

MY LOVED ONE IS AN ADDICT.
NOW WHAT?

Books by Jonathan Okinaga PhD

How God Sanitized My Soul

**MY LOVED ONE IS AN ADDICT.
NOW WHAT?
A SIMPLE GUIDE FOR FAMILIES OF ADDICTS**

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I would like to hear from you. Please send questions, comments or concerns about this book to jon.okinaga@gmail.com

My Loved One is an Addict. Now What? A Simple Guide for Families of Addicts
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All scripture quotations, unless otherwise indicated are taken from The Holy Bible, English Standard Version.

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For Tait

Foreword

Let me start off by saying after more than two decades as a chemical dependency treatment professional I have had the opportunity to witness the transformation of the lives of those who are willing to follow instruction, surrender to the Lord and let go of old ideas and behaviors. Jon Okinaga is one of those lives that has been transformed by the power of Christ and a prescribed course of action in laying down the weights and sins which so easily ensnare us. As a pastor I have seen many men and women fighting against the will of God as outlined in His Holy Scriptures, (the inspired, infallible, authoritative, and inerrant Word of God.) Needless to say, this never ends well and does not produce freedom from enslaving sins.

Jon's book is an incredible resource full of sobering statistics and compelling accounts that would motivate anyone to do whatever they can in assisting families of addicted individuals. His blunt straightforward no punches pulled approach is refreshing and real. One of the fundamental principles in recovery is honesty. Pulling things into the light and calling them what they are is a gift of Jon's that you will find throughout this book. There is no doubt this will be uncomfortable for some at first but my hope and prayer is you will come to embrace and engage in complete honesty as you seek to help your loved one.

His book will not make Jon friends with anyone who is still actively using and trying to stay hidden in their dysfunctional lifestyle. It will however make him a trusted friend to those who have to deal with the addictions and compulsions of their loved one who is enslaved.

The book gets better and better with every chapter, Jon's passion for scripture and understanding of the sufficiency of the word of God is refreshing in a world that tries everything to fix their problems except by obeying God

My hope and prayer is through Jon's no nonsense straight shooting hard-hitting book you are challenged and provoked to the point that you are willing to engage in the battle. Step up and step in to assist those in your own lives or in your church body who are struggling with addiction or an addicted family member. May God richly bless you through Jon's work.

Pastor Tim Pappas
CA-CCS,CADC II.
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Introduction

One of the most heartbreaking things that can happen to a parent or spouse is the realization that their child/spouse struggles with substance abuse. Feelings of shame, guilt, anger, frustration, and fear are common emotions when a family finally comes to grips with the fact that their loved one is an addict. These emotions may contribute to the unfortunate action of sweeping the addiction under the rug. Whispers may happen at family gatherings during the holidays about a loved one being sent off to treatment or being arrested for a DUI, but rarely is it openly discussed. There is shame that overtakes the immediate family, and the quicker it can be forgotten, the better it is for everyone. What I am here to tell you is that addiction is not as rare as you may think. It ravages families of all socioeconomic standings, races, religions, and creeds. Substance abuse has recently overtaken car accidents in deaths per year in America. The War on Drugs started in the 1980s, and it is an abject failure. It's time to talk about addictions and what families can do to help their loved ones.

Here are some sobering statistics:

- Almost 21 million Americans have at least one addiction, yet only 10% receive treatment.
- Drug overdose deaths have more than tripled since 1990.
- Alcohol and drug addiction cost the U.S. economy over \$600 billion every year.

- In 2017, 34.2 million Americans committed DUI, 21.4 million under the influence of alcohol, and 12.8 million under the influence of drugs.
- Every year, worldwide, alcohol is the cause of 5.3% of deaths (or 1 in every 20).
- About 300 million people throughout the world struggle with substance abuse.
- About 18% of American adults have a problem with alcohol, but only about 7% of Americans who are addicted to alcohol ever receive treatment.
- In 2017, approximately 2.3 million Americans between the ages of 12 and 17, and 2.4 million Americans between the ages of 18 and 25, started to drink alcohol.

Before I go any further, a question needs to be answered. Why should anyone trust what I have to say on the topic? After battling substance abuse from my teens. In 2007, at the age of 30, I finally gained sobriety. Since May 6, 2007, I have maintained sobriety and have worked in the recovery field since 2008. Over the last decade, I have been employed and interned at one of the most respected dual diagnosis drug and alcohol treatment centers in America. I was on the front lines running sober-living homes as a house manager/life coach during the peak of the opioid epidemic for four years. I established my own sober-life coaching center and have been a recovery pastor since 2010. For years, families of those that I worked with have been asking me to write a book to help others. After completing my undergraduate, Masters, and Ph.D. in under eight years, I finally had the time to commit.

I decided to write a book for the families of addicts for this reason: When I first admitted to my parents that I was a drug addict and needed help, they had no idea what to do. They called their church, the state convention for their denomination, and other friends they could trust. No one had an answer or idea of what steps to take next. As I have worked with families over the years, the same can be said today. There are many resources for the addict but not much help for the families. My hope and prayer is that this book will equip, teach, and allow families to not only understand addictions but also provide a stable home to assist their loved one to live a life free from substance abuse

Chapter One: Mind Altering Substances

*How much better to get wisdom than gold, to get insight
rather than silver!*

*“Scientia potentia est. Knowledge is power.” - Sir
Francis Bacon*

What are Addictions?

According to Webster's Medical Dictionary, addiction is defined as: "An uncontrollable craving, seeking, and use of a substance such as alcohol or another drug. Dependence is such an issue with addiction that stopping is very difficult and causes severe physical and mental reactions." In simple terms, your loved one is currently incapable of abstaining from mind-altering substances. This includes illicit drugs (cocaine, heroin, methamphetamine, etc.), prescription drugs (painkillers, anti-anxiety, marijuana, etc.) and alcohol. Just because your loved one was written a prescription for medication, does not mean they cannot become addicted. The National Institute on Drug Abuse has found that roughly 48 million people (over the age of 12) have used prescription drugs in ways that were not as prescribed, or approximately 20% of the population in the USA. Parents have argued with me that their son was not a drug addict because he got his pills from a doctor. It really doesn't matter where someone gets their drug of choice, street pharmacist (drug dealer) or the pharmacist at a local drug store. Substance abuse does not care how your loved one started on their path to addictions.

What are Drugs?

Drugs are broken down into different Schedules by the Drug Enforcement Agency (DEA) Here are the current designations found on the DEA Website.
(<https://www.dea.gov/drug-scheduling>)

Schedule I drugs, substances, or chemicals are defined as drugs with no currently accepted medical use and a high potential for abuse. Some examples of Schedule I drugs are: heroin, lysergic acid diethylamide (LSD), marijuana (cannabis), 3,4-methylenedioxymethamphetamine (Ecstasy), Methaqualone, and Peyote.

Schedule II drugs, substances, or chemicals are defined as drugs with a high potential for abuse, with use potentially leading to severe psychological or physical dependence. These drugs are also considered dangerous. Some examples of Schedule II drugs are: Combination products with less than 15 milligrams of Hydrocodone per dosage unit (Vicodin), Cocaine, Methamphetamine, Methadone, Hydromorphone (Dilaudid), Meperidine (Demerol), Oxycodone (OxyContin), Fentanyl, Dexedrine, Adderall, and Ritalin.

Schedule III drugs, substances, or chemicals are defined as drugs with a moderate to low potential for physical and psychological dependence. Schedule III drugs abuse potential is less than Schedule I and Schedule II drugs but more than Schedule IV. Some examples of Schedule III drugs are Products containing less than 90 milligrams of codeine per dosage unit (Tylenol with codeine), Ketamine, Anabolic Steroids, and Testosterone.

Schedule IV drugs, substances, or chemicals are defined as drugs with a low potential for abuse and low risk of dependence. Some examples of Schedule IV drugs are

Xanax, Soma, Darvon, Darvocet, Valium, Ativan, Talwin, Ambien, and Tramadol.

Schedule V drugs, substances, or chemicals are defined as drugs with lower potential for abuse than Schedule IV and consist of preparations containing limited quantities of certain narcotics. Schedule V drugs are generally used for antidiarrheal, antitussive, and analgesic purposes. Some examples of Schedule V drugs are: Cough preparations with less than 200 milligrams of codeine or per 100 milliliters (Robitussin AC), Lomotil, Motofen, Lyrica, Parepectolin.

What needs to be stated is: It does not matter what "Schedule" a drug is given. Addicts will use and abuse whatever they can obtain. I once dated a pharmacist and what I found in her medicine cabinet was a smorgasbord of yummy pills of various sizes and colors. I knew that I wanted to find the green ones that were stamped M & 200 (which was morphine), and the white pills with OP & 80 were the good stuff, oxycontin. She never had the ones that I was looking for, but every week or so, I would check. If you ever find pills in your loved one's room, car, or medicine cabinet, there are websites that you can use to identify what they are taking. If they tell you it belongs to a friend and is not theirs, I am 99.9% positive that they are lying to you. Drugs will make addicts do stupid things. Never doubt the lengths that an addict will go to chase their high.

Drugs, Sex & Rock n Roll

If you watch most documentaries on drugs, parents are clueless. "Oh my gosh, mom, didn't you know that guy was high? And I would say really?" They say that knowledge is power, so I feel the reader must know the main drugs, what they are called, how they are used,

acute effects, health risks, telltale signs, how long you can drug test it at home (with urine drug tests), and finally some random facts that I have learned over the years. You will also notice that one of the main health risks is unsafe sex practices. The term "Drugs, Sex, & Rock n Roll" is indicative of those that struggle with substance abuse. The list I am providing are the main drugs that addicts use. However, just because a drug is not on the list does not mean that someone may not be using it. You can find an updated list of How it is Used, Acute Effects, and Health Risks at www.centeronaddiction.org and Telltale Signs from www.drugrehab.com.

Marijuana

Other Names: Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, sinsemilla, skunk, weed.

How it is Used: smoked, ingested.

Acute Effects: Euphoria; relaxation; slowed reaction time; distorted sensory perception; impaired balance and coordination; increased heart rate and appetite; impaired learning, memory; anxiety; panic attacks; psychosis.

Health Risks: Cough; frequent respiratory infections; possible mental health decline; addiction.

Telltale Signs: Loud talking and laughter. Irritability. Low energy levels. Reduced activity. Forgetfulness. Defensiveness and secretiveness. Self-centeredness. Trouble thinking. Coordination loss. Altered sense of time. Mood swings.

How Long it is in Your System: 7 to 28 days

Random Facts: Marijuana is now found in edibles (brownies, cookies, candies, cakes, etc.) It can be used in ways other than smoking, 32% of those using marijuana now consume it as an edible. With the legalization of marijuana, more research and development has been put into the growing of marijuana. The potency of this drug has increased massively in the last 25 years. When I started doing drugs, the levels of tetrahydrocannabinol (THC), the main psychoactive ingredient, was at 4% in 1995. There are current strains with a potency of up to 31% THC. This strain is referred to as "Memory Loss." With more states legalizing marijuana for medicinal and recreational purposes, the likelihood of stronger strains will increase with more science and money devoted to producing the most potent marijuana possible. This may be an unpopular take by those in the addiction field, but I have never recommended a marijuana addict to attend rehab. They do not need medical detox. I have seen way too many teens who were sent to rehab for a marijuana problem, and by the time they left treatment, they could not wait to try harder drugs. Take away the debit card, throw away the bong, and kick them out if needed, but I would not advocate treatment for just a marijuana problem. With that said, I have rarely seen a pothead who did not have issues with other mind-altering substances, specifically alcohol.

In my opinion, marijuana and alcohol are two of the hardest mind-altering substances to quit. I do not say that from a chemical dependency perspective, rather because of the social acceptance of both. It's cool to be a stoner in society today. Marijuana is no longer seen as a social ill only for misfits and degenerates. With the legalization in many states on the rise, there has been a correlated shift in attitudes towards marijuana. In 2019, a Pew survey showed 67% of Americans supported legalization. Just

10 years ago, that number was only 32%. The only segment of society that does not have a majority in support of legalization is the Silent Generation (1928-1945), with only 35% in favor. Unless something dramatic and unforeseen occurs soon, the acceptance of marijuana will only grow, and its use will continue to skyrocket.

One of the more popular holistic remedies being discussed in society today is Cannabidiol (CBD). It is a non-psychoactive component of marijuana; this means that you are not able to get high using it. According to the World Health Organization, "In humans, CBD exhibits no effects indicative of any abuse or dependence potential.... To date, there is no evidence of public health-related problems associated with the use of pure CBD." The supposed benefits range from helping with pain, anxiety, Parkinson's, and autism. Israel is one of the leading nations doing extensive research on CBD. If you are looking for the most up to date studies, the Israelis are years ahead of other countries. A problem with CBD is that it is new and is marketed as a *supplement*, not a medicine. This means that there are less oversight and no guarantee that what is being sold is pure CBD. There have been reports of people failing drug tests because the extraction process was not done correctly. I would advise anyone who is considering CBD to make sure that their supplier is reputable and can provide documentation on the quality and purity of the product. Another concern is that CBD is now being sold in plant form to be smoked. I would advise anyone with substance abuse problems not to smoke CBD as it could serve as a trigger.

Opioids: Heroin/Vicodin/Oxycontin/Opana

Other Names: Smack, horse, brown sugar, dope, H, junk, skag, skunk, white horse, China white; cheese (with over-the-counter cold medicine and antihistamine).

How it is Used: Injected, smoked, snorted.

Acute Effects: Euphoria; drowsiness; impaired coordination; dizziness; confusion; nausea; sedation; feeling of heaviness in the body; slowed or arrested breathing.

Health Risks: Constipation; endocarditis; hepatitis; HIV; addiction; fatal overdose.

Telltale Signs: Vomiting. Constricted pupils. Impaired mental functioning. Slurred, slow or incoherent speech. Disorientation and clumsiness. Itching. Damaged and collapsed veins, as evidenced by bruising and other marks on the arms and legs. Cuts and scabs from picking at itchy skin. Nausea, loss of appetite, stomach cramps and diarrhea. Weight loss. A respiratory wheeze. Sexual dysfunction and reproductive problems. Fluctuating moods and depression. Sores on nostrils or lips. Nosebleeds. Frequent sniffing. Withdrawal symptoms such as agitation, anxiety, a runny nose, sweating, yawning, dilated pupils, goosebumps, fast heart rate, nausea and vomiting.

How Long it is in Your System: 3-5 days

Random Facts: Some will bristle seeing heroin in the same category as prescription medication. The truth is the legal prescription medication is just a synthesized form of heroin. A study by drugsabuse.gov found that 86 % of heroin users initially started using opioids with pain pills.

I have never heard a junkie say, "I wanted to become a heroin junkie." Most of those I have worked with have gone back and forth between heroin and prescription pills, whichever was most readily available. At one point during the opioid epidemic, 80% of clients were admitted for a prescription pill or heroin addiction. There was no differentiation between an opiate addict to pills or heroin. For those that inject, you can find needle marks. For those good at hiding it, the track marks will be located between their toes. Far along in their addiction, they will have a hard time finding healthy veins, you will sometimes see them injecting through their neck. Another telltale sign are burnt fingertips since the drug can be smoked using tin foil or from heating up the heroin on a spoon to be injected.

Lost in the mix of Oxycontin craze, was a little-known killer called Opana. "The abuse and manipulation of reformulated Opana ER by injection has resulted in a serious disease outbreak. When we determined that the product had dangerous unintended consequences, we made a decision to request its withdrawal from the market," said Janet Woodcock, M.D., director of the FDA's Center for Drug Evaluation and Research. "This action will protect the public from further potential for misuse and abuse of this product." The reach and devastation were so severe that the FDA requested that the manufacturer of Opana, Endo Pharmaceuticals, remove it from the market in 2017. There is a problem when a pain medication, designed for Stage IV cancer patients, somehow makes its way into the pain management sector.

While working in the recovery field in South Orange County (one of the largest areas for substance abuse treatment) during the height of the opioid epidemic, I attended more funerals than I would like to admit. What

was sad was how many people would show up to the funeral high. It was not uncommon to see someone overdose at the funeral. Opiate addiction is powerful.

The CDC shared some painful statistics: “Drug overdose deaths continue to increase in the United States. From 1999 to 2017, more than 702,000 people have died from a drug overdose. In 2017, more than 70,000 people died from drug overdoses, making it a leading cause of injury-related death in the United States. Of those deaths, almost 68% involved a prescription or illicit opioid.”

A tragic fact of sending your loved one to treatment is that after they have been sober for a month or longer, their tolerance for their drug of choice goes down. If they relapse after being clean, and they use the same quantity of drugs that they were accustomed to, the odds of them overdosing goes up exponentially. There was a fellow patient at rehab who went home for the weekend, relapsed, and died. His friends said he did roughly the same amount as he used to. It was a wakeup call and reminder for me that the talk on tolerance levels we had in treatment was true.

Fentanyl

Other Names: Actiq, Duragesic, Sublimaze: Apache, China girl, dance fever, friend, goodfella, jackpot, murder 8, TNT, Tango & Cash.

How it is Used: injected, smoked, snorted.

Acute Effects: Pain relief, euphoria, drowsiness, sedation, weakness, dizziness, nausea, impaired coordination, confusion, dry mouth, itching, sweating, clammy skin, constipation. 80–100 times more potent analgesic than morphine.

Health Risks: Slowed or arrested breathing, lowered pulse and blood pressure, tolerance, addiction, unconsciousness, coma, death; risk of death increased when combined with alcohol or other central nervous system depressants, high potential for misuse.

Telltale Signs: Vomiting. Constricted pupils. Impaired mental functioning. Slurred, slow or incoherent speech. Disorientation and clumsiness. Itching. Damaged and collapsed veins, as evidenced by bruising and other marks on the arms and legs. Cuts and scabs from picking at itchy skin. Nausea, loss of appetite, stomach cramps, and diarrhea. Weight loss. A respiratory wheeze. Sexual dysfunction and reproductive problems. Fluctuating moods and depression. Sores on nostrils or lips. Nosebleeds. Frequent sniffing. Withdrawal symptoms include agitation, anxiety, a runny nose, sweating, yawning, dilated pupils, goosebumps, fast heart rate, nausea, and vomiting.

How Long it is in Your System: 2-3 days.

Random Facts: Fentanyl is a synthetic opioid created in 1959 that is 80-100 times more potent than morphine. Initially used to help cancer patients as a transdermal patch, it has recently been mixed with heroin to provide a higher high for opiate addicts. In some cases, it is used in counterfeit pain pills where the user does not know they are taking Fentanyl, which has led to an increase in overdoses and death. To make matters worse, the drug is produced in both Mexico and China. What makes the production of Fentanyl so appealing to drug cartels is that it can be produced in a lab and does not require large plots of land to grow, nor the workers to harvest the drugs. It is all about the profits.

Fentanyl is dangerous, its synthetic brother, produced by the same pharmaceutical company, Janssen Pharmaceutica, is Carfentanyl. Carfentanyl is even more deadly than its older brother. Created 20 years later, it is 10,000 times stronger than morphine. Emergency Medical Services (EMS) sent out an alert on Carfentanyl: "Unlike Fentanyl, Carfentanyl is not meant for human consumption. The only recognized use for Carfentanyl is for the sedation of larger zoo animals like elephants, moose, and buffalo. To sedate a 2,000-pound African elephant, it only requires two milligrams of Carfentanyl – that's about the same size as a tiny pinch of salt." EMS providers have been told to treat potential Carfentanyl cases the same as they would a crime scene and to use Hazmat protection. There have been reports of EMTs and firefighters needing treatment for being exposed to the deadly drug. One speck, the size of a grain of salt, is enough to kill a human. Despite knowing how dangerous the drug can be, addicts are willing to take that risk.

Cocaine

Other Names: Cocaine hydrochloride: blow, bump, C, candy, Charlie, coke, crack, flake, nose candy, powder rock, snow, toot.

How it is Used: Snorted, smoked, injected.

Acute Effects: Increased heart rate, blood pressure, body temperature, metabolism; feelings of exhilaration; increased energy, mental alertness; tremors; reduced appetite; irritability; anxiety; panic; paranoia; violent behavior; psychosis.

Health Risks: Weight loss; insomnia; cardiac or cardiovascular complications; stroke; seizures; addiction, nasal damage from snorting.

Telltale Signs: Enlarged or dilated pupils. Runny nose or nosebleeds. Changes in sleeping and eating patterns. Talkativeness. Lack of inhibition. Higher confidence. Excessive enthusiasm. Decreased appetite. Mood swings. Involuntary muscle twitching (tics). Impotence in males. Irritability. Nausea. Paranoia (unreasonable distrust of others). Hypersensitivity to sight, sound, and touch. Engaging in risky behaviors, such as unsafe sex.

How Long it is in Your System: 1-3 days

Random Facts: The drug that led me to rehab was cocaine. When I was just a "pothead," I swore that I would never do cocaine. I hated things going up my nose. I can still remember the first time I did coke. It was at a nightclub; I had too much alcohol to drink and felt like a bus ran over me. A cute girl took me to her car and said, "Just snort this." It was not a lot of cocaine, but I felt that I was on top of the world. I was able to go back to the party and drink even more. From that point forward, it was a downhill spiral that consumed my life. All I could think about was cocaine, but after the first few months, it was not because it made me feel good. It was chasing a high that I could never achieve again.

Cocaine ranks as one of the top five physically addictive drugs out there. The complete list includes heroin, alcohol, methamphetamine, and nicotine. According to the Drug Enforcement Administration (DEA), "The crash that follows a high is mental and physical exhaustion, sleep, and depression lasting several days. Following the crash, users crave cocaine again." It is a rollercoaster ride that the cocaine addict goes on, which is a never-ending series of trying to just feel "okay." What makes cocaine and other stimulates so horrible is coming off the drug. You are so tired but are unable to sleep, which causes the

addict to do more drugs so they do not feel as horrible. A vicious cycle that will wreak havoc on the addict's mind. Prolonged sleep deprivation can cause hallucinations, both audibly and visually. At the end of my addictions, I could hear voices coming out of the radio, and I thought I heard law enforcement communicating with each other on the streets that I was driving. The worst episodes were the salespersons on the television telling me to buy things. Thinking back on all of this makes me so grateful that I was able to get sober.

In the depths of addiction, the addict is not thinking straight. Getting high is the only thing that consumes the addict. A side effect of long-term cocaine abuse is damage to the nasal passage. One night I sneezed and blew out my septum. There was a chunk of cartilage on the floor, massive amounts of blood everywhere. My solution was not to visit the ER to make sure I was okay; it was to pour hydrogen peroxide down my sinus cavity so I could do more cocaine. I cannot explain the pain that I went through, but it allowed me to do more cocaine that night. That is an example of the depravity that can occur with an addict.

Methamphetamine

Other Names: Meth, ice, crank, chalk, crystal, fire, glass, go fast, speed, bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers.

How it is Used: Swallowed, snorted, smoked, injected, rectally.

Acute Effects: Increased heart rate, blood pressure, body temperature, metabolism; feelings of exhilaration; increased energy, mental alertness; tremors; reduced

appetite; irritability; anxiety; panic; paranoia; violent behavior; psychosis.

Health Risks: Weight loss; insomnia; cardiac or cardiovascular complications; stroke; seizures; addiction, severe dental problems.

Telltale Signs: Psychological side effects such as violent or reckless behavior. Physical changes to appearance, such as skin sores or tooth decay. Financial and legal problems associated with drug use. The presence of paraphernalia, such as glass pipes, aluminum foil or used needles. Increased body temperature. Fast heart rate. Quick breathing. High blood pressure. Decreased appetite. Irritability. Tremors. Convulsions. Aggression. Inability to feel pleasure. Vision problems. Meth mouth. Depression. Anxiety. Confusion. Insomnia.

How Long it is in Your System: 2-3 days

Random Facts: Judge Edward Kubo from Hawaii confesses, "We're not proud of it. But crystal methamphetamine is our gift to the nation. It started here. At that time meth was called the poor man's cocaine. It was cheaper, and yet you could get the same high. And it exploded here. Meth became the worst thing that we ever saw." In the late 1980's Hawaii had a program called Green Harvest to eradicate marijuana. The cheaper and more readily available replacement was meth. A National Institute of Drug Abuse (NIDA) study concluded that since Hawaii residents had their staple drug of choice removed (marijuana) the newer, cheaper and seemingly non threatening alternative, meth, was accepted. "The amount of people here that use ice is increasing because people who couldn't find marijuana were starting to find ice easier. Plenty of guys I know started using ice because they can't get marijuana." Drug

addicts do not care what mind-altering substance they are using. Removing a certain drug from society does not mean that people will get sober. Without a support network available for the addict, they will find a new substance to get high.

I have seen first-hand how meth can devastate a community. It was the one drug that scared me because at no point was I in control while on it. I did it for a few months while running gambling rooms. I hated it from the start, but the amount of money I made working 12-24 hour shifts was too good to pass up. Working in those gambling rooms, I would see mothers and fathers high on meth selling their food stamps to keep getting high. A sad example was a mother crying because she used her daughter's birthday gift money to buy more meth.

Meth users tend to be violent. “One significant finding common to the few ethnographic studies on methamphetamine use is its relationship to violent behavior. Morgan’s 1997 study of methamphetamine use in San Francisco, Honolulu, and San Diego indicated a significant relationship between methamphetamine use and violence for both males and females. For example, 53% and 44% of males and females, respectively, in the Honolulu sample reported engaging in violent acts due to methamphetamine use. Furthermore, a majority of respondents across all sites reported experiencing major psychological problems. Overall, 58% of the males and 52% of the females reported paranoia due to their methamphetamine use.” When high on the drug, meth users feel no pain. In an incident in Hawaii a 30 year old man, high on meth, carrying two knives was shot 14 times before he was no longer a threat to the police.

It is relatively easy to identify a long-term chronic user of meth. Their mouths look like a bomb went off in it with

damaged, rotting teeth. Another sign is scabs all over their body and faces that the addict will constantly be picking. Meth users feel like they have something crawling under the skin, sometimes called "meth mites." After years of heavy usage, blood vessels are destroyed because blood is not properly circulating. The use of this drug also overwhelms the immune system causing sores to heal slower than a normal person. Additionally, skin elasticity is affected by the decrease in blood circulation, which leads to addicts looking decades older than their real age.

MDMA/Ecstasy

Other Names: X, Adam, clarity, Eve, lovers' speed, Molly, peace, uppers, club drug.

How it is Used: Swallowed, snorted, injected, rectally.

Acute Effects: Mild hallucinogenic effects; increased tactile sensitivity, empathic feelings; lowered inhibition; anxiety; chills; sweating; teeth clenching; muscle cramping.

Health Risks: High blood pressure or low blood pressure, fainting, elevated body temperature (greater than 104 F), jaw clenching or lockjaw, rigid muscles, pale skin, dry mouth, agitation and panic attacks, hallucinations, fast breathing or difficulty breathing, nausea and vomiting, delirium, coma, seizures, sudden death.

Telltale Signs: High blood pressure. Confusion. Paranoia. Panic attacks. Anxiety. Depression. Loss of consciousness. Seizure.

How Long it is in Your System: 2-4 days

Random Facts: One of the most popular drugs for the club scene is MDMA (3,4-methylenedioxy-methamphetamine). Cheaper in comparison to cocaine, cleaner and seen as safer than meth, MDMA is the drug of choice for those that attend raves and electronic music festivals. According to the authors of drugpolicy.org "People who use MDMA describe themselves as feeling euphoric, open, accepting, unafraid, and connected to those around them." I use their definition because I cannot explain it any better. For close to five years, every weekend was spent taking copious amounts of MDMA. No one will tell you that the withdrawal from using ecstasy is horrible. I remember times that I was lying on the cold bathroom floor with just my boxers on because of my body overheating. Despite what the rave culture may think, ecstasy is one of the more dangerous drugs to take. If the user does not drink enough water, severe overheating, brain damage and even death can occur.

What makes MDMA so dangerous is that it is rare you ever get pure MDMA. Oftentimes the user is also taking other drugs in combination with the MDMA. It has been over 13 years since I last did MDMA but the green pills had Marvin the Martian stamped on the pill and they were called Green Martians. They were cut with heroin so it was the one that you knew would be mellow. The blue pills had a Lamborghini logo stamped on it and were called Blue Lamborghinis. They were cut with methamphetamine, so the high was more intense, we would equate it to a car engine revving. The high would go between lots of energy to very little energy. The rare times that we got "Pure MDMA," it came in a capsule or small white pill. Why is this important? If you find random pills stamped with cartoon characters, what you just found in your loved ones possession is MDMA.

The FDA has decided that MDMA can be used in clinical studies to help with PTSD. “Scientists are testing how pharmaceutical-grade MDMA can be used in combination with psychotherapy to help patients who have a severe form of PTSD that has not responded to other treatments. Unlike street drugs, which may be adulterated and unsafe, researchers use a pure, precisely dosed form of the drug.” Much like the movement that has legalized marijuana, the next drug classification that is being pushed for legalization is MDMA. It is being marketed as a “chemical blanket” to help those with PTSD. While the studies have produced promising results, what has not been addressed is the long-term dependency that those in the studies may experience.

Benzodiazepines

Other Names: Ativan, Halcion, Librium, Valium, Xanax, Klonopin: candy, downers, sleeping pills, tranks, xanny bars, bars.

How it is Used: Swallowed, snorted.

Acute Effects: Sedation/drowsiness, reduced anxiety, feelings of well-being, lowered inhibitions, slurred speech, poor concentration, confusion, dizziness, impaired coordination and memory, euphoria, unusual excitement, fever, irritability.

Health Risks: Slowed pulse, lowered blood pressure, slowed breathing, tolerance, withdrawal, addiction, increased risk of respiratory distress, and death when combined with alcohol, life-threatening withdrawal in chronic users.

Telltale Signs: Appetite loss. Coordination loss. Drowsiness. Dry mouth. Impaired memory. Nausea. Relaxation. Slowed breathing. Slowed motor function. Vision problems. Clammy skin. Dilated pupils. Erratic behavior. Memory loss. Mood swings. Slow reflexes. Weak pulse Cognitive decline. Confusion. Impaired judgment. Increased risk of accidents. Memory problems. Muscle weakness. Slurred speech.

How Long it is in Your System: 11 hours to 1 day.

Random Facts: I cannot stress this enough, if your loved one has a problem with benzodiazepines, **THEY MUST HAVE A MEDICAL DETOX.** According to Harvard Health, "It might seem logical to immediately stop using a drug to minimize its continued negative health impact, but symptoms like agitation, anxiety, and panic can become overwhelming when you try stopping cold turkey. Hallucinations have been reported in some cases of abrupt withdrawal from short-acting benzos; withdrawal seizures may be possible with short, medium, and long half-life benzodiazepines if discontinued abruptly. With that in mind, professional help for benzo withdrawal may be necessary and could be life-saving." Benzodiazepine withdrawal, done at home and not under medical supervision, has been connected to death in some instances.

Benzodiazepine use is on the rise with the teens of today. A Pew Research study in 2018 had some interesting discoveries. "Adolescent benzo use has skyrocketed," Levy said, "and more kids are being admitted to hospitals for benzo withdrawal because the seizures are so dangerous." At the same time, far fewer kids are seeking treatment for prescription opioid addiction. "When I ask them if they're using opioids, they say, 'No. I wouldn't touch the stuff.' Many teens view Xanax as a safer and

more plentiful alternative to prescription opioids and heroin — with similar euphoric effects." Where are these teens getting access to benzodiazepines? The answer is not always from a street drug dealer but from their parents and grandparents' medicine cabinets. According to the Anxiety and Depression Association of America, 18% of American adults, roughly 40 million individuals, have an anxiety disorder. One of the main methods of treating anxiety is anti-anxiety medication. Zion Market Research estimates that the sale of benzodiazepines will reach \$3.8 billion in 2020.

Alcohol

Other Names: Beer; Wine; Distilled Liquor; Malt Liquor; brewski; vino; moonshine; hooch, booze, spirits, juice, lush, potent potable, sauce, tipple.

How it is Used: Swallowed, rectally.

Acute Effects: In low doses: euphoria; mild stimulation; reduced inhibitions; relaxation. In higher doses: impaired judgment and coordination; fatigue; nausea; slurred speech; impaired vision and memory; sexual dysfunction; loss of consciousness; increased risk of violence and injuries.

Health Risks: Addiction involving alcohol; increased risk of other substance use and addiction for adolescent users; fatal overdose; irregular heartbeat (arrhythmias); stroke; depression; hypertension; increased risk of damage to the fetus in pregnant women; high blood pressure; fatty liver disease; alcoholic hepatitis; cirrhosis; pancreatitis; cancer of the mouth, esophagus, throat, liver or breast; weakened immune system.

Telltale Signs: Hiding or lying about drinking. Getting arrested or getting into legal trouble because of drinking-related behavior. Making excuses for drinking. Drinking at odd times of the day. Loved one is drinking alone. Feeling bad or guilty about their drinking. Drinking first thing in the morning. Feeling like they should cut down on their drinking. Feeling like they need a drink to get through the day. Noticing others making comments about your loved one's drinking. They worry about having enough alcohol for an evening or weekend. Feeling annoyed when others criticize their drinking. Anxiety. Shakes. Diabetes. Binge Drinking. Hangovers. Blackouts. Alcohol Poisoning. Cirrhosis. Hepatitis.

How Long it is in Your System: 12 hours to 1 day.

Random Facts: In the most recent study on alcohol in America, published by the National Institute on Alcohol Abuse and Alcoholism they discovered; "Prevalence of Drinking: According to the 2018 National Survey on Drug Use and Health (NSDUH), 86.3 percent of people ages 18 or older reported that they drank alcohol at some point in their lifetime; 70.0 percent reported that they drank in the past year; 55.3 percent reported that they drank in the past month. Prevalence of Binge Drinking and Heavy Alcohol Use: In 2018, 26.45 percent of people ages 18 or older reported that they engaged in binge drinking in the past month; 6.6 percent reported that they engaged in heavy alcohol use in the past month." Alcohol misuse cost the United States \$249.0 billion in 2010. The day that most Americans call in sick is the Monday after the Super Bowl. Why? Because people are too hungover to show up for work.

Below are some serious statistics that show how much of an effect alcohol has on society. (Retrieved from niaaa.nih.gov)

Family Consequences:

More than 10 percent of U.S. children live with a parent with alcohol problems, according to a 2012 study.

Underage Drinking:

Prevalence of Drinking: According to the 2018 NSDUH, 29.8 percent of 15-year-olds report that they have had at least one drink in their lives. About 7.1 million people ages 12–20 (18.8 percent of this age group) reported drinking alcohol in the past month (18.2 percent of males and 19.5 percent of females).

Prevalence of Binge Drinking: According to the 2018 NSDUH, approximately 4.3 million people (about 11.4 percent) ages 12–20 (11.3 percent of males and 11.4 percent of females) reported binge drinking in the past month.

Prevalence of Heavy Alcohol Use: According to the 2018 NSDUH, approximately 861,000 people (about 2.3 percent) ages 12–20 (2.6 percent of males and 1.9 percent of females) reported heavy alcohol use in the past month.

Consequences of Underage Alcohol Use:

Research indicates that alcohol use during the teenage years could interfere with normal adolescent brain development and increase the risk of developing alcohol use disorder (AUD). In addition, underage drinking contributes to a range of acute consequences, including injuries, sexual assaults, and even deaths—including those from car crashes.

Alcohol and College Students:

Prevalence of Drinking: According to the 2018 NSDUH, 54.9 percent of full-time college students ages 18–22 drank alcohol in the past month compared with 44.6 percent of other persons of the same age.

Prevalence of Binge Drinking: According to the 2018 NSDUH, 36.9 percent of college students ages 18–22 reported binge drinking in the past month compared with 27.9 percent of other persons of the same age.

Prevalence of Heavy Alcohol Use: According to the 2018 NSDUH, 9.6 percent of college students ages 18–22 reported heavy alcohol use in the past month compared with 6.9 percent of other persons of the same age.

Consequences—Researchers estimate that each year: 1,825 college students between the ages of 18 and 24 die from alcohol-related unintentional injuries, including motor-vehicle crashes.

696,000 students between the ages of 18 and 24 are assaulted by another student who has been drinking.

97,000 students between the ages of 18 and 24 report experiencing alcohol-related sexual assault or date rape.

Roughly 20 percent of college students meet the criteria for AUD.

About 1 in 4 college students report academic consequences from drinking, including missing class, falling behind in class, doing poorly on exams or papers, and receiving lower grades overall.

Perhaps you are wondering why I have bombarded you with more statistics concerning alcohol than all the other drugs combined. Alcohol is the most socially accepted, mind-altering substance. Even within church circles, there are those who argue that alcohol is only a problem if someone gets drunk. While we will discuss this in a future chapter, I want to make it very clear that America has a massive problem with how much alcohol we consume. Phillip Cook's book *Paying the Tab* revealed that "The top 10 percent of American drinkers - 24 million adults over age 18 - consume, on average, 74 alcoholic drinks per week. That works out to a little more than four-and-a-half 750 ml bottles of Jack Daniels, 18

bottles of wine, or three 24-can cases of beer. In one week. Or, if you prefer, 10 drinks per day." In the depths of my addiction, 10 drinks were what I would have before dinner. Another sobering stat that I wanted to share: During my time working in the recovery field, I cannot think of a single female who was also in treatment that was not sexually abused. Nothing of value happens when someone is drinking.

Now What?

What is truly terrifying is that the list I provided, while long, does not encapsulate all of the mind-altering substances out there. In addition to the illicit drugs listed, many of them also have a synthetic form available. The reason I have not listed them is that there are too many to count. They are often found in local smoke shops under names like K2, Spice, Bath Salts, etc. What makes these drugs so dangerous is that they are technically legal. As soon as they are classified as an illicit drug, all the manufacturer needs to do is change one molecule, and they are legal again. Scary, but true.

For the past decade, the opiate epidemic has been decimating communities and families around the nation. While it is still impacting adults, it is not as bad as it was previously. Unfortunately, that does not mean that the nation's addiction problem is going away. Cheap and pure methamphetamine is flowing into our cities. Teens have been scared away from opiates but are turning to benzodiazepines as their drugs of choice. There has been a threefold increase in the abuse of benzos in the last 10 years. The upcoming benzodiazepine epidemic that is going to hit our nation is going to be a monster to be dealt with and addressed. Those that are coming off benzos should be sent to a medical detox. While suggested, this was not needed for those that were detoxing from other

drugs. It scares me to think of the deaths that will be caused from teens and benzos. Pray for our nation.

The Drug epidemic goes in cycles. In the 1960s, it was marijuana. During the 1970s, it was heroin and in the 1980s, it was cocaine. In the 1990s, it was methamphetamine and in the 2000s, it was ecstasy/cocaine. During the 2010s, it was opiates, and now a return to methamphetamine seems to be the shift for 2020. What does this all say? America has a drug problem. It does not matter what the mind-altering substance is, Americans like to get high. In a 2019 study published by the Rand Corporation, Americans spent \$150 billion on just marijuana, cocaine, heroin, and meth in 2016. The amount spent on alcohol was \$158 billion. If we add them together, Americans, on average are spending close to \$1 billion a day on mind-altering substances. That is a startling figure.

Points to Ponder

Can I identify effects, risk or signs with my loved one?

If yes, do not worry. This book will help you to navigate the next steps.

My loved one is on more than one mind-altering substance. Is there hope?

Yes, there is hope. When I went through treatment, I was called a garbage can. In the year before I went into treatment, I had done cocaine, ecstasy, marijuana, opiates, and alcohol. If I could get sober, so can your loved one.

Is it normal to be overwhelmed with the number of drugs and some of the random facts provided?

Absolutely. Looking at the totality of mind-altering substances out there and the amount of money being spent on drugs and alcohol should make your head hurt.

Chapter Two: Three Views of Addiction

Now the works of the flesh are evident: sexual immorality, impurity, sensuality, idolatry, sorcery, enmity, strife, jealousy, fits of anger, rivalries, dissensions, divisions, envy, drunkenness, orgies, and things like these.

“The world can do almost anything as well or better than the church...except the world cannot offer grace.”

-Gordon McDonald

I will briefly present the three views on addiction: Addiction as sin, addiction as a choice, and addiction as a disease. It is not an exhaustive explanation but will provide an overview of the ideologies behind addiction treatment. What view you take will ultimately impact what type of treatment you will choose for your loved one. I have worked in the field of addictions long enough to have helped individuals who held all three views that will be discussed in this section.

View 1: Addiction is Sin

Jay Adams proposes that sin covers a multitude of problems and bad behaviors. It does not matter if it is the conscious or unconscious at work. The foundational issue will be the selfish desires of man to please himself, which will lead to absolute depravity. In essence, there are no new diseases or mental illnesses that are popping up in the world. At its core, the problems that face humanity today are the same they have always faced. Sin is the root cause, and the proper way to address life-dominating sins is through obedience to God and His Word.

In his book *The Heart of Addiction*, Mark Shaw proposes that if someone is not sure that addiction should be classified as a sin, they should present scientific studies

that prove it is a disease. The disease model for addiction is a theory that has never been proven and is man-made. When looking at addiction, the issues that need to be addressed are whether it is a "sin nature" or a "disease concept." The problem is drunkenness and idolatry, which cannot be ignored. It is a heart issue where the worlds' approach and scripture cannot be merged together. The "disease concept" has gained credibility because society has embraced it as a medical issue backed by real science. It is a lie based on a hopeless view of addiction, which offers the addict no expectations of ever overcoming the disease.

View 2: Addiction is a Choice

Christians who suggest that addiction is not a disease are ridiculed as being backward thinking or anti-science. In a review of the book *Cracked*, the reviewer wrote a scathing expose on the truths of psychiatry; "I had read several similar books, and did not want to waste my time on one contrasting bio-psychiatry with some 'positive' Christian vision." There is a growing section of the secular world that agrees that addiction is not a disease. They are seen as valuable contributors to the discussion, even from those who discredit Christian counselors. Some proponents of this way of thinking are Stanton Peele, James Davies, and Herbert Fingarette.

All attempts to identify and define "alcoholism" have failed because the concept itself is fundamentally flawed. "Alcoholism" exists in our language and in our minds, but not in the objective world around us.....So many words have been written and spoken about "alcoholism" that language alone "confirms it as a reality."

What was once seen as a topic that only Christians would argue against is becoming a current topic amongst those

in the addiction field. This is important in regards to the Church's stance on addiction because this is an opportunity to reassert its claim on the care of souls for addicts. George E. Vaillant, a respected psychiatrist in the addiction field, said, "I willingly concede, however, that alcohol dependence lies on a continuum and that in scientific terms, behavior disorder will often be a happier semantic choice than disease." One of the primary voices who speak against the disease model is Stanton Peele, who has written extensively on the topic, expands Vaillant's statement:

Disease conceptions of misbehavior are bad science and are morally and intellectually sloppy. Biology is not behavior, even in those areas where a drug or alcohol is taken into the body. Alcoholism involves a host of personal and environmental considerations aside from how alcohol affects the bodies of drinkers. Furthermore, once we treat alcoholism and addiction as diseases, we cannot rule out that anything people do but shouldn't is a disease, from crime to excessive sexual activity to procrastination.

While Peele was one of the few clinicians who did not see addiction as a disease nor a sin issue, there are a growing number in the field of addictions who are supporting his claims.

View 3: Addiction is a Disease

According to the National Institute of Drug Abuse, addiction is considered to be a complex illness. The characteristics are an intense and sometimes an uncontrollable desire which persists even though there are consequences that are potentially devastating.

According to the experts, it is a brain disease that starts with the repeated use of drugs or alcohol. Over time the drug use consumes the individual, and it becomes a compulsive behavior. The prolonged consumption of the drugs compromises the brain function and causes the brain to short circuit. This rewiring of the brain will affect learning, memory, motivation, and inhibitory control over the individual's behavior. Scientists have proposed that genetics, age, plus environment are all factors that contribute to who does or does not become an addict.

What is not clear are the conditions that specifically cause certain people to be more predisposed to an addiction than others who are genetically similar.

According to medical professionals, addiction is a learned behavior, and the recovery process will take time. This is due to memories of the past or physical dependency, requiring therapy and professional treatment to overcome addiction. Dr. Howard Rusk, who teaches out of New York University states, "We must realize that mental problems are just as real as physical disease, and that anxiety and depression require active therapy as much as appendicitis or pneumonia. They are medical problems requiring medical care." The link between addiction and other mental illnesses are commonplace within addiction treatment. Treatment centers that focus on both mental illness and addiction are classified as dual diagnosis centers and have a medical doctor in addition to Certified Alcohol/ Drug Abuse Counselor (CADC's).

Three Views, Three Different Approaches

The three types of views have corresponding treatment options.

1. Biblical Discipleship (Addiction is Sin)
2. Mindfulness (Addiction is a Choice)
3. 12 Steps/Christian 12 Steps (Addiction is a Disease)

A Biblical Discipleship model is rarely found in treatment centers. You have to search for it. I have heard of possible ministries that do the discipleship model that I do with the guys that I work with, but it is rare. It requires a lot of time and effort. In churches that do not have a dedicated discipleship pastor, this can be done with multiple members of the church body working in conjunction to help the addict. The tricky part is finding the individuals who are willing to tithe both their finances and time.

The mindfulness movement is a newer approach to addictions. One of the examples of the movement is the Unbeatable Mind. "Intuition comes largely by thinking with your gut and your heart instead of just your head." It has been gaining traction within certain sections of the Armed Forces. Spec Ops training includes a focus on opening up your perception so that you are able to "see" more. I only became aware of this type of treatment when I was asked to formulate an online treatment program for first responders and veterans. They do not approach addictions as a sin or a disease, but rather a choice that can be overcome through mindfulness exercises.

The 12-Step/Christian 12-Step model is the most popular option found in the secular world and in the Christian world. These organizations, for the last 80+ years, have

been at the forefront of helping addicts. For example, they are present, willing to help and have an organizational structure that cannot be discounted. Millions of addicts have been able to achieve sobriety through their programs.

Now What?

There is a reason why I did not go into extensive detail on the pros and cons of the various views and approaches. You are dealing with the crisis of determining what is the best course of action for your loved one. The book's intended purpose was to provide a "A Simple Guide for Families of Addicts." I wanted to keep the focus on education and to provide an overview of what families need to know and expect as they enter the next season of their life admonishing, encouraging, helping, and being patient with their loved one.

Points to Ponder:

Does it matter which worldview I hold when looking for treatment options for my loved one?

No, it does not. I will provide a more in-depth and comprehensive explanation of various treatment options in Chapter 3.

So why is this chapter important for me?

You need to get help as well. Just because your loved one goes away for 30-90 days does not mean that you get a vacation. Some things need to be changed at home, and you will have to make changes.

Can I pick one worldview and my loved one pick another?

Yes, their personal recovery journey is their own, and you will have your journey. I hope that both of you have been transformed for the better by the end of this season of life.

Chapter Three: Family Decisions

Whoever conceals his transgressions will not prosper, but he who confesses and forsakes them will obtain mercy.

“We are not fundamentally free; external circumstances are not in our hands, they are in God’s hands, the one thing in which we are free is in our personal relationship to God. We are not responsible for the circumstances we are in, but we are responsible for the way we allow those circumstances to affect us; we can either allow them to get on top of us, or we can allow them to transform us into what God wants us to be.” - Oswald Chambers

Who is to blame?

One of the most common comments I hear when working with the families of addicts is that either mom, dad, husband or wife says “It’s my fault _____ is an addict.” I am here to tell you, that is categorically false. Unless you shoved a needle in your loved one's arm, poured the alcohol down their throat or lit the bong for them to smoke weed -- It’s. Not. Your. Fault. While parents and spouses are oblivious to their loved one's substance abuse while there are rare cases where parents actively contribute to their child's addiction by paying for their drugs (yes, it does happen). I started doing marijuana when I was 17, but my parents had no idea. Since my grandparents needed help getting to and from hospital visits, I slept over at their homes most of the time. It was relatively easy to avoid detection since I was rarely home. By the time I was a full-blown drug addict and alcoholic, I was no longer living at home. No one forced me to do drugs. I made a choice to do it.

If your loved one tries to blame you for their addictions (for example, past hurts, did not get what they wanted when they were younger, you moved too many times, divorce, fights, etc.), they have not taken responsibility for their actions. I tell the families that I work with, "You'll know they've turned the corner when they stop blaming you and apologize for the damage they have caused." It is not foolproof, but when the guys I have worked with finally admit that to their loved ones, their likelihood of staying sober goes up exponentially. Shifting blame to others is something where addicts are professionals. Taking personal responsibility is one of the signs that the addict finally starts to realize that the problem causing their addiction is the person they see in the mirror every morning.

Now that you have information at your fingertips, you can be blamed for not acting. It is never easy to admit that your loved one is struggling with substance abuse. When I first got sober, my parents did not want to tell their church members where I was going. Speaking to pastors, I sometimes hear, "We don't have anyone struggling with addictions at our church." It has been ingrained in our brain that addicts are homeless, destitute, or undesirable. I have seen doctors, lawyers, dentists, pastors, music ministers, professional athletes, and high school kids go through treatment. In the classes I teach at a seminary, I ask the class if they know anyone who has or is struggling with addictions, and every hand in the room is usually raised. No matter how hard we try to sweep addictions under the rug, the reality is that they are real and will not be going away anytime soon.

Why did this happen?

To be blunt, your loved one made a very poor decision to dabble with drugs or alcohol. Removing all the theories on addiction (there are tons out there), the bottom line is that they chose to ingest a mind-altering substance at some point in their past. Most start with a cigarette, beer, or marijuana and progress to harder drugs. I think that the most significant gateway drug is alcohol. Cigarettes are perceived as gross, and marijuana is not as easily accessible. That leaves alcohol. It is on TV, movies, music, and is usually found in homes. There is no stigma involved in consuming booze. It is socially acceptable and can be found at every single store out there. My take is bound to upset more than a few people, but I have seen it while working in treatment.

Remember, I told you that I used to work at a rehab center? One Friday night, a bunch of clients decided to celebrate their graduation from treatment. Their genius idea was to sneak away to the corner store and buy a 24 pack of Bud Light. When later asked why they thought it would be okay, they said, "We are drug addicts, we can drink." As crazy as that sounds, I completely understand that rationale. When I went to rehab, I was there because I had a cocaine and ecstasy problem. My original plan was to continue to drink Jack Daniels and smoke marijuana after I returned home. What I learned was that I probably would never go straight to cocaine, it would be a progression back to my drug of choice. I would have a few drinks want to drink more, and then I would call a drug dealer to get high. The gateway back to my life of being a cocaine addict, it would be alcohol.

Factors to Consider: Detox, Inpatient Rehab, Intensive Out-Patient Rehab, Nonprofit Rehab, or Sober-Living?

Detox

Most treatment centers that you contact will be adamant that your loved one goes through a detox center. I will always err on the side of safety and agree that detox is needed. The beginning stages of sobriety are already hard, so assisting the addict while they are coming down from the drugs is wise. So what is it like for those that need to go through detox? Your loved one will be given a cocktail of medications to help the withdrawal from their drug of choice a little easier. A typical stay in a detox center varies from 3-5 days, depending on the quantity and type of drug taken. Longer detox times can occur for those detoxing from benzodiazepines and alcohol. I knew a young man who took over three weeks to detox from benzodiazepines. During that time, they will catch up on sleep, sometimes attend inhouse 12 Step Meetings, but rarely will they have one-on-one counseling sessions since detox centers are often separate from inpatient treatment centers.

Medical detox is not cheap, even with insurance. Depending on the amenities, client to worker ratio, and location, detox can be between \$1,000 to \$1,500 for a 3-5 day stay. If your loved one requires more time, that number can change. I believe it's money well spent. As I tell my classes, "You can't counsel a dead person." Make sure that you look at reviews and do your due diligence. There are shady detox centers that do not do their job to the best of their abilities. More and more treatment facilities are being shut down due to mismanagement, fraud, and neglect. The best way to determine if a facility is reputable: word of mouth references. Online comment sections are not always reliable where disgruntled ex-

clients can post scathing reviews. However, if the same complaints come from different people over a long period, caution would be encouraged.

Inpatient Rehab

Inpatient rehab is the most expensive of all options for treatment. For the well-known centers, you are looking at \$20,000-\$30,000 a month. If you are looking at the high-end facilities with yoga, massage, personal chefs, etc., it is not uncommon to be paying over \$100,000 a month. These prices do not include the weekly spending money, hospital visits, or medications that your loved one will need during treatment. Some of you will have excellent health insurance that should cover most of the cost. Still, due to fraud that has been occurring with unscrupulous business, my friends in the recovery field say that fully covered drug and alcohol treatment is coming to an end. When I went through treatment in 2007, my insurance did not cover rehab, and my parents had to pay for it out of pocket.

Be aware that the intake counselors for rehabs make some outrageous promises. Ensure that whatever you are promised is made in writing, signed, and notarized by the treatment center. You have to double and triple-check how many days of coverage your insurance company will cover. I have been in situations when clients were told halfway through their stay that the insurance ran out, and unless they came up with the cash, they would be asked to leave. Forbes estimated that in 2015, the Addiction Treatment Industry was an \$85 billion market. There is a deluge of television, internet, and newspaper ad campaigns that prop up the disease model in the public's mind. Calling addiction a disease, instead of a behavior disorder, is an effective way to convince the addict that they have to admit their addiction. It then gives them a

ticket into the health care network. With the introduction of the Affordable Care Act (ACA), people with pre-existing medical conditions could not be denied coverage. Unscrupulous rehabs found a way to take advantage of how the ACA was written. They are signing up addicts for coverage, overcharging the insurance companies for treatment that was not given, and once the addict used up all the available coverage that the insurance company would cover, would promptly discharge the addict from their program.

Do your due diligence and research the rehabs where you will be sending your loved one. Just because a facility claims a 96% success rate, does not mean that 96% of those that went to their facility stayed sober. It just means that 96% completed treatment and did not leave against clinical advice. Remember, while some rehabs have good intentions, some of them only care about making money. Even when a rehab states that 50% of those who completed treatment are still sober a year later, that does not tell the whole story. That percentage is based on those who returned the survey. For example, say 100 people went through rehab in a given year. If 20 returned the survey, and ten said they are sober, the rehab will say they have a 50% success rate. In reality, it's closer to 10%. The best form of advertisement is word of mouth.

So what do you get for \$20,000-\$100,000 a month? Your loved one will live on site. House managers will monitor clients, ensure that they attend all meetings, and conduct at least three drug tests per week. All meals and transportation to offsite events and meetings are covered. One-on-one with a licensed therapist can happen at any time throughout the day. At most, you will see a therapist one-on-one, twice a week, if you are lucky.

A typical day looks like this:

6:45am Wake Up
7:00-8:00am Breakfast
8:00-9:00am 12-Step/Christian Track 1st Session
9:00-9:30am Break
9:30-10:30am Time for assignments
10:30-12:00pm Group Therapy
12:00-1:30pm Lunch
1:30-2:30pm 12-Step/Christian Track 2nd Session
2:30-5:00pm Gym/Beach/Relax
5:00-6:00pm Dinner
6:00-8:30pm 12-Step Meetings off Site
9:00-10:00pm Free Time
10:30pm Lights out.

Most rehabs have designated chores. If the client does not do them, they lose privileges. Gym and activities are some of the main privileges that clients hate to lose. Any opportunity to leave the rehab is something to look forward to and enjoy. Another privilege/highlight of your week is when the treatment center takes the clients off campus to shop for necessities at Walmart. It's quite a sight to see grown men excited to spend an hour at Walmart. Visits to Walmart are also one of the first tests to see how addicts respond to freedom even though the clients know that a house manager will be looking at what they bought, at least once a month you will have someone trying to sneak in a bottle of mouthwash with alcohol.

Just because your loved one is at a residential treatment facility, this does not guarantee they will remain sober. Clients have the freedom to leave at any time; it's not a lockdown facility. If they leave against clinical advice, the rehab reserves the right to kick them out of the

program. Odds are you will lose all of the money that you have spent, and you are back at square one. Therefore, I suggest families have a pastor/mentor/life coach willing to work with the treatment center to talk to the addict when they threaten to leave. Addicts leaving treatment happens more often than I'd like to admit, and when it does happen, it's \$20,000 down the drain.

Intensive Outpatient (IOP)

This treatment option does not require the addict to stay on site. They are allowed to return home and attend treatment classes usually Mon-Fri 8 am-5 pm. The same classes that are available for inpatient are offered for those attending IOP. When I was going through treatment, this was what was offered during the second month of treatment. Due to changes in how insurance would be billed, IOP has become the option that most families have chosen in the last few years. They would pay to have their loved one stay in a sober-living in conjunction with the utilization of IOP.

If you can afford to send your loved one to both IOP and sober-living, spend the extra needed to get them into the residential facility. However, if this is the only option you have, make sure that the IOP or sober-living is doing at least three drug tests per week. I cannot stress this enough. In the beginning stages of sobriety, drug tests provide accountability and a sense of completing a task that was once impossible to do. When I finally peed in the cup and showed that no drugs were in my system, I was so happy. It is the little things that mean so much when you first get sober. For me, realizing that I was able to stay sober long enough to pass a drug test was such a huge accomplishment.

Nonprofit Rehabs

The two leading organizations that provide treatment in a nonprofit setting are Teen Challenge and the Salvation Army. I have nothing but good things to say about these organizations. In a recovery field where profits are sometimes emphasized over people, I commend organizations that provide free care. They go out of their way to fundraise throughout the year and rely on donations to keep their doors open. There are other smaller nonprofit rehabs that provide the same services. Some have a passion for helping the homeless, veterans, abused women, etc. Whenever these organizations ask me to speak or attend fundraisers, I will be willing to go and offer my services.

If they are so good, why do I not automatically suggest these to families that I help? Since it is a nonprofit, the addict-to-house manager ratio is usually 30-to-1 versus 15-to-1 at a for-profit facility. When it comes down to addict-to-counselor, the ratio is 15-to-1 for a nonprofit and 7 to 1 for those that charge money. That's just the nature of the recovery machine. Those in for-profit rehabs tend to have more attention given to them, but it does not mean that they are getting better counseling. Some of the best counselors I know got their start at free treatment centers. Ultimately, the choice is up to the family based on what they can afford.

Sober-Living Homes

If there is an option that I have the bias towards, it is sober-livings. The reason being is if the sober-living home is run properly, I believe that it is as effective, if not more effective, than any \$100,000 inpatient facility. I personally witnessed as well as a part of a 16-bed sober-living home that saw a group of about 14 young men

reach one year or more of sobriety together. Those stats are unheard of in the recovery world. What made that group so special? They held each other accountable. It was a brotherhood where they loved each other unconditionally and put aside whatever disagreements they had all to support each other in their stated desire not to die. Yes, it was more than just staying sober. This was during the opioid epidemic where people in South Orange County California were dying every week.

That group of young men went to the gym, movies, meetings, Starbucks, grocery shopping, etc., together as a band of brothers. It was a beautiful thing to witness. It was a flash in the pan that never happened again during my watch, and I have never heard of it happening since. Do not get me wrong; they still fought and had disagreements. But when push came to shove, they took care of each other. When one of them lost a friend outside our sober-living home to an overdose and death, it was not uncommon for other members of the home to accompany them to the funeral. They would take off work just to support one another during hard times. A properly run sober-living home operates as a family unit. When that is done, miracles can happen.

Some of my fondest memories in my life center around my time running sober-livings. Lifelong friendships that I still have today. Just an hour ago, I recorded a video message for my former roommate/assistant house manager, who celebrates his ten-year sober birthday next week. We may not talk every week, but he is still part of my life. I moved six years ago, and the last time I visited California, over 20 of my former "boys" all had a sober-living reunion. I call them my boys for a reason; some were like my brothers, and others were like my sons. The love I have for them cannot be put into words. By the grace of God of the 100+ boys that were my

responsibility, only one died while under my care. How is that even possible? Prayer, tons, and tons of prayer. I put all my boys on prayer lists at various churches around the nation.

Despite my preference for sober-livings, there are also some horrible sober-livings out there only to make money. I have heard horror stories that describe owners of the home selling drugs to the clients; houses that were packing 3-4 beds in a room; workers who never drug tested their clients, and even taking them out to party. Once again, make sure you research and ask questions before placing your loved one in any type of recovery facility.

Not In My Backyard

An honest look at Treatment Centers, IOP, and Sober-Living Homes needs to happen because currently, only one side of the story is being discussed. Not just in California, but everywhere. I decided to take a look at reviews here in Texas and Hawaii. They are no different from what is being said about the current problems in South Orange County. Here are the top five things that seem to be a consistent belief regardless of where they are located.

1. Everyone deserves a second chance, just not in my neighborhood.
2. “These people” is what those struggling with addictions are called.
3. My property value is going down!
4. I’m afraid to let my children play in the streets since these druggies moved in.
5. This place is only in it for the money, they don’t have a 100% success rate.

This is a sad state of society today. Let me just address each point on the list as nicely and truthfully as possible.

1. If everyone deserves a second chance, but not in your neighborhood, where are we supposed to go? Would you say the same thing if it was your son or daughter who needed a safe place to live? The reality is that every family has someone who needs help. Maybe you just don't want to accept it. I hope that if/when you have a loved one who requires a place where they can work on their sobriety, they won't have to deal with judgmental individuals who will put them down for trying to get their life together. Just because society is used to equating substance abuse to homeless people doesn't mean the only place to get help should be relegated to a shelter downtown where it is out of sight and out of mind.

2. Are those who struggle with substance abuse 2nd class citizens? The only difference between someone with substance abuse issues and those who don't is... nothing. We are all children of God, "these people" might have a problem with drugs or alcohol. Our sin is for the whole world to see and judge us. But it is no different than the husband who verbally abuses his wife, the degenerate gambler who loses the family life saving, or someone who has 15 maxed-out credit cards buying too many clothes and shoes. "These people" are professionals such as doctors or lawyers, pastors, deacons, truck drivers, students, etc. Yes, the vast majority of those living in sober-living homes are younger, but they are future doctors, lawyers, and pastors. How do I know this? Because some of those I worked with now have those jobs. The irony is that those who call us "these people" are sometimes getting drunk every night, but they can make it to work, or since they have a medical marijuana card, smoking weed doesn't mean that they have a substance abuse issue.

3. Probably the saddest excuse for being against sober living homes/rehabs. I'll just leave it with this question. How much is a life worth? If that was your son, daughter, father, mother, or cousin who struggles with substance abuse, how much would you be willing to pay for them to get sober? If you've lost a loved one to substance abuse, how much would you pay to have them alive today? It's weird because I have been in sober-living homes where every weekend the neighbors would have parties so loud that the cops should have been called at 1-2 am with the music blasting, cars speeding down the street, and fights happening---yet the sober living home was the black sheep of the block.

4. I've worked in the field of substance abuse for almost 12 years. Just because someone struggles with addiction does not mean they are a child molester. The streets are probably even safer because those trying to get their life right would be even more protective of the community. At the homes I have run, when the neighbors take the time to know us, we are the ones that help the elderly with basic home repairs (for free), we are the ones that help when people need things moved (for free), and if we see a kid in the street and about to get hit by a car we are the ones that will run into the street to slow the car down and get the kid out of the way.

5. No place has a 100% success rate. Impossible. No one is perfect. Regarding those in it for the money, yes, they exist, but a vast majority of places that are staffed with the right kind of worker are not in it for the money. While it may seem that place is making a lot of money, it could have a full house for one month and then have the preceding six months with less than half the beds filled. If it were only for the money, those homes would just close. Owners of those homes are losing money every month, but stay open for those that are already there. They do not

want to throw them out on the street. Some places must close when points 1 through 4 are so prevalent that it is impossible to keep it open.

My plea to everyone is: Take a minute to take a step back. Think about how you would want to be treated if you were struggling with a life-dominating issue that is life or death. What if you or your family member was one of those living in a sober living home? If you want to produce change, do something that will make it possible for those trying to get their life back on track to have the best chance of living. There is no such thing as a perfect sober living home. Relapse, overdose, and possibly death are associated with these homes. Instead of demonizing a place, communicate with the homes about things that they can fix.

Want to be awesome? Let a Treatment Center, IOP, or Sober-Living Home know how YOU can help them out. Some of these guys are far from home and have not had a home-cooked meal in a while. It would probably mean the world to them if someone took them a nice dinner or even just homemade chocolate-chip cookies. Many of these guys do not have a place to go for the holidays. Want to be extra special? Invite someone you've met that is living in a sober-living home over for Christmas dinner. Finding a job while residing at a sober-living is hard; some have criminal records. Maybe get to know the owner of the house manager and ask them who they think is worthy of a job. What I am trying to say is, sadly, Treatment Centers, IOP's or Sober-Living Homes are not going away. How would you feel if you were successful in closing one of them down, and you find out that those who were in the house were now homeless, even though they have been sober almost a year? How would you feel if you found out one of those who were homeless was so distraught with not having a place to live that they

overdosed and died? Granted, it was their choice to do drugs. I am not taking away personal responsibility, but you were the one who decided to beat up on someone who was already in a fragile state of mind. For those looking to shut down sober living homes, I pray that you realize that the people living in those homes are no different than you are. They are people who have value, who need love and support.

Factors to Consider

There is no such thing as a perfect place for your loved one to assist them on their journey to sobriety. Not even the sober-living home that I ran was perfect. Each option has its pros and cons. In an ideal situation, this is what most in the recovery field would suggest to a family thinking of sending their loved one to treatment.

Medical Detox (3-5 days) → Inpatient Treatment (1 month) → IOP (1 month) → Sober Living (9 months to 1 year)

I must admit that I did not follow that model. My entire stay for treatment was two months, but my story is, unfortunately, an anomaly. I had three pastors willing to sacrifice their time and money to help me when I first got back from treatment. They intentionally invested in me for the first year after I got sober and continued to invest in me today. Over half of the guys that I have worked with that followed the model above were able to maintain sobriety for over a year or more. Of all the guys who followed that model, none are dead today. Not all are sober. Some have decided that they can occasionally drink a few beers or smoke a joint, but the percentage that are back doing heroin, meth or cocaine (that I know of) is zero. That is a pretty bold statement, but I am still in

contact with seventy of them on various social media platforms. One is now a university professor teaching sociology (which is mind-blowing, because he did not like talking in front of people!). Another is about to graduate as a nurse. More than a few are married with kids. Those are the ones I am most proud of, living a good life without the mind-altering substances. Seeing them being good husbands and fathers makes my heart happy.

What Now?

Don't give up, don't ever give up. – Jim Valvano.

I can still remember the speech he gave at the ESPY's a few months before he died from cancer. When I got sober, I was 30 years old, with no college degree, lots of work experience, but no pieces of paper to help me get a job. I had no desire to go back to school, partially because I thought I killed too many brain cells ever to pass a class. For a season of my life, I was a life coach, and Zach was one of the guys I worked with while running the sober living home. He had asked if he should go back to school to finish his degree. Being the CrossFit guy I used to be, I said, "Of course, always finish what you start." That mantra was based on a WOD (workout of the day) I failed to do at my coaches' garage in Hawaii. I had been injured, couldn't finish the WOD, and had to go back to Cali. When I went back a few months later, he made me finish what I had started. Anyway, Zach asked me what I got my degree in. Three days later, I re-enrolled in college to get my degree.

Going back to college was hard. Tests scared me. In the first few classes I had, I struggled a lot. Writing came easier. Tests that had essays were a breeze. Tests that required fill in the blank or multiple choice options...fail.

The goal was to finish my undergraduate and just go back to running sober-living homes and teaching classes at rehabs. I was content with that. But it was time to take the next indicated step. For some reason, I was offered a scholarship to pursue a Master's degree. Once again, I still hated tests but after prayer and consulting with mentors... off to Texas, I went. Fast-forward six years, and I have graduated with a Ph.D.

One of the reasons I kept going for more is because I have been told that it gives others hope. I hope that they can shoot for the stars, hope that maybe one day they can chase their goals. I am not the smartest person on the planet, but I don't give up. My hope for anyone that reads this is that they embrace challenges. It's okay to fall 7 times; just get up 8. The most rewarding things do not come easily. It's hard and takes sacrifice. Most important is to learn to trust God. On my own, none of this would have been possible. Yet every step of the way, He has opened and closed doors. Sometimes I can be an idiot and would bang my head on closed doors. When I trust Him and walk through the doors He has opened, amazing things have happened. My self-worth used to be based on people, places, and things. It was when I embraced who I am through His eyes that the miracle truly began. If you have a family member who is struggling and does not know how they will overcome their life dominating issue, there is hope. When it comes to your loved one...don't give up. Don't ever give up.

Points to Ponder:

I can't afford to send my loved one to any of those options. Are they doomed?

No, they are not. I know multiple individuals that just decided one day that they had enough quit cold turkey and are still sober today. I honestly believe that a properly

run church ministry that does discipleship correctly can be just as effective as any option listed above.

What should I look for when researching treatment options?

Ask if you can speak to former clients, read reviews online. When you find a bad review, ask the facility, especially what the concern was and how it was resolved.

Chapter Four: They are Coming Home

*Restore us to You, O LORD, that we may be restored;
Renew our days as of old. - Lamentations 5:21*

*Tell the World I'm coming home. Let the rain wash away
all the pain of yesterday. I know my kingdom
awaits and they've forgiven my mistakes. I'm coming
home, I'm coming home. - Skylar Grey*

Preparing the Home

I have witnessed families that thought just sending their loved ones to treatment will fix everything. Hate to burst your bubble, but this is just getting to the starting line. You can take the first few days to relax and breathe since your loved one is finally away getting help. The reality of a 30-day treatment is that your loved one is undergoing a month-long detox. Their brains won't be genuinely functioning until the 60-90 day mark. It takes a while to figure out how to live life minus the drugs and alcohol. I thought I had all the answers after treatment until I went back and read my notes from the journal I kept during the first 30 days. Nothing made sense; it was just gibberish on the paper. Your loved one needs time to figure stuff out.

This also applies to the family. Some have known that their loved one has struggled for years. You need time to recover from the chaos. Adjust to not having to wake up every morning wondering if your loved one will be dead or alive in their bed. For those of you who just realized your loved one was an addict, the same goes for you. It's like a bomb just went off in your home, and you are shell shocked. This does not mean you just take a break for 30-90 days and do nothing. You have work to do yourself.

I advocate that you see a Biblical Counselor (that's what I do) or someone you can trust. But regardless of your belief, you need someone that is going to help you navigate the emotions and feelings that you are going through; an individual that you can ask questions about the concerns you are going through. The next piece of advice would be to find a sober-life coach that can help your loved one and help you figure out what is going on. Part of the reason I wrote this book is to help people who do not have access to someone who provides them no-nonsense advice about how to deal with addicts and what to expect. I have been doing this for over a decade and families have been begging me to put what I do into print. They have looked over this book and have assured me I have covered all the questions they had when dealing with their loved ones.

Sign a Contract

Not everyone can afford to send their loved one to treatment, and the only option is to bring them back into the home environment. When this happens, one of the first suggestions I give is to have a written contract with expectations for living in the home again. A contract is also a tool that can be used by those who have a loved one coming back from treatment.

Sample Contract

- Need to have a sponsor/mentor. Meet at least twice a week.
- Need to see a counselor every week.
- Attends church with the Smith's on Sunday morning and at least one other church gathering.
- For those that will be going the 12 Step route, attend 3 meetings a week.

- Family dinner Thursday and Friday.

Suggested Schedule:

Monday: Mentor/12 Steps

Tuesday: Counselor

Wednesday: Church/12 Steps

Thursday: Family Dinner

Friday: Family Dinner

Saturday: Mentor

Sunday: Mariners Mission Viejo with Smith's

Rules:

- Random drug testing. Will go to Redwood Toxicology Lab upon request from any family member.

- Weekly chores. Will rotate with the squatter, trash, or ashtray duties every month.

- No drugs or alcohol.

- Will not hold onto meds. Will be given daily until trust is earned to correctly take them.

- Attitude: Show a positive approach toward assignments, courteous in dealing with others, constructive and helpful.

- Attitude toward supervision: Responsive to training, instruction and responds well to constructive criticism.

- Initiative: Sees what needs to be done and does it without being asked, willing to help with projects.

- Physical energy: Able to work consistently with only moderate fatigue.

- Dependability: Able to do required jobs well with little supervision or reminding.

- Planning: Develop ability to schedule, plan and think ahead, prioritize and execute.

- Work production: Work diligently, complete work expected, able to be relied upon to accomplish your fair share of work.

- Communication: Be pleasant to interact with, considerate of others needs and feelings.

- Promptness: Be on time for all agreed upon events, on time to meet with others, work, church, etc.
- Personal Appearance: Everyday be appropriately groomed, dressed.
- Be humble, honest, engaging with others, fun to be around.
- Zero Tolerance for alcohol, illegal drug use, or abuse of prescription medication.

Consequences:

One Strike and You're Out.

The contract above was one for a family where the son also worked for the father, this added another layer that needed to be included with the contract. This is a baseline that you can modify to come up with your own contract that fits the family's needs. Make sure that everyone signs it that lives in the home. There is usually one parent who is the softie and one who is the iron fist. Both need to agree on how to move forward. Addicts will always find the weakest link to exploit. In the case above, an interesting shift took place after their son moved back home. The father, who was once the softie, became the iron fist while the mom, who was the iron fist, became the softer of the two. Changes happen when a family is in turmoil. The only constant is chaos.

Learn to Hang Up

The reality of sobriety is that relapse is likely to be part of your loved one's journey. (I have looked at some studies posted, but their methodology is flawed. They say that 60% of addicts relapse. I wish that were true because that would be a fantastic success rate, but based on my experience in the field, that's a pipe dream.) I went through treatment with 30 guys. In the first year, I kept in

touch with roughly 15 of them. I am the only one sober today. Relapse can be part of the recovery journey.

If your loved one does relapse and they call you high or drunk, make sure they are not suicidal, pray for them, then tell them to call you when they are sober and...hang up. Nothing you say to them while they are high is going to matter. The addict will either blame you for their addiction, ramble about justifying their actions or complain. "But they need me!" No, what they need to do is sleep off their stupidity. If they call you back, threatening self-harm, ask where they are, stay on the phone and go to meet them. At the same time, text someone to call 911, inform them what is going on, and stay with your loved one till help arrives. If they are not threatening self-harm and call you the next morning hungover but sober, go and pick them up and have breakfast with them.

I had a guy who was in the sober-living home I ran; we will call him "Fred." He left after only a few months to go home with his family. Fred called me while I was out having sushi with a friend; he was high as a kite on crack cocaine. I asked if he was a threat to himself, and he said no, then I hung up. He knew whom I was with, so he called my friend to put me back on the phone. I heard him lighting up the crack pipe, told him I loved him and to call me when he was sober and hung up again. Fred moved back into the sober living home a week later. He did not say more than "hi" or "bye" for a few months. Finally, at a house meeting, he said, "I hated Jon for hanging up on me. But I now realize that he saved my life by doing that. He was the first person who did not put up with my s***." Tough love is hard, but after Fred said what he did, we talked for hours. Today Fred is sober, with a beautiful family. He is one of the examples of not

letting a relapse stop him from finding freedom and sobriety.

What Should the Family Do?

Addiction as a Sin Worldview

Rejoice always, pray without ceasing, give thanks in all circumstances; for this is the will of God in Christ Jesus for you. - 1 Thessalonians 5:16-18

A foundational aspect of how I counsel, and what I recommend to families, is prayer. A lot of prayer. If you attend a church, tell your congregation to be praying for your loved one. When I got back from treatment, I would see the older ladies in my church staring at me. My selfish, self-centered nature thought they were judging me, looking to see if I was hungover in church. A little while later one of those old ladies came up to me with a card, she hugged me and said her Sunday School class had been praying for me every morning since my parents put me on the prayer list. The card was scripture verses.

Is anyone among you sick? Let him call for the elders of the church, and let them pray over him, anointing him with oil in the name of the Lord. And the prayer of faith will save the one who is sick, and the Lord will raise him up. And if he has committed sins, he will be forgiven. Therefore, confess your sins to one another and pray for one another, that you may be healed. The prayer of a righteous person has great power as it is working. - James 5:14-16

When I visit 12-Step meetings, all I would do is pray that when someone is determining who their higher power was going to be, they found Christ. After one of those meetings, I was driving back with one of the guys living at the sober living. I remember having this tug at my

heart to start praying for him. A short time later, he told me to pull over at the Denny's; he needed to use the bathroom. For some reason, I called my parents and asked them to pray for him. After coming out, he sat down next to me and said, "I don't know what came over me, but while we were on the freeway, I wanted to open your car door and jump out. But something stopped me. When I went to the bathroom, I was going to cut my wrist, but something stopped me. I just needed to tell you what's going on." The power of prayer is real and cannot be discounted or forgotten. Pray without ceasing.

Then they cried to the LORD in their trouble, and he delivered them from their distress. He made the storm be still, and the waves of the sea were hushed. Then they were glad that the waters were quiet, and he brought them to their desired haven. - Psalm 107:28-30

As powerful as prayer is, not everyone wants to do it or ask their churches for prayer. There was a pastor of a large church of a few thousand members whose son was in treatment. He had heard what I did with addicts and wanted me to work with his son. During our first meeting, he asked me what he needed to do. I told him to let his church know where his son was and pray over him daily. It blew me away when he said he couldn't do that, it would ruin his ministry, and he didn't want his congregation to know where his son was. It was heartbreaking to see a pastor, who probably preached on the power of prayer, unwilling to ask his multi-thousand membership church to pray for his son. By the grace of God, that somehow changed because I now see his son leading worship for him and not hiding that his history of drug abuse.

*Your word is a lamp to my feet and a light to my path. -
Psalm 119:105*

I encourage the boys I work with to read the Bible. This is the same advice I would give to the family. The Word of God should be consumed daily, transforming the believer from the inside out. Without the Word of God, I am still an idiot in many areas today. I am still learning and growing closer to my Father in heaven. It does not matter how well you think you know the scripture; we still need to spend time reading it. Scripture lays out instructions on how to be a God-honoring mother, father, husband and wife. The biblical roles that are clearly presented should be the light during these very dark times.

All Scripture is breathed out by God and profitable for teaching, for reproof, for correction, and for training in righteousness, that the man of God may be complete, equipped for every good work. - 2 Timothy 3:16-17

Since the scripture is sufficient for all things, memorize it and make it part of your daily life. My memorization skills of scripture are not at an expert level, but I am continually working on improving. I have noticed that the more time I spend in the word and memorizing it, the more my heart changes to be more Christlike. The more I read the Bible, the better I have become at being able to have the Holy Spirit lead me in ways that will bring praise, glory, and honor to God.

Addiction as a Choice Worldview

This particular view is newer to the scene, while it started in the 1970's their approach was simple, just don't do it. A lot has changed over the years, now the Mindfulness Movement is gaining popularity as a way not just to

overcome addictions, but any sort of roadblock that may stop the individual from achieving your full potential.

What Shouldn't the Family Do?

Don't tell your loved one that they are going on a Christmas vacation with the family, only to be dropped off at treatment on Christmas Eve. Yes, that has happened more than once during my time working in the treatment field. To see the sadness, anger, and frustration of those who were sent to treatment the day before Christmas is painful. It also starts the addict's time in treatment off on the wrong foot. Treatment is hard enough without having a bitter attitude from day one.

Don't enable; learn to say no! If I could get a nickel for every time I have had to correct families who enable their children or spouses who enable their significant other, I could retire in Hawaii. It is tough to see your loved one struggling. Our desire is to have them hurt less. However, when dealing with addicts, sometimes you have to let them fall flat on their face, scuff up their knees and bleed a little (figuratively, not literally). I struggled to understand how families could continue to enable their loved one until my sister had children; I spoil them rotten. Even though there are times that I need to say no, or my dotting on them can be like a helicopter parent, I know it's not healthy. This realization happened when I was buying them gifts every weekend they came over for sleepovers. Then one weekend I was too busy to get them anything. The youngest one said, "Where is my toy?" I had conditioned them to think that they were going to get a gift every time they came over. Gifts are supposed to be for special occasions, not just because they are cute.

Don't trust every word they say. They must rebuild trust. Odds are your loved one who has been lying and

manipulating you for quite some time. A few months of sobriety is not going to change that overnight. If you suspect that they are high/drunk, make them take a drug test, and pee in a cup. No matter how offended they get, those drug tests will provide you a safety net in the beginning. Just know that there are ways to cheat a drug test, especially if you do not change the days you test them. Personally, I enjoyed peeing in the cup because it allowed me to prove that I was sober; something very few thought was possible.

Now What?

Your loved one is finally home. You've prepared as best as possible. The family has a support system for all individuals, the addict, mom, dad, husband, wife, etc. Yet you feel that something more is needed. Chapter 6 will address what to do next, a collection of assignments that you can do with your loved one. If there are trust issues or you don't have a healthy enough relationship with your loved one, have someone from your church or the mentor you have picked, do it with them. If your church is on the fence or does not know if/how they can help, have your pastor read Chapter 6.

Points to Ponder

That was a lot of information to swallow. What if I can't do everything suggested, or I still have questions?

If you can't do everything, that is ok. Talk to trusted friends and family who have any experience living/dealing with an addict. If you still have questions, you can fill out the contact information at jonokinaga.com where you can schedule consultations.

My church has programs available, but it is nothing like what you suggested. Should I still send my loved one there?

Absolutely. Something is better than nothing. A solid support network is needed. Not everyone is going to have the ideal situation, take advantage of what your church has.

Chapter 5: For the Addict

Trust in the Lord with all your heart and lean not on your own understanding; in all your ways submit to him, and he will make your paths straight. - Proverbs 3: 5-6

Change happens when the pain of holding on becomes greater than the fear of letting go. - Spencer Johnson

Initially, I was not going to include anything in this book for the addict, but as I searched for what was missing, it was clear that there had to be something for the addict. Below are a few concepts/ideas that I feel are highly beneficial for those seeking to live a new way of life, thoughts that were instilled in me from the very early days of my sober journey. My hope and prayer is that maybe your loved one picks up the book or asks what you are reading. When they are open to change, on their way to treatment, or are on their way home from rehab, let them read this section.

Are You Ready to Change?

Are you tired and weary of living a life that is fueled by drugs or alcohol? Are you tired of a family member who is throwing their life away because of substance abuse? If you answer Yes to either one of those questions, there is hope. “Come to me, all who labor and are heavy laden, and I will give you rest. Take my yoke upon you, and learn from me, for I am gentle and lowly in heart, and you will find rest for your souls” (Matthew 11:28-29). There is a freedom that is more than simply being free from drugs and alcohol but a freedom to live a life that is pleasing to Him. It is easy to be sober; it’s just abstaining from any mind altering substances. The hard part is learning to live life without it.

I chose Matthew 11:28-29 because those two verses provide the answer to living life without drugs and alcohol. First, true rest cannot be found in man alone. While a sponsor or mentor may provide a listening ear and practical advice on how to live each day sober, there is something out there that offers more depth. A source of wisdom and strength that cannot be found from man is the Word of God and a personal relationship with Christ. Life sometimes sucks, and we are handed situations that are difficult to deal with, but there is a way to overcome those struggles properly. That is where Christ should be the rock. If you need wisdom on how to live life, read a chapter of Proverbs a day. It is full of simple suggestions on how to not screw up in life. For example:

- Iron sharpens iron, and one man sharpens another. (Proverbs 27:17)
- To know wisdom and instruction, to understand words of insight, to receive instruction in wise dealing, in righteousness, justice, and equity. (Proverbs 1:2-3)
- Whoever conceals his transgressions will not prosper, but he who confesses and forsakes them will obtain mercy. (Proverbs 28:12)
- A soft answer turns away wrath, but a harsh word stirs up anger. (Proverbs 15:1)

Heading back to the second part of Matthew 11, Jesus is saying to follow His example on how to live life. A decade ago, WWJD (What Would Jesus DO) was on everyone's wrist, bumper stickers, and shirts. While it is impossible to do what He did (I know I'll never be able to raise someone from the dead or turn water into wine), I know that I can learn from Him how He treated others and His relationship with Him His Father in heaven. Frequently we forget that while Jesus provided an amazing example of how He interacted with others, we

need to remember that He was submissive to the Father's will. Dying on the cross was what needed to happen. Yet, Jesus did not rebel and do His own thing. I had said earlier that sobriety is just abstaining from a mind-altering substance, but there is so much more freedom from life-dominating issues. How often I have seen someone who got sober yet continued to do other things that could be seen as addictive behavior! Gambling, sex, overeating, or just plain being a jerk. Sobriety can and should be more than just stopping drinking or doing drugs. It should lead to a life that is pleasing in God's sight.

For those that have a loved one who is battling their addiction demons, these two verses provide hope and instructions on how to deal with them. First, you cannot change the addict. That change must come from their hard work, but that doesn't mean that you're hopeless. The next time that you are worried or anxious about your loved one, AA has a saying, "Let go and let God." What that means is turn over your cares to God. 1 Peter 5:6-7 says, "Humble yourselves, therefore, under the mighty hand of God so that at the proper time he may exalt you, casting all your anxieties on him, because he cares for you." Find your rest in Him. No amount of worrying, obsessing, or being anxious is going to get your loved one sober. So, pray about it and become educated on how not to enable your loved one. "Whoever walks with the wise becomes wise, but the companion of fools will suffer harm" (Proverbs 15:20). Seek out counsel on how to best help your loved one fight their addiction. There are many resources out there to utilize. You cannot hide under a rock and ignore the situation, and at the same time, you cannot do the work for the addict. What you can do is become knowledgeable about what is going on.

First Few Days of Sobriety

Early on in my recovery, I opened my mouth.... a lot. Full of opinions, I always thought that I had all the answers, and always looked forward to sharing my wise words of wisdom with less than 30 days sober. Then something happened when I went into transitional living. One of the case managers, there was an old school AA as you could be. Being the curious one who loved to talk, I would ask house managers and counselors to give hints on how to stay sober. They all had good advice, but the only thing that always stuck with me was from that old AA Big Book thumper. "You don't know s***, if you did, you wouldn't have needed rehab to get your life together. My suggestion is this: shut up, sit down and listen in all meetings for the first year. Unless you're struggling with a problem and are asking for help...shut up. Part of the problem for newly sober guys is that they think they have all the answers after 30 days, feel the need to share their amazing experience, strength and hope. Want to be successful? Be humble, take all directions, and don't ask why?" So that is what I did for the first year, I did not say anything in meetings, followed whatever my mentor said to do (not dating for the first year was harder than not getting loaded), and I never questioned what my mentors required of me.

I have observed that those new to sobriety are more likely to succeed when they shut up, sit down, and listen. Why is that? "Even a fool who keeps silent is considered wise; when he closes his lips, he is deemed intelligent" (Proverbs 17:28). They took to heart that there is strength in silence. They listened intently to what was being shared from those who had significant sobriety time and humbled themselves to take direction. While I was in seminary, I reached a point where I had no counseling classes left, all that was left was theology and the fun

stuff (sarcasm), but this is not my strength. For counseling classes, I gave input and opened my mouth. In the theology classes, I just sat quietly like a mute because I didn't know what was being said half the time. I was usually on my computer googling terms and names mentioned in class. Someone once asked me to share what I thought, since they always saw me in commentaries and Bible dictionaries. They thought just because I had access to the best resources would mean I had something profound to say. The truth of the matter is: I stay silent because I want to hear from people who know what they are talking about, what good is talking if I have no idea what I'm was saying?

For those that are new to sobriety, don't take this the wrong way, but just shut up, sit down and listen. I have sat through hundreds of meetings and classes without hearing real solid Truth being spoken from someone with little sober times. Most times, it's talking about past exploits, saying, "I got 20 days today," just to have people clap for them. The real healing from our wounds is when it's no longer about self, but more about others. Find acceptance and encouragement through the Word of God. It is the only thing that is perfect and true. It's hard. Most who struggle with addiction or alcoholism are arrogant, obstinate, and defiant. I know that because the clinical director running the rehab where I was a patient called me that. Take it from someone who has seen a lot over the years, embrace silence, seek God, trust God, and only open your mouth when what you have to say will bring praise and honor to Him. When you are seeking change, truly seek God in His Word, and the answer becomes clear. The need to always combat unbiblical thinking with biblical Truth.

What I Wish I Could Tell Addicts

A few years ago, there was an HBO special on the opiate epidemic in America. For those of you new to addiction, yes, it is an epidemic. According to the documentary, 80% of heroin users started with pain pills, and Big Pharma profits \$15 billion dollars a year. To make it look a little clearer, this is what 15 billion looks like with all the zeroes -- \$15,000,000,000. It costs society \$85 billion dollars a year in healthcare, criminal enforcement, and lost productivity. As I am writing this, a 23-year-old young woman in the documentary speaks about her struggles: She had three years clean, a beautiful daughter. Three weeks later, she relapsed and died. This is the reality of what is going on every day in America.

While watching the show, a flood of thoughts came to my mind. Here are some of the comments that those featured on the show talked about and what I wish I could tell them.

“I think about it every day, I have dreams about, I just can’t help it.”

My answer: You have a choice. Those thoughts might come on early in sobriety, but it goes away if you put the work into it with time. Next time those thoughts of the "good times" come up, remember the crappiest parts of it, and the freedom from bondage you have now. For years your life consisted of getting high, figuring out how to get high, and getting high again. Put the time and effort on living a life free from drugs, and you will learn to live life a new way. If you have dreams, it's normal. It's your subconscious talking. Be grateful that it was just a dream. Retrain your mind to think differently; it's not going to just stop.

“I don't know why I do this to myself. You just feel so lost. I just don't want to feel that pain. And that's why I get high.”

My answer: There is a better option out there. Right now, you're in a fog of drugs. I understand I felt the same way 13 years ago. Thirteen years ago, I was so lost and confused, and in so much pain, I said the same thing and still proceeded to get high. No matter how many times I said, I wanted to stop, I never could. What changed it? Admitting I needed help to my family, and from that point forward in my recovery...realizing I was an idiot when it came to drugs/alcohol and proceed to listen to whatever I was told to do. The hardest part of getting sober really isn't stopping doing drugs, it is submitting my life and will over to God (for those of you uncomfortable with God, submit to an authority figure, a sponsor or mentor) and doing whatever I was told to do. The world preaches the importance of independence, but when you're getting clean, freedom is what screws it all up. You need to accept that you don't know what the heck you are doing and find someone you can trust to walk you through the early parts of sobriety. It is like being a baby all over again, relearning everything from scratch. Trust the process, listen to suggestions, and with time you can regain the independence and the ability to make decisions on your own.

It has been a while since I have been around those in the early stages of recovery or those still getting high. As I listened and watched people rationalize their addiction, it made me sad, literally sad. I wish I could have sat down with them and told them there is a better way of living life, there is hope. Sobriety is more than just saying you want to be sober; it also takes action. Think about how much work you put into getting high (planning, getting

money, avoiding being caught, etc.) and putting that same effort into your recovery. You can get sober.

Don't Count Days

I have a lot of friends on Facebook who are sober or trying to get sober. It's easy to spot those that relapsed because there will be the, "I'm 18 days sober!!! I got this." Or, "Yup, 30 days baby." I get it, kind of. Every year on my sober birthday, I'll post something, mainly thanking those who have helped with my recovery and offer my experience, strength, and hope to those thinking about sobriety. But for those who post a running daily total of how many days sober they have.....stop. Quit thinking about how many days you have especially if you're posting, "Yay, 30 days!" for the sixth time in the last seven months.

What I'm about to say will probably upset some, confuse others, and is not embraced by many. However, it is something I have been suggesting for years. I encourage the guys I mentor to put their sober date in their phone and then forget it. Set a reminder for a year later. I suggest this because I don't want them so focused on how many days sober they have, since it is also a reminder of the last time they did drugs or drank. I've found that whatever you focus on, that's what you're going to end up doing.

Keep your heart with all vigilance, for from it flow the springs of life. Put away from you crooked speech and put devious talk far from you. Let your eyes look directly forward, and your gaze be straight before you. - Proverbs 4:23-25

Here is another reason: When I got sober, I fell for the same trap, letting everyone know when I had 30 and 60

days. When I got back home and told my sober mentor that I had 90 days, he told me this.... "That's nice, want a cookie? What have you done in those 90 days? Are you a better person with your character? Are you working on body and spirit? Quit counting days because it gives the appearance that sobriety might go away. Do what you've been doing. Trust God. Live a Christ-centered life and forget about the days." It hit home. I stopped counting how many days sober I had and started to live a life free from bondage with the knowledge that as long as I continued to do what I had done up to that point...I not only would be sober, I would also be living a life that is pleasing to God.

Be Like Jesus

"The church is a hospital for sinners, not a museum for saints." - Abigail Van Buren

I hope that those of you thinking of having Christ as your higher power realize that the church's original function, as Jesus intended it, was to be a hospital for the sinners and not just a museum for the saints. You don't need to have your act together before you go to church. It's okay to walk through the front door with your life in shambles. One of the things that I often hear is, "I'll come to church when I'm less screwed up." Or "I'm too messed up to walk through the church doors. My life is far from perfect, and I'll probably have lightning strike me if I came." No one is perfect; we are all struggling with sin.... even the pastors. The beauty of following the only perfect human being is that He wants us to come to Him dirty, sinning, and a mess. It is through His redemption, mercy, and grace that we are made clean. "Create in me a clean heart, O God, and renew a right spirit within me" (Psalm 51:10). All hearts are filthy until there is a

realization and submission to Christ as the Lord and Savior.

No one is worthy of His forgiveness. I remember driving up to one of my mentors in a brand-new car. We were talking for a bit, and I said, "I don't deserve this." His reply: "You're right, you deserve hell." At first, I was taken aback, but then it hit home. He was right. If it weren't for Jesus, sacrificing His life on the cross, I would be destined for hell. It was His ultimate example of servanthood that allows me the choice to serve Him or deny Him. Since I've decided to submit and have Him as my Savior, I am blessed with eternal life. Something I've said before is that sobriety is easy; it's just not picking up a drink or doing drugs. The hard part is learning to live a life that is pleasing to God. If, and when that is something that is the center of your recovery, anything is possible. You can overcome failures without turning to drugs or alcohol as a solution. The possibility of living a life sober is possible; it is one that can be full of love, joy, peace, patience, kindness, goodness, faithfulness, humility, and self-control.

I opened with the quote about Christians spending enough time with sinners to upset the religious people. I did this to help you see that even if you're turned off by Christians who can seem intolerant or snobbish...we are not all like that. Sometimes preconceived notions and past experiences can negatively affect people. Like I said earlier, no one is perfect; we all have an area in life where we struggle. I know a Christian I thought was intolerant towards alcoholics; over time, I found out that their dad was a drunk who abused them daily. If you're a follower of Christ and have zero contacts that are not Christians, get out of your bubble and be the light that the world needs. For those that are offended with the quote, please, please, please remember that Christ didn't spend His time hanging out with the religious leaders of His time. He

spent it ministering prostitutes, tax collectors, etc. We need to be like Christ and spread His Word to ALL people.

You Need New Friends

Hard choices are a part of the recovery process. While the choice to get sober was the first step, what happens next are choices that will affect your life. One of my mentors told me something the first day I got back from rehab that has stuck. "It's going to require a total immersion into a whole new lifestyle. New friends, new places to hang out, new ways to handle stress and success, new everything." It hit home after I got back from rehab, anything that was part of my life during my addiction was replaced. The hardest choice was making new friends.

Do not be deceived: "Bad company ruins good morals."
- 1 Corinthians 15:33

Colin was my partner in crime for everything; partying, gambling, drugs, etc. We were so close for ten years you would hardly see one of us without the other. When it came to partying, if one of us didn't have money, the other would make sure that wasn't a problem. He taught me how to take and throw a punch (lots of bruises to make even my family worried I was getting into too many fights). He taught me how to stand up for myself and not take crap from anyone. And introduced me to all the right/wrong people. When I got sober, we lost touch. Not because he didn't try to reach out, but because I knew if there was anyone who might have said, "Screw it, let's have a shot of Jack." ...he was the one. Walking away from his friendship was a struggle, but if I wanted to increase the chances of staying sober, it required making hard choices.

When I first heard of his death, it devastated me. Why didn't I reach out to him after I had a few years sober? What would have happened if we did reconnect, maybe he would have gotten sober too? How could I just walk away from someone who was so influential in turning me from someone who was pushed around to someone who had no fear? The answer was simple: My sobriety had to come first. Selfish? I don't think so. I knew my limits, who could influence me in making the right choices and that it was not healthy for me to be back in that person's life. What makes me think is...if he was alive today, would I be able to still be friends with him and not be sucked back into the lifestyle I used to live? Being honest with myself, the answer is: probably. Would I be willing to help him if he wanted to get sober? Absolutely. If he had no desire to get sober, would I risk my sobriety to be best of friends again? I wouldn't.

I hear, "But you don't understand, that's my homeboy. I can't leave them." Or "I'm gonna go back and help save my friends from addiction, I'm ready." Or "My friends are my boys, they would never offer me drugs or alcohol since I'm sober." Every single newly sober guy I know that said those things....they are not sober today. They were unable or unwilling to make a very hard choice. Leaving your best buddies is not easy. It sucks. Some may call you a sellout. Others might say you think you're better than them, and breaking the bro code is a no-no for some. The bottom line is that before you can help anyone, you need to have your life in order first. You cannot save anyone; your friends need to make that choice on their own. Finally, if it was easy to do, wouldn't everyone make those hard decisions? Nothing of value comes easy, it takes hard work, dedication, and doing more than others are willing to do.

What is Love?

One of the hardest parts for anyone, not just those in recovery, is understanding what Love is. Sometimes we confuse the Love that is spoken about in the Bible with the love we have for someone we are romantically involved with. While 1 Corinthians 13:4-8 is often used in wedding ceremonies, there is practical application for all times. Notice that the Love spoken about in this passage is not a feeling. Love is an action. It is easy to show love to those that we like. It is not easy to show Love to those we don't like. The challenge for all of us is to show Love to everyone, even to those that we would rather not spend any time around. That does not mean that we allow others to walk over or abuse us, but these four verses show us what God's Love is like and also how we should Love others.

Love is patient and kind; love does not envy or boast; it is not arrogant or rude. It does not insist on its own way; it is not irritable or resentful; it does not rejoice at wrongdoing, but rejoices with the truth. Love bears all things, believes all things, hopes all things, endures all things. Love never ends. - 1 Corinthians 13:4-8

(I have written so many articles in the past that I do not know if I came up with this or it is from something I read. I looked this up on a plagiarism checker and I'm pretty sure it's mine but if it is not, please let me know.)

"Love is patient," means to persevere through trials and tribulations, to be slow to anger and punish others. It is being patient with people because God is patient with His people. It is not indifferent or passive. Patience can be active.

“Love is kind,” means to have kindness. It is trusting in others in a way that they have not earned. Many Christians can be good people but are not kind. Good is the legal, or moral, perspective. Kindness is trusting and treating people in a way they do not deserve.

“Love knows no envy.” Love should not covet what others have, nor be jealous regarding another.

“Love is not boastful.” Boasting means to heap praise on oneself, to behave as a braggart or a windbag. It requires a real understanding of who God is. It impacts you with having humility not pride.

“Love is not proud.” This refers to swelled-headedness, conceit, pride or mirror gazing.

"Love is not rude." Rudeness means to act unbecomingly. Some people can act the right way but are just plain rude. Love works with genuine concern of others.

"Love does not insist on its own way." This means we are willing to hear and give way to others before our selfish desires.

"Love is not irritable." It does not easily react to, or be provoked by, others.

“Love is not resentful.” Every time a person does something wrong, do you write it down? God does not work that way towards you, and you should not act that way with others.

"Love does not find pleasure with evil-doing." We are not to take pleasure in wickedness. When we see someone in sin, we should confront him or her in love and help them to repent.

“Love rejoices with the truth.” We are to be in accordance with what is truthful, upright, and true. It is not easy to do. Because of God’s love for us, He does not want to hide the truth on any issue.

“Love endures forever.” God wants us to protect or keep by covering, to preserve. It is about mending the heart and not prolonging the pain.

“Love believes all things.” We are to trust God at His word and believe in the love that He gives us. We are also to give others the benefit of the doubt.

“Love never fails.” It is always more than enough and will not weaken. Never write people off and trust that His love is sufficient.

Questions to Ask Yourself Before Making a Decision:

1. Have I done a really good job of gathering all the facts? (Proverbs 13:16)
2. Have I identified the real, most significant issue?
3. Have I done my very best to identify what all my various options are?
4. Have I really done a really good job of examining what God’s Word has to say about this kind of situation?
5. Have I done a really good job of trying to predict what the likely consequences will be of each possible response to this situation?
6. Have I engaged in some serious prayer, crying out to God for the wisdom and guidance that is found in Proverbs 2 and Psalms 32:8-9?
7. Have I consulted with others members of my community of faith, honestly seeking their counsel and prayers regarding this issue? (Proverbs 12:15)

8. Am I willing to accept the consequences of my decision without trying to shift blame to someone else?
9. Have I seriously asked myself the questions, “What would Jesus do in this situation?” and “What kind of person would Jesus want me to be in this situation?”

Points to Ponder

My loved one still isn't ready to get sober. What do I do now?

You pray, you keep praying, and you pray more. There is nothing that you can do to force them to get sober. Its ok, it happens. Don't give up on your loved one.

My loved on is ready to get sober but we don't have the money to do any of the options you listed. Now what?
Hopefully you're part of a church body that can help, if not there are assignments at the end of Chapter 6 that your loved one can do. Like I mentioned earlier, I know a lot of people who got sober without going to treatment or attending any meetings. It is possible.

Chapter 6: For Churches

For just as the body is one and has many members, and all the members of the body, though many, are one body, so it is with Christ. For in one Spirit we were all baptized into one body—Jews or Greeks, slaves or free—and all were made to drink of one Spirit. 1 Corinthians 12:12-13

What does a ministry for those struggling with drug addiction look like for churches? There are many models out there, and most are failing. That's right, failing. I can say this because I have been working in the recovery field for over 12 years. What I have seen are two prevalent models. One is a for-profit industry that generates millions, if not billions of dollars a year, feeding on the helpless and hopeless. It is hard to say that since I got my start attending a rehab center. I understand the need for it to be a for-profit industry since it attracts the best and most capable counselors around. You do get what you are willing to pay.

On the other hand, are non-profit organizations with the purest of motives and genuinely care about those battling addictions. However, since it is a not for profit organization, they often cannot afford the top workers in the field. This has to change.

A true ministry is ordained by God, funded by His believers, and has one goal in mind....total transformation through Christ alone. Churches do have the ability to provide a service that is better than the for-profit rehab centers. How? The solution has to be a foundation on Jesus Christ. At the same time, churches can provide a better service than the current non-profit organizations out there. How? They have the financial stability and pocketbooks to hire the best counselors with

years of experience that money can buy. Why is this not happening? In my opinion, it is fear. Fear of failing. Fear of entering into a ministry that is just as likely to have someone overdose and die than to have someone come out transformed through Christ.

So now that the cat is out of the bag, what is next? In an ideal world a denomination will take a risk and fully invest itself spiritually, physically, and financially to make a statement that the only true answer to beating alcoholism and drug addiction is through the church body. It will require time, money, and perseverance. Lives will be lost along the way, and there will be times when churches will want to quit. As depressing as that last sentence is, it is one that any denomination needs to hear before taking that step towards being part of a ministry that not only save lives but will also be one of the most significant evangelical movements of the 21st century.

Spiritually a church needs to the foundation of the fight against a scourge that is killing people daily. Maybe not physical death but an emotional and spiritual death every time they use a foreign substance to alter their state of mind. Before evangelizing occurs, there needs to be a prayer team dedicated to praying for those with addictions daily. Praying that they have a moment of clarity and when they do, the answer is Christ. Without prayer, this ministry will fall flat on its face and fail. Pray, pray, pray. Pray without ceasing. There is a saying that epitomizes the importance of the church. "The world can do almost anything as well as or better than the church," says Gordon MacDonald. "You need not be a Christian to build houses, feed the hungry, or heal the sick. There is only one thing the world cannot do. It cannot offer grace."

Physically a church needs to have people willing to step out in faith and their comfort zone. We cannot expect those in darkness to step into the light readily, the church needs to be the light that exposes the darkness. Those who are attending AA Meetings are embraced just as they are; drunk, hopeless, and lost. This is exactly what the church needs to do. If someone stumbles in drunk Sunday morning seeking Truth, love on them, show them acceptance for who they are, where they are, and do it unconditionally. "And when Jesus heard it, he said to them, "Those who are well have no need of a physician, but those who are sick. I came not to call the righteous, but sinners." Mark 2:17. Every single person alive is dealing with some sort of sin. The only difference with an addict or an alcoholic is that everyone can see that sin at all times. For a church to have an effective recovery ministry, the life-dominating sin will eventually be addressed, but it will take time for the sinner to become a saint. Don't rush the process; let God work on the heart of the lost; all a church needs to do is provide a sanctuary for the sinner.

Financially a church needs to be willing to invest in the ministry. That's right, its an investment that in all likelihood will at best break even, most likely it will be a money pit. With that said, what is the price you can put on a soul? Think about that when your Finance Committee Chairman shows a ledger that is probably going to be in the red. Think about that when you realize that there are \$30k a month rehabs that make millions of dollars a year, yet it is very unlikely that those entering your recovery ministry will be your top tither. Like I said before.... What is the price you can put on a soul?

For the last decade, I have been refining, adding, and subtracting from the program that I make those that I disciple go through. If your loved one/church member cannot afford treatment, here is something that you can use. It may also be beneficial for those leaving treatment who were unable to attend a rehab with a biblical approach.

Discipleship Program

3 Things To Do Weekly

Meet at least three times a week to go over assignments/work out/fellowship.

Will attend all Bible/Book Studies unless at work.

3 Things To Do Daily:

Pray, read the Bible, and be of service. Pray regardless of the circumstances; good, bad, happy or sad...go to God with everything. Because we are idiots when it comes to defeating the evil one, I read the Bible every day for my wisdom. Finally, servanthood is key because that is what Christ did on the cross, sacrificed His life for mankind. He was a servant to sacrificed His life so that I could have mercy, forgiveness, grace, and salvation. While I could write another book on the three, the foundational pillar that I feel led to share is the Fruit of the Spirit and how it is the blueprint to recovery and living a Christ-centered life.

Bonus: Read Streams in the Desert, Utmost, or any daily devotional you like.

(1st week is to become familiar with the individual.

Lunch, working out, video games, football games, UFC

fight nights, etc. The only assignment during this period would be Assignment One.)

Read a Proverb a day. Ex. Jan 3rd = Proverbs 3. Write down a simple Truth in a journal. Go over it with a discipler/mentor at each meeting.

Assignment One

Therefore, if anyone is in Christ, he is a new creation. The old has passed away; behold, the new has come. 2 Corinthians 5:17

50 Things you are good at (Body & Soul)

Don't let the addicts past determine who they are. God has blessed everyone with natural talents and abilities. Encourage the addict to use God's Gifts daily to help others.

50 things that you love, those you love.

Addicts have been given a second chance at life. Sometimes they may feel down. This list is a reminder for the addict on who to look too and ask for help. Encourage the addict to be honest with the names on the list. Avoid listing individuals that are not supportive of the decision to get sober.

50 things you are grateful for.

It is easy to focus on the bad things in life. Recovering from the chaos from the addict's past will include hardship and doubts. This gratitude list is for them to remember what they have to be grateful for when they

feel that the world is against them. An attitude of gratitude goes a long way.

Read them every morning.

Count every day as a reminder that they probably shouldn't be alive. Encourage them to read over their list and realize that God has given them more than they ever deserve.

Addicts usually have their identity wrapped up in their addiction. This assignment helps the addict realize that they are no longer the old, dirty, addict. When they accept Christ as their Lord and Savior, the old is gone, and they have a new lease on life. One that should be grounded in who they are in Christ. Believers should have a new outlook on life. Achievements and identify with our past are now unimportant. To be new in Christ means to be embracing the new way of living life. The newness of living a Christ-centered life takes precedence over still holding on to parts of the past that do not bring praise, glory, and honor to God.

Assignment Two through Eleven

But the Fruit of the Spirit is love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, self-control; against such things there is no law. And those who belong to Christ Jesus have crucified the flesh with its passions and desires. Galatians 5:22-23

Fruit of the Spirit: Find two verses that speak about each Fruit. Pick one verse per Fruit of the Spirit to memorize by the time they are done with the intensive coaching stage.

The Fruit of the Spirit is an essential part of my journey in sobriety. My pastor reminded me that if the Fruit of the

Spirit is evident in my life, I would not have to worry about my addictions. The importance of these assignments is to get the addict to open their Bible, search out the verses that correspond with the Fruit, and spend time memorizing God's Word. I have a list of verses that I keep in the note section of my phone; I would urge those seeking to get sober to do the same. Below are potential discussion starters with each of the Fruit of the Spirit.

Love (agape): Selfless love of one person for another without sexual implications (especially love that is spiritual in nature.)

Whom do you love and loves you?

How can you show your love for others?

Joy: a feeling of great pleasure.

JOY is Jesus 1st Others 2nd Yourself last

How can you have more joy in your life?

What brings joy to your life?

Peace: freedom from disturbance; quiet and tranquility, mental calm; serenity.

What helps you have peace?

Are you a peacemaker or a troublemaker?

Patience: the capacity to accept or tolerate delay, trouble, or suffering without getting angry or upset.

What test's your patience?

What do you do when your patience is tested?

Kindness: the quality of being friendly, generous, and considerate.

What are some ways that you can be kind?

Who have you been kind to this week?

Goodness: the quality of being good, in particular virtue; moral excellence.

In what ways can you be generous this week?

What does moral excellence mean to you?

Faithfulness: loyal, constant, and steadfast.

In what ways can you exemplify being faithful to God this week?

What do you have faith in?

Humility: a modest or low view of one's own importance; humbleness.

What does humility mean to you?

What is the difference between humility and weakness?

Self-Control: the ability to control oneself.

What do you have the hardest time with concerning self-control?

What will you work on to improve on it?

Assignment Twelve

"I am the true vine, and my Father is the vinedresser. Every branch in me that does not bear Fruit he takes away, and every branch that does bear Fruit he prunes, that it may bear more Fruit. John 15:1-2

**What are areas in your life that need to be pruned?
How can the Fruit of the Spirit (especially the verses) be used to overcome areas that need to be pruned?
How can you utilize the Fruit of the Spirit in living a Christ-centered life?**

We are all recovering from something. Drugs, alcohol, food, gambling, exercise, sex, relationships, etc. Countless anonymous meetings dominate the self-help landscape of society today. No matter how holy we are,

the core of who we are is a sinful nature. It is only through Christ that there is any way to avoid the traps that Satan puts in our way. For those who get sober, it is easy to say that there is nothing else we need to work on. That is so far from the truth. What about sexual immorality, impurity, and debauchery; idolatry and witchcraft; hatred, discord, jealousy, fits of rage, selfish ambition, dissensions, factions, and envy; drunkenness, orgies? If you have answered no to all of the previous fifteen attributes of living in the flesh, ...sainthood is around the corner because you are pretty close to perfection. If you are honest with yourself, there is at least one that is a weakness in your life. I tell my guys that you cannot replace one life-dominating sin with another. Encourage the addict that God has placed in your life to work on all areas of their life.

Assignment Thirteen

Rejoice, O young man, in your youth, and let your heart cheer you in the days of your youth. Walk in the ways of your heart and the sight of your eyes. But know that for all these things God will bring you into judgment.

Ecclesiastes 11:9

What are some things you can do to enjoy sobriety?

Over the years, I have met some pretty miserable people with decades of sobriety. They put their identity in their addictions and wore it like a badge of honor. For whatever reason, they never had true freedom to enjoy the blessings that they had with a second chance at life. Sobriety is more than just going to work, going home, and doing nothing. Find something that you can have fun doing in the early stages of my sobriety, CrossFit and Martial Arts were two activities that I participated in when I first got sober. The men that I met at CF and

Martial Arts provided me with a solid community and a new set of friends that allowed me to enjoy life without getting high or drunk. They took me on hikes, had sober BBQs and other activities that made it safe to venture out into the real world. Build lasting and meaningful relationships with those around you. Embrace these newfound relationships. Make sure that the things that you find joy doing bring God praise, glory, and honor.

Assignment Fourteen Through Sixteen

So now faith, hope, and love abide, these three; but the greatest of these is love. 1 Corinthians 13:13

Faith, Hope & Love find two verses that speak about each. Write out how those verses apply to living a Christ-Centered life in addition to dealing with your life-dominating sin.

Living a Christ-centered life in society today is not easy. In the beginning stages of my journey in sobriety, I had Faith that I could overcome my life-dominating sin through Christ alone. Hope that one day I could help others overcome their issues with addiction. Finally, I learned that by Loving God, I had to be obedient to His word and Love His people. Sobriety is not always easy, but when we place our Faith, Hope, and Love in God, we know and have promises to remember. Remind those that you are discipling that their faith can be the size of a mustard seed; their hope has to be placed in Christ and never to forget to love God and his people.

Assignment Seventeen

Watch and pray that you may not enter into temptation.

The Spirit indeed is willing, but the flesh is weak.

Matthew 26:41

Write a prayer that expresses your gratitude also with the desires of your heart.

I cannot emphasize the power of prayer. It is a foundational pillar that all believers have to have. Dealing with addictions, prayer is something that not all the guys I worked with were comfortable doing. I used to make my guys a deal, I would buy their food, but they would have to pray. One of the first guys I disciplined said he didn't know how to pray, so I told him to keep it simple. For the first few weeks, his prayer was, "Dear God, thank you for Jon. Bless the food. Amen." That was it. In the second month, I was going through some personal issues, and then he prayed a prayer that made me cry. It went something like his. "Dear God, thank you for placing Jon in my life to show me Christ-like love. Thank you for my parents, who have sacrificed so much for me. Please help me to be a follower who can help others. Help Jon as he is going through a rough time. I want to help him as he has helped me. Bless the food, amen." Amazing things happen when we teach those placed in our care how to pray. By writing out their prayers, they are reminded of God's goodness, mercy, forgiveness, and grace.

Assignment Eighteen

And he did not permit him but said to him, "Go home to your friends and tell them how much the Lord has done for you, and how he has had mercy on you." Mark 5:19

Write your testimony, who are you today? How has your walk with God changed you?

I need to preface this with one of the cautions I have for churches doing discipleship, do NOT put the person struggling with substance abuse up on stage to give their testimony. The added pressure is not something that they need. When churches ask me when they can put the recovered addict to go up in front of the congregation to share their testimony, I suggest a minimum of 3 years. The purpose for this assignment is for the addict to remember who they were, where they are now, and how they got there. Hopefully its foundation is rooted in who they are in Christ. Transformation that happens absent of a relationship with God will not be one that produces a disciple that is willing to disciple others.

Assignment Nineteen

My lips will shout for joy, when I sing praises to you; my soul also, which you have redeemed. Psalm 71:23

What is your favorite Christian song, and why?

In Christ, Alone by Michael English is a song that still brings tears down my face. Not only because of his struggles with various life-dominating sins but because of the reality of how true his song is for me. "Let every victory; let it be said of me. My source of strength, my source of hope. Is Christ alone." I had maybe three months sober, and that song came on after I had left

visiting my grandfather's grave, tears pouring down my face, I pulled over on the side of the road and just wept. Songs are easier to memorize. Today, children are taught to memorize various historical facts, Bible verses, etc. with the children singing. There is nothing wrong with filling your soul with theological truths through music.

Assignment Twenty

Such is the confidence that we have through Christ toward God. Not that we are sufficient in ourselves to claim anything as coming from us, but our sufficiency is from God, who has made us competent to be ministers of a new covenant, not of the letter but of the Spirit. For the letter kills, but the Spirit gives life. 2 Corinthians 3:4-6

What does a personal relationship with Christ mean? What is the verse you memorized that has impacted you the most, why?

At this point, the addict has been with you for probably a few months. They have had time to spend time in the word, memorize scripture, and watch you, model, how to live a life free from drugs and alcohol. Hopefully, their concept of God is that he isn't a Santa Claus, or that Jesus was just a man who walked the earth. I have heard guys attend 12 Step Groups, and their faith and hope is sometimes placed in their sponsor. My prayer is that they are not dependent on you but are reliant on Christ. The importance of memorized scripture cannot be said enough. At the same time, I do not have a Rolodex of thousands of verses memorized. The ones that I do have memorized have given me the strength, courage, and faith to get through the struggles that happen with life.

Points to Ponder

My church is small, and no one can help walk my loved one through your discipleship program, what do I do?

There is a wonderful counseling organization called Association of Certified Biblical Counselors (ACBC).

They have lay counselors that you can look up at

<https://biblicalcounseling.com/counselors/> While they

may not utilize my program, it is run by Dr. Dale

Johnson, who was one of my professors. I wholeheartedly

stand by what he teaches and what his organization stands

for.

Conclusion

A few years ago, Scott Weiland, the lead singer of STP & Velvet Revolver, passed away from a drug overdose. Being in the field of recovery, I have dealt with too many deaths to count, and I hardly ever cry when it comes to someone dying. Yet, as I listened to a song he wrote about his struggles with addiction and relapse, I found myself crying, tears streaming down so much my wife asked if I was okay. I had never met the guy, but I was sobbing like I had lost my best friend. I guess part of it was that I could relate to the words of his song *Fall to Pieces* when I was in the depths of my addiction. It hit home. It reminded me of how lucky and blessed that I am still alive today.

***Fall to Pieces* by Velvet Revolver**

I keep a journal of memories
I'm feeling lonely, I can't breathe
I fall to pieces, I'm falling
Fell to pieces and I'm still falling

All the years I've tried
With more to go
Will the memories die
I'm waiting
Will I find you
Can I find you
We're falling down
I'm falling

After his death, I went on a "Sherlock Holmes" kick, looking up articles on him and trying to know more about someone that I cried over. What made me connect to a song that I used to listen to repeatedly when I was battling my demons trying to get sober? Then it clicked. About two years before I went to rehab, I would tell myself, "This is the last time I am getting high. I am

done. No more." But I could never do it. While I have not had a relapse since I went to rehab, I basically relapsed every day for two years. No matter how much I thought I wanted to stop, I couldn't. Looking back now, I realized that it wasn't that I couldn't; I wasn't willing to do what I needed to do to live a life free from drugs and alcohol. I may have said that I wanted to quit, but my actions showed I didn't. I still went to the bars, still hung out with the same people. There was nothing that would indicate that I was serious about getting sober.

One of the articles I read about him was in *Esquire* magazine, and he said something that made total sense about addiction and alcoholism.

"We were high for five hours. And there was no grinding teeth. There was no big comedown. I think the devil gives you the first time for free." - Scott Wieland

I don't think anyone ever wakes up and says, "Today is the day that I am going to become a junkie." Or, "I want throw away my life and become an alcoholic who needs to start off the day with a shot of vodka." What he said about the devil giving the first time for free is spot on. I don't know about anyone else, but those last two years of my addiction were miserable. I don't even remember the good times that may have occurred in the eleven years I thought I was enjoying getting high. The memories I have now: waking up naked on the bathroom floor, passing out in the driveway and a friend almost running me over if it wasn't for someone telling them I was on the ground, the countless ER visits, blowing out my septum and thinking that pouring hydrogen peroxide was the solution since I wanted to do more cocaine.

If you have a loved one on the fence about getting sober, they haven't decided to turn their life over to God or think

that they are "relapse champions" who just can't get this sobriety thing. They do have a choice. There is hope. Do not stop praying for them. Show them, tough love, when needed, but love them all the time.

For the addict that has somehow picked up this book and has made it to the end. If you are reading this...it is not too late. There is still hope, and if I can get sober, so can you. How have I done it? I have submitted my life to Christ and followed what the Word of God says is true. A life free from drugs and alcohol is possible. Don't just say you want to stop. You must do the actions needed as well. This is my prayer for you and your family.

Gracious heavenly Father, thank you for today. Thank you for forgiving me of my sins and loving me despite my shortcomings. I lift up the family that has the loved one who is struggling. Give them wisdom and discernment in how to love and honor You and how to be obedient to your Word. Father, I lift up the addict questioning if sobriety is possible, how to finally put down the drugs and alcohol, and how to love and honor you. Father, I ask that you surround this family with followers who will come alongside them, fellow believers that will make the sacrifices needed to show them that transformation is possible. In your precious Son Jesus' name. Amen.

JONATHAN OKINAGA

Feel free to reach out to Jon at jon.okinaga@gmail.com. He will make the best effort to personally respond to all correspondence. While he cannot give counsel via email, he is able to do consultations, workshops or speak at your church that can be scheduled through his website (jonokinaga.com). You can follow him on Twitter (@soberhints) or connect with him on Facebook.