QUARTERIY

Change on Hamilton

Volume 23, No. 2 | 2021



Change on Hamilton opened on March 12th, with the support of Lehigh County and the Lehigh Valley drug and Alcohol Intake Unit. We are excited about the possibilities and all we can do for the Recovery community. In our first 30 days of being open, we had a little over 1,000 people walk through the doors for self-help meetings, Recovery Yoga, Women's Dharma, Mindfulness, Battle Borne, the Wellness Group and individuals just wanting help for treatment, or to just sit in a safe environment to relax and drink coffee. We have some individuals that came in to use the Center's computers to do their Highway Safety courses in order to get their

license back. One young lady comes to do a parenting class online and we welcome her to do so. We have had people come in to update their resume and do job searches.

Continued on page 2

Eradicating the Stigma with E

By Vickie Fernandez, PRO•A Administrative Assistant

"It takes no compromise to give people their rights ... it takes no money to respect the individual. It takes no political deal to give people freedom. It takes no survey to remove repression." – Harvey Milk

The month of June has become synonymous with rainbow flags, parades, celebrations, and an overall sentiment of free expression and LGBTQ+ PRIDE. LGBT+ Pride Month occurs in the United States to commemorate the Stonewall riots, which occurred at the end of June 1969. As a result, many pride events are held during this month to recognize the impact LGBT+ people have had. Three presidents of the United States have officially declared a pride month. PRIDE is an acronym for Personal Rights in Defense and Education.

There is a stark contrast between the historic celebratory atmosphere of PRIDE and the multiple layers of stigma that shroud our LGBTQ population.

People who identify as lesbian, gay, bisexual, transgender, or queer/questioning (LGBTQ) often face social stigma, discrimination, and other challenges not encountered by people who identify as heterosexual. They also face a greater risk of harassment, violence and isolation. These combined factors often result in various behavioral health issues as well as alcohol and substance use.

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proa.asst@pro-a.org • www.pro-a.org

The PRO•A newsletter is a publication of the Pennsylvania Recovery Organizations Alliance. The newsletter is published four times a year and sent to recipients in the Commonwealth of Pennsylvania and surrounding states.

Newsletters are mailed in February, May, August & November.

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PRO.A is now on FACEBOOK – "like" us at www.facebook.com/ PaRecoveryOrganizationAlliance



Change on Hamilton

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Valley Health Partners are here twice a week Tuesdays 9am to 1pm and Thursdays 12pm to 4pm. Gloria, from Valley Health Partners, has assisted individuals in filling out applications for medical assistance, get a PCP, apply for food stamps, and to fill out housing applications to name a few. Change on Hamilton is host to a bevy of recovery friendly events such as: A Saturday afternoon movie on July 17th—*The Anonymous People* presented by William Stauffer; Reiki on Sundays starting June 13th from 1pm to 3pm; a networking event on June 9th— Sunday's Coffee with Colleagues 9am to 11am. Location is everything and Change on Hamilton is in a great location to help and assist the community as well as a safe location for the recovery community.

Change on Hamilton Recovery Center is located at 927 W. Hamilton Street in Allentown and can be reached at 484-350-3916. For more information about Change on Hamilton and to keep up with future events visit us at https://www.facebook.com/CoH927/.

Retooling care to meet our needs-

A Recovery Community Vision for a five-year focused substance use disorder treatment and recovery care system

For more information visit: www.pro-a.org

Recognizing Moral Injury Within the SUD Care System

By William Stauffer, CCS, CADC, LSW, PRO•A Executive Director

I am not sure the first time I heard the term moral injury, I suspect it was probably in the context of military service members in combat situations in which they have to do things or witness things that wounded their souls. I have deep respect for persons who serve and understand that I have no frame of reference for the things they do to protect us. The Wikipedia definition of moral injury "refers to an injury to an individual's moral conscience and values resulting from an act of perceived moral transgression, which produces profound

emotional guilt and shame, and in some cases also a sense of betrayal, anger and profound "moral disorientation." There are things in the definition that do indeed resonate with me. There are things that people working within our SUD care workforce are forced to do that outsiders, including policy makers, have no frame of reference for. This must change.

Recently in medical and behavioral circles I have been hearing discussions of what is termed "occupational moral injury." This article from 2020 in the British Medical Journal describes occupational moral injury as "arising during work such as armed combat or emergency response when people carry out, fail to prevent, or become aware of, human actions that violate deep moral commitments. Occupational moral injury is often associated with psychological distress, and moral responses including guilt, anger and disgust." The article goes on to say "a moral wound can be experienced by anyone. It arises from sources that include injustice, cruelty, status degradation and profound breaches of moral expectations. The moral-philosophical version of moral injury associates it with moral and psychological anguish, and feelings such as bewilderment, humiliation and resentment. According to this formulation of moral injury, it could affect patients, service users, families and loved ones as well as care staff." Mic drop.

Truth be told, there is significant occupational moral injury associated with SUD care work. Looking through the literature on the topic, I am seeing that people often confuse it with burnout. Reflecting back on conversations with colleagues out in the world. I am hearing of more than a few who are leaving. I hear about people who lost colleagues to COVID-19 and could not get personal protective equipment or ended up at lower status on vaccination protocols. For many, it goes in the mix, for others it was the last straw. I lost count of how many people I treated who died because I could not get them into the proper care because of barriers that emanate from our systems of care, each one a human who should have been valued enough to properly help. We need to honor them by accounting for these moral failings of our care systems. We owe them that much.

According to this WebMD Article, moral injury occurs when health care providers are "repeatedly expected, in the course of providing care, to make choices that transgress their long-standing, deeply held commitment to healing. The moral injury happens because they're frustrated and can't provide the care they trained for and promised to give." This type of triage care has been the norm for me over several decades of work in the SUD care field. I know I am not alone, it is the norm. This week a colleague confided in me that thoughts of suicide have entered her thinking process because of these very dynamics. She is not alone, she simply has the courage to talk about it.

I have joked that every month, unfunded mandates and new administrative burdens added 2% of effort to justify or document the work rather than actually do the work of helping people. I think it was a reasonable figure. Over a year, it means roughly a quarter of "extra" time to these areas of focus over three decades, it is 720%. Every minute of this takes away from the actual work of helping people. In 2013, PRO•A, my organization conducted interviews and examined the SUD workforce in the state of Pennsylvania, the counselor version titled Systems Under Stress found all kinds of barriers to actually doing the work and a workforce who were leaving because they were spending less time actually helping people. The trends of increased administrative burdens has continued unabated, one might argue it has accelerated. More time spent justifying the work, less time doing it as death rates from addiction, including alcohol, stimulants and opioids or combinations of all of these substances dramatically increase. This is the very definition of "occupational moral injury." It starts to feel like being in the trenches fighting the good fight as our own officers pick us off from their bunkers to the rear of our own lines.

This post is probably more self-reflective than most, but I also know that my experiences are similar to what others experience. Being in recovery makes many of us "those people" who end up getting disparate care. Every time I see it, I recognize it could be me getting disparate care and insurmountable barriers to accessing help. I could have ended up in a body bag instead of having a life. Every single day this very long week I have spent time on the phone with people describing care denials of life sustaining medical interventions under the lens of seeing addiction as a moral failing by licensed medical professionals, persons in long term recovery who are being denied employment for decades old legal charges and more. It is a normal week. It also hurts my soul.

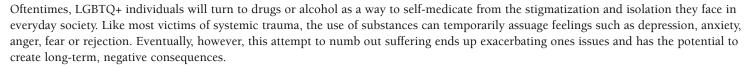
This 2006 article from Journal of Social Work Research Personal and Occupational Factors in Burnout Among Practicing Social Workers found that within the helping professions there is a lifetime burnout rate of 75%. They suggest we examine individual factors that can influence resiliency. One way to do this is to address the moral wounds of systematic barriers to recovery. I have said often that we have built a system of care that provides less than what people need to get better because of implicit bias against persons with addiction. As a society we have low expectations of persons with SUDs and this influences care design. We don't have care that offers the minimum effective dose of care. Marginalized communities get even less than the dominate culture. I didn't get arrested, I got treatment as a white kid. I don't have a legal history tattooed to my forehead for life. I could go on.

Many federally funded surveys have only recently started to ask about sexual orientation and gender identification when compiling data. This research, though limited, has found that sexual minorities have higher rates of substance misuse and substance use disorders (SUDs) than people who identify as heterosexual.

Eradicating the Stigma with

Challenges the LGBTQ+ Community Faces:

- Discrimination or stigmatization based on sexual orientation
- Rejection or shame from family or friends
- Loss of employment or not receiving promotions
- Internalized homophobia or self-hatred
- Hate crimes
- Emotional abuse, threats, public humiliation or ridicule



Transgender individuals are especially vulnerable to turning to addictive substances to deal with feelings of anxiety due to negative stigma and discrimination. Some studies have found that transgender individuals are 2.5 times more likely to use cocaine or meth; they are also twice as likely to abuse prescription medications (such as prescription opioids or benzodiazepines).

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), the rate of substance abuse disorders among LGBT individuals is not well known, but studies indicate it may be 20% to 30%, which is significantly higher than the general population (9%).

The sheer act of being forced to live a closeted life out of fear and shame alone is cause for turmoil. Consequently, this keeping one's sexuality a secret is an enormous psychological toll that may lead to the development of mental health disorders and significant emotional distress.

Common psychological or emotional disorders among the LGBTQ+ community include:

- Major depression
- Generalized anxiety disorder(s)
- High levels of stress
- Suicide attempts or self-harming tendencies

It is time we raised our collective voices to inspire more research, implement resources and bring about not only awareness but change within the LGBTQ + community. We as people in recovery need to lift up our fellow humans by mobilizing, educating, and advocating for those who are oppressed and cast aside by the leaden veil of stigma. Let us celebrate our difference with love, compassion and PRIDE.

Recognizing Moral Injury Within the SUD Care System

continued from page 2

In 2019, it was the honor of a lifetime to receive the Vernon Johnson Award for individual advocacy at the America Honors Recovery Diner. The speech I gave is HERE. In the speech, I reference the moral injury of this work. The death of a childhood friend who was as close as a brother because a mental health nurse in a hospital emergency department did not want to be bothered with actually helping him. A person being denied life insurance for purchasing naloxone (related story in the Philadelphia Inquirer here). The denial of a cardiac procedure needed to sustain a young woman's life "because she did this to herself." In reflection for me, the moral wounds of our system have thus far propelled me to hold systems accountable and work for change. It is not often welcomed, but the body count continues to escalate and under even slightly different circumstances, I could be in that static. What alternative is there but to carry on. As Camus so famously said, "we must imagine Sisyphus as happy. But that rock is heavy and the new day dawns, again."

According to this article by the Moral Injury Project at Syracuse University, "moral injury, then, is a burden carried by very few, until the "outsiders" become aware of, and interested in sharing it. Listening and witnessing to moral injury outside the confines can be a way to break the silence that so often surrounds moral injury." They are recommending public dialogue and deepened understanding of the burdens carried by the few on behalf of society. Even within social services, there are few fields of work with the level of implicit bias and systemic barriers as the substance use care system. We should have such a process across our SUD care system. I suspect we will keep having unending workforce shortages without such an accounting. If we can address such dynamics here, we can fix a lot of things.

Of course, the first step is acknowledging we have a problem and then we must do something about it. Read the blog HERE.

Is Your Organization/Business a Recovery-Supported Employer?

"The first step toward change is awareness. The second step is acceptance." - Nathaniel Branden

The Surgeon General has defined recovery as "a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." When an individual has adopted this new lifestyle, they identify as being in recovery. According to the Center for Disease Control and Prevention, approximately 10% of American employees identify that they are in recovery or recovered from a substance use issue.

An individual's employment environment can impact an individual's recovery dramatically. Employment is an important part of sustaining recovery for those with substance use disorders, increasing their self-confidence, promoting individual wellness, and supporting the goals of the individual. A healthy work environment fosters healthy communication and collaboration, and nurtures the employee/employer relationship. For individuals in recovery, the feeling of being supported could mean all the difference.

So what is a Recovery-Supported Employer? An organization that is recovery-friendly has a heightened awareness of the need to support those in recovery from substance use disorders. There is open and non-stigmatizing communication about recovery, and policies and procedures that reflect support of individuals in recovery. There is support for individuals in recovery, and protection of all employees' dignity by treating substance use disorder as the condition that it is, without judgement, bias or discrimination. It is creating a positive, supportive workplace that includes healthy communication about the problems that may arise for both employers and employees, as well as solution-focused standards for all employees.

Why become a Recovery-Supported Employer? Research identifies the positive impact of organizations that implement a Recovery-Supported Employer. A few of those outcomes include:

- healthier and more satisfied employees
- increased employee retention
- increased productivity
- increased safety environment
- money saved through increased safety
- decreased healthcare costs
- decreased absenteeism

Individuals in recovery have tremendous strengths and attributes, they have a sense of purpose, are grateful, and they are guided by hope.

Additional resources to assist in assessing and implementing an organization that support individuals in recovery: Recovery Friendly Workplaces PA and Drug Free Workplace PA. For questions regarding a workplace that supports recovery, contact PRO•A at patti.b@pro-a.org. To have common questions answered regarding legal requirements related to drug-free workforce compliance and the regulations that govern these standards, go to https://www.samhsa.gov/workplace/legal.







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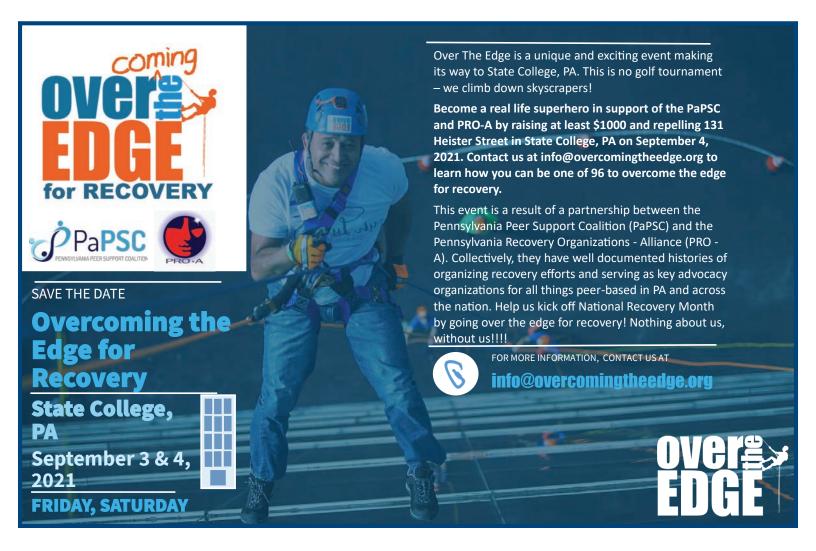
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Please Welcome our new PRO•A team members!



Joseph "Joe" Veach, CRS

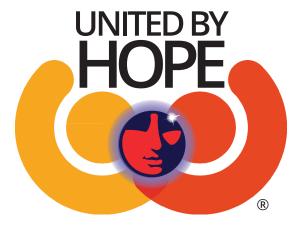
We are happy to welcome Joseph "Joe" Veach to the PRO•A staff as a Recovery Employment Coordinator who will be supporting the Workforce Support Grant initiative in the Luzerne/Schuylkill area. Joe is a former music business professional and insurance sales producer, and has spent the majority of the last ten years working with youth at a Job Corps center. He began his recovery journey in 2006 and, despite a few setbacks, has been "clean" (as he expresses it) since August 2016. He lives in Hazleton, PA with his cats Ju-Ju, Ben, Abby and their mother, Grace.

Thanks to Safer Streets for Tamaqua's Little Feet, Joe completed his Certified Recovery Specialist (CRS) Training in June 2019. He enjoys training and taking any opportunities to learn. Joe has an Associate's Degree in Specialized Business. He had become interested in the brain and behavior shortly after his first experience in an inpatient treatment facility and made the decision to seek further education (after some procrastination). He earned his Bachelor's Degree in Science (with a focus on Psychology) in 2014. He has worked as a residential advisor, child care worker, youth worker, counselor, and care coordinator at various facilities in his home area.

Joe is passionate about helping others find freedom from Substance Use Disorder. Though he has found his own freedom through God and 12 Steps, the spiritual principle of open-mindedness (as well as CRS training) has allowed him to increase the number of lives he can impact in a positive way.

Joe's other passions include service to his "fellowship" (he currently holds service commitments to his home group which meets on the Zoom platform and he has been doing so since April of 2020), attending church, concerts, listening to music (various genres of metal and hip-hop are favorites), spending time at the beach and at Heinz Field, Pittsburgh, where his Steelers play. Joe loves animals of all kinds. He loves the work he does as a part-time Care Coordinator at Silver Pines Treatment Center, Mahanoy City, where he has an opportunity to share his experience, strength, and hope with others when he facilitates groups.

Remembering Lives Lost



The Remembrance Quilt Project



If You Need Help...

The UNITED BY HOPE project specializes in helping people make panels for the UNITED BY HOPE The Remembrance Quilt Project through panel making workshops. To learn more about panel making or UNITED BY HOPE contact
Vickie Fernandez
at vickie@pro-a.org or call
PRO•A at 717.545.8929.

RECOVERY Music Festival

Sunday, September 12th Noon – 5:00 pm

ArtsQuest Center at SteelStacks Bethlehem, PA

A FREE MUSIC FESTIVAL to celebrate Recovery



We join together to offer hope and demonstrate vibrancy in our community's revitalization through great music, good food, fun family activities and many resources and support.

REM ONE KC Makes Music, and DJ Rocky Styles



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By Patti Baranowski, MA, CADC Workforce Support Program Director

Research continues to validate the positive relationship between employment and recovery. A living wage increases independent living, self-esteem, and self-efficacy. It also decreases stigma, desolation and hopelessness. For some, they believe that employment is a benchmark of recovery. But for many others, it is a dimension that supports the wholeness of an individual in recovery. SAMHSA identifies one of the four major dimensions that support recovery as a sense of purpose. Having independence, a living wage, and a sense of worth can be powerful aspects of purpose for an individual in recovery. Employment for individuals in recovery also provides an avenue for social contact, connections with other individuals, and increased collaboration with others.

Pennsylvania Recovery Organizations – Alliance (PRO•A) is honored to announce that we have been awarded a five-year, federal grant by the Substance Abuse and Mental Health Services Administration (SAMHSA). The PRO•A Workforce Support Project is designed to engage and support workforce participation for individuals with Substance Use Disorder or Co-Occurring SUD and Mental Health Disorder (COD) in Central and Eastern Pennsylvania.

There is growing recognition that five years of sustained substance use recovery is the benchmark for 85% of individuals with to remain in recovery for their lifetime. In PRO•A's Retooling Care to Meet Our Needs—A Recovery Vision for a Five-Year Focused Substance Use Disorder Treatment and Recovery Care System—we envision five major areas of focus to support sustained recovery. Building the 21st Century Workforce to serve the next generation, and Employment, Education and Self-Sufficiency are two of these crucial areas.



The Workforce Support Project will provide a one-stop, individualized workforce development and employment services as well as recovery support services where there is access to recovery and workforce participation support. Once engaged, participants will work directly with a Recovery Employment Coordinator, utilizing evidenced-based practices and operating across each region. Participants will be provided a 6- to 12- month intensive recovery service coordination program and peer-based recovery support services, including face-to-face and virtual support sessions, peer services and referral, social media support, aftercare planning, and family information and referral services.

The geographical areas for this project include 14 counties in Central and Eastern Pennsylvania: Adams, Berks, Cumberland, Dauphin, Franklin, Juniata, Lancaster, Lebanon, Lehigh, Luzerne, Northampton, Perry, Schuylkill, and York. Our Recovery Employment Coordinators, all Certified Recovery Specialists, utilize all communication platforms, to include face-to-face and virtual support, to assist individuals in employment efforts and recovery support, as well as family member support. The Workforce Support Project focuses on strengths across the service system, as well as of the individual.

Employment planning is collaborative, oriented to the needs of the individual, and is focused on evidence-based practices with this project. It is focused on empowering individuals and communities. The Workforce Support Project's structural foundation is based on hope, purpose, and connection. If you are in one of the counties listed above and have a referral or are interested in connecting with us, please contact proa.asst@pro-a.org, or (717) 545-8929.



This product was supported [in part] by grant number T1083412 from the Substance Abuse and Mental Health Services Administration (SAMHSA). The content of this publication does not necessarily reflect the views or policies of SAMHSA or the U.S. Department of Health and Human Services (HHS).

Moving from Survive to Thrive

4th Annual Leadership in Recovery Hybrid Event The event will be both in person and virtual!

November 3 2021

This Leadership Dinner is part of our mission to reflect on the past, while maintaining our focus on the future, and moving forward with continued work in the recovery movement.

PRO•A has served Pennsylvania's recovery community for over two decades. Moving forward in our mission, we are bringing together members of our communities, many of whom have served in a leadership role, as well as friends and colleagues from Pennsylvania's current service system and recovery community to continue recognizing the fundamental role that individuals play in the recovery movement.

The celebration will include dinner, networking, speakers, and our annual awards presentation.

Developing leaders, strengthening the voice of recovery, and elevating the message of hope are crucial aspects of increasing our recovery resources. Supporting leaders who exhibit tremendous ability to effect change and strengthen the recovery movement is crucial to our organization's role.

Together, we can and do make a difference. Please support us in our recovery mission.

Striving for lives and recovery communities living together with meaning, hope and purpose. This leadership event is focused on the theme of flourishing and advocating for every opportunity available to support all members of our community to flourish. We need to build a substance use care system that serves the needs of all our diverse communities to support long term recovery.

TICKETS

\$50. in person dinner | \$25. virtual attendance
For further information, to purchase advertising or tickets please contact:
Patti Baranowski, patti.b@pro-a.org or call 717 545 8929.
If paying by check, please make checks payable to PRO•A and mail to PRO•A Attention: Patti Baranowski 900 Arlington Avenue Suite 254A, Harrisburg PA 17109

You can also go online to purchase tickets electronically: https://pennsylvania-recovery-organizations---alliance.ticketleap.com/



PA Statewide Recovery Month Event Calendar 32nd Annual National Recovery Month

2021

The Pennsylvania Recovery Organization Alliance is putting together a calendar of statewide events in celebration of Recovery Month, which will occur in September 2021.

We want to show how we celebrate recovery across our great state and to get people involved in the awesome work that you are all doing!

If you, or an affiliated entity, is holding an event for Recovery Month, we want to include it in our Recovery Month Edition of our newsletter.

Utilize our new web feature on the PRO•A calendar page at http://pro-a.org/calendar/or contact the PRO•A Administrative Assistant, Vickie Fernandez by email at vickie@pro-a.org or phone at (717) 545-8929 x1.

SUBMISSIONS MUST BE RECEIVED NO LATER THAN AUGUST 1, 2021

PLEASE INCLUDE:

- The date, time and address of the event location
- A contact name, phone number and email address
- A brief description (one or two sentences) of the event including what you are doing, including costs if any to participate or a flyer if available



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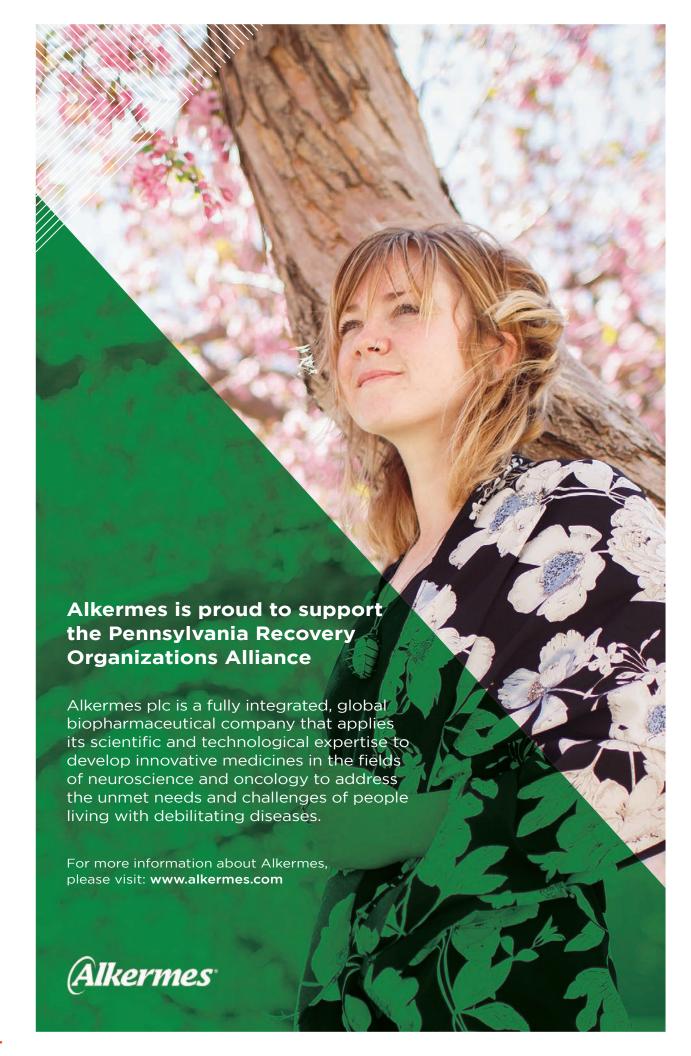
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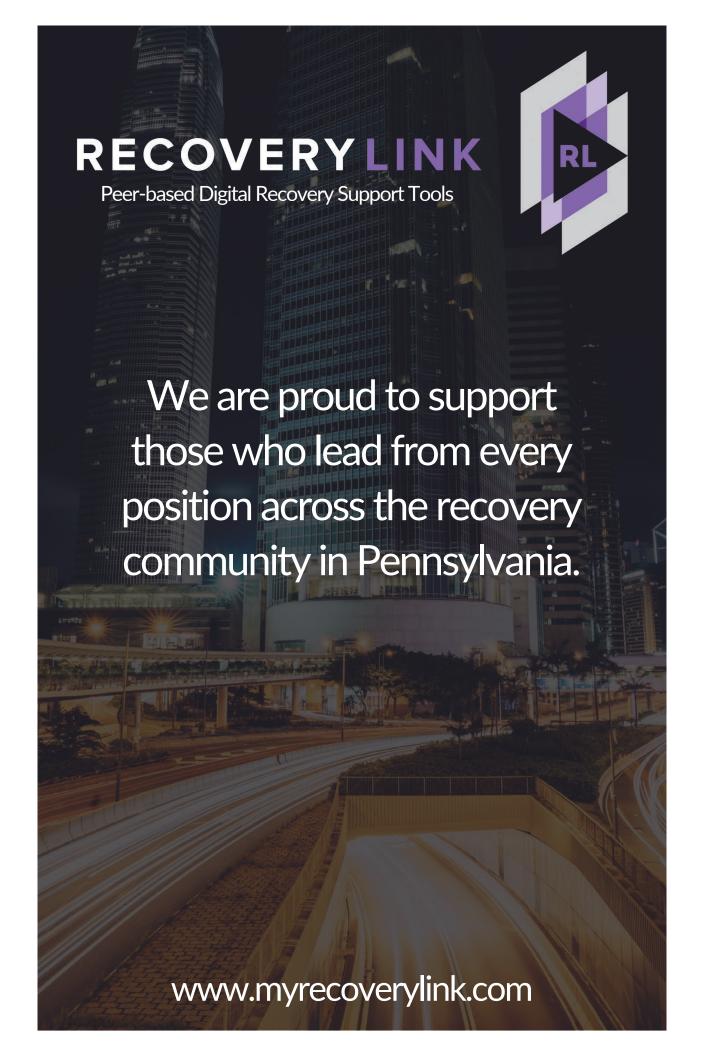
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Capital area

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