risky situations, or withdrawal symptoms.

One “Standard” Alcoholic Drink

12 oz. regular beer = 5 oz. wine = 1.5 oz. distilled spirits

Co-occurring Disorders, or Co-morbidity

The dual diagnosis of a mental illness or personality disorder along with a substance use disorder or alcoholism. Those with mental illness often use alcohol or drugs in an effort to alleviate their symptoms.

Rationalization

Excusing the behavior with “reasons” that seem logical, but are not the real reason, For example, “I’m not an alcoholic — I drink because my boss is unreasonable.”

Hazelden in Naples, FL

844-761-1233

www.hazeldenbettyford.org/locations/naples

Salvation Army, LIFE Recovery—VIP-ER Programs

941- 954-4673

Serenity Place (for Adults 50+)

941-342-4461

Transitions Intensive Outpatient Program

<https://doctorsof Sarasota.com/service/behavioral/health>

Doctors Hospital of Sarasota

941-342-8028

<https://doctorsofsarasota.com/service/transitions>

Freedom House / Bailes Consulting

941-704-1366

bailesconsulting.org/freedom-house

Dr. Quintal & Associates Counseling Center

941-907-0525 www.drquintal.com

Samaritan Counseling Services of the Gulf Coast

John Gregory 941-926-2959

www.samaritangulfcoast.com

Sarasota Grief Counseling Center

Karen Hildreth 941-302-0603

www.sarasotagriefcounseling.com

Charlotte County Behavioral Health

877-703-5267 www.CBHCF.org

Recovery Resources

NOTE: The listing below is provided as a sampling of the resources available in this area. It is in alphabetical order and is NOT AN ENDORSEMENT of any particular treatment program or provider.

If you wish to learn more about particular services offered such as location, cost, level of treatment, and which might be most appropriate for your loved one, contact information is included for each of the providers listed.

Cornell Behavioral Health Pavilion

941-917-7760 [www.smh.com/Home/Services/Addiction Center](http://www.smh.com/Home/Services/AddictionCenter), 941-782-3123

Centerstone Behavioral Hospital and Addiction Center

941-782-4600 www.centerstoneflorida.org

Coastal Behavioral Healthcare

Behavioral Health Access Center 941-552-1950
24-hr. Crisis Stabilization Unit, 941-364-9355
www.Coastalbh.org

Hanley Center at Origins Behavioral Healthcare

844-843-8935 (24x7) West Palm Beach, FL
<https://www.originsrecovery.com/locations>

Lightshare Behavioral Wellness & Recovery

941-732-6837 www.lightsharewellness.org

Enabling

Trying to “help” the addicted person by doing things for them that they could and should do for themselves. Enabling takes away the consequences of their destructive behavior.

**Supporting Recovery = Helping
Supporting Addiction = Enabling, Hurting**

Denial

A defense mechanism that can be used by both the addicted individual and the family to avoid the pain of facing the truth. Family members may refer to their loved one’s addictive behavior as “just a phase he’s going through,” etc. The addicted person may say, “I don’t drink that much,” etc.

Projection

Blames others for their behavior. By blaming the problem on others, the responsibility for change is shifted to them as well.

Recovery

SAMHSA defines recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.

Medication Assisted Treatment (MAT)

MAT is the use of medications in combination with counseling and behavioral therapy (required by federal law) for treatment of addiction to opioids. Medications used include naltrexone (non-addictive opioid agonist which blocks the activation of opioid receptors), and buprenorphine (a partial opioid agonist which binds to opioid receptors but activates them less strongly than full agonists do), helping to reduce cravings and withdrawal symptoms.

Naloxone for Opioid Overdose Reversal

See page 10 if overdose is suspected. Naloxone (Narcan) is a safe opioid receptor antagonist that blocks the effects of other opioids and can immediately restore normal respiration. It can be administered by injection or nasal spray.

A Few of the Many Drugs of Abuse

Drug: Alcohol

Possible Health Effects: Changes in mood, behavior, focus and coordination; cardiomyopathy, arrhythmias, stroke, and high blood pressure; fatty liver, alcoholic hepatitis, fibrosis, cirrhosis; increased risk of certain cancers, including cancer of the mouth, esophagus, throat, liver, breast; and a weakened immune system.

Drug: Cocaine

Possible Short-Term Health Effects: Narrowed blood vessels

enlarged pupils; increased body temperature, heart rate, and blood pressure; headache; abdominal pain and nausea; euphoria, increased energy, alertness; insomnia, restlessness; anxiety; erratic and violent behavior, panic attacks, paranoia, psychosis; heart rhythm problems, heart attack; stroke, seizure, coma.

Drug: Heroin

Possible Short-Term Health Effects: Euphoria; warm flushing of skin; dry mouth; heavy feeling in hands and feet; clouded thinking; alternate wakeful and drowsy states; itching; nausea; vomiting; slowed breathing and heart rate.

Drug: Methamphetamine (Meth)

Possible Short-Term Health Effects: Increased wakefulness and physical activity; decreased appetite; increased breathing, heart rate, blood pressure, temperature; irregular heartbeat.
Source: National Institute on Drug Abuse; U.S. Department of Health and Human Services; www.drugabuse.gov/

Drug: Eutylone (synthetic bath salt) looks like crystals or rocks with a cloudy brown hue, often sold in gel capsules.

Possible Short-Term Health Effects: Agitation, violence, hypertension, severe cardiovascular symptoms, and death. The CDC has reported fentanyl has been detected in over 77% of eutylone-related deaths.

Drug: Xylazine (aka "tranq" or "tranq dope)." A deadly drug often found in fentanyl and other illegal drugs.

See It, Say It: Six Steps for Sharing Concern

For times when we want to say something to a friend or family member about his or her alcohol or drug use – when we wonder what to say and how to say it, the Minnesota Institute of Public Health (MIPH) has developed this simple, straightforward format for sharing concern, which is outlined below.

1. **I care.** First things first – let the person know that you care about him/her, i.e., say something like “I love you” or “I want the best for you” – whatever is appropriate for the situation. This establishes a personal connection and reduces defensive feelings.
2. **I see.** Talk specifically about the behavior that concerns you. Be sure to focus on the behavior, not the person. Present facts, not just impressions. (Keep track of incidents. If a pattern emerges, that’s a clear sign help is needed.)
3. **I feel.** Be straight about how you feel about the behavior. This will help remove any sense of blame from the interaction and will sound less judgemental and more caring. Don’t make assumptions about the cause of the behavior; don’t try to diagnose; just be concerned.
4. **I’m listening.** Now be quiet and listen to what he/she has to say. Respectfully allow him/her to share feelings, problems and explanations. Be prepared for a variety of responses including silence, the disclosure of a problem, or hostility – such as “Get out of my life.”
5. **I want.** Be ready to be specific about what you want him/her to do to change the behavior. From your perspective, suggest – don’t demand – what you want to see happen. And remember, often a referral for professional help is the most caring thing you can do.
6. **I will.** Be ready to say what you’ll do to help the person change. Moral support? Arrange a meeting with someone who can help? A ride? More listening? Make it clear that you’re willing to keep talking. If he/she says nothing, the door is open for future discussion.

MIPH agrees. ***“It’s not easy to confront someone with your concerns about their substance use. Yet it’s much harder to simply watch and worry.”***

What Can Family Members Do?

Take Care of Yourself

1. Remember, there is no quick fix for addiction disease.
2. Establish boundaries! Offer to help your loved one seek treatment but not to pay fines, bail, rent, or any of those things he/she should be doing for him/herself. It may be difficult to say no, but taking away the negative consequences of addiction-related behavior makes it easier for your loved one to continue in this destructive pattern rather than seek the help needed to begin the recovery process.
3. Talk about it! You may want to talk with a therapist who has training and experience with addiction disease and its impact on the family. If you prefer a support group, find one that you like and attend it regularly. Several options are available, including
 - (a) Families Anonymous (<https://www.familiesanonymous.org>)
 - (b) Alanon and Alateen (www.alanon.org)
 - (c) Nar-anon (www.naranon.org)
4. Learn about addiction disease!
The Suncoast Institute on Chemical Dependency offers free educational programs on drug abuse and addiction, its impact on families, churches, and communities, as well as prevention and resources for recovery. Our speakers are professionals with expertise in these areas. For more information, visit www.sicd-fl.org. and check the Events section. Also, the “Resources” pages in this booklet list organizations such as SAMHSA, NIDA, and others that offer excellent educational publications.
5. Consider a Professional Intervention. There are therapists who specialize in interventions, which can be very effective in getting a loved one into treatment if the intervention is well prepared in advance and carried out according to a pre-established plan.

Drug: Fentanyl, a synthetic opioid 50 times more potent than heroin and 100 times more potent than morphine. Illicit fentanyl is often mixed with other drugs without user knowledge, and brightly colored pills called “rainbow fentanyl” is now available in the form of pills, powder, and blocks similar to sidewalk chalk.

Health Effects: Range from euphoria to death. (DEA.gov)

Drug: “Gray Death” (an opioid mix)

A deadly mix consisting of heroin, fentanyl, carfentanil, and a synthetic called U-47700 or “pink,” which the US DEA has listed as one of the most dangerous drugs it regulates (initially found in GA and AL, then TX and LA in 2020, and in other southern states in early 2021).

Drug: Prescription Opioids (Oxycodone and others) Possible

Short-Term Health Effects: Pain relief, drowsiness, nausea, constipation, euphoria, confusion, slowed breathing, even death if not taken as prescribed by the physician.

Note: Two highly dangerous fentanyl analogues (sold as Percocet in yellow pill form) identified as acrylfentanyl and tetrahydrofuran fentanyl found in some areas are highly dangerous Schedule 1 drugs.

Drug: Synthetic Cannabinoids aka K2, Spice, etc.

Possible Health Effects: Increased heart rate; vomiting; agitation; confusion; paranoia; increased blood pressure and reduced blood supply to the heart; heart attack. (drugabuse.gov)

Drug: Cathinones aka Bath Salts, Flakka, etc.

Possible Health Effects: Increased heart rate and blood pressure; euphoria; increased sociability and sex drive; paranoia, agitation, and hallucinations; psychosis, violence; nosebleeds; sweating; nausea, vomiting; insomnia; irritability; dizziness; depression; suicidal thoughts; panic attacks; reduced motor control; cloudy thinking. (Long-term effects can include breakdown of skeletal muscle tissue; kidney failure; death.) (drugabuse.gov)

MDMA aka Ecstasy/Molly

Possible Health Effects: Lowered inhibition; enhanced sensory perception; confusion; depression; sleep problems; anxiety, increased heart rate and blood pressure; muscle tension; nausea; blurred vision; faintness; fever leading to liver, kidney, or heart failure or death.

What to Do If You Suspect An Overdose

According to SAMHSA's "Opioid Overdose Toolkit," **AN OPIOID OVERDOSE NEEDS IMMEDIATE MEDICAL ATTENTION.** If you suspect an overdose, **dial 911 immediately** and say, "Someone is not breathing." Be sure to state the address clearly and/or give a description of your location. OVERDOSE often results in death if not treated quickly.

NEVER LET THEM "SLEEP IT OFF."

Overdose is common among those who use illicit opioids such as heroin, fentanyl, and others, and those who misuse pain medicines such as oxycodone, hydrocodone, and morphine

Opioids repress respiratory function and breathing. One sign of a person in a critical medical state is the "death rattle" — an exhaled breath with a distinct labored sound coming from the throat. This is almost always a sign that the person is near death and immediate emergency resuscitation is necessary.

Signs of overdose include:

- Extreme sleepiness, inability to awaken.
- Breathing problems (can range from slow to shallow in someone who cannot be awakened.
- Fingernails or lips turning blue/purple.
- Extremely small "pinpoint" pupils.
- Slow heartbeat and/or low blood pressure.

Family members or others who may have to use **NARCAN[®]Nasal Spray** in an opioid emergency should know where it is stored and how to administer it before an opioid emergency happens.

<https://www.drugabuse.gov/related-topics/opioid-overdose-reversal-naloxone-narcan-evzio>

Florida Good Samaritan laws: A person acting in good faith who seeks medical help for an individual experiencing, or believed to be experiencing, an alcohol or drug-related overdose may not be arrested, charged, prosecuted or penalized (www.leg.state.fl.us).

Suicide Warning Signs

The signs listed below may mean someone is at risk for suicide. The risk is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change. If you or someone you know exhibits any of these signs, seek help as soon as possible by calling the new **National Suicide Prevention Lifeline: 988** (open 24/7)

- Talking about wanting to die or to kill themselves.
- Looking for a way to kill themselves, such as searching on line or buying a gun.
- Talking about feeling hopeless or having no reason to live.
- Talking about feeling trapped or in unbearable pain.
- Talking about being a burden to others.
- Increasing the use of alcohol or drugs.
- Acting anxious or agitated; behaving recklessly.
- Sleeping too little or too much.
- Withdrawing or isolating themselves.
- Showing rage or talking about seeking revenge.
- Displaying extreme mood swings.