

QUARTERLY report



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Resiliency & Recovery Reflections for Black History Month 2023



By Laurie Johnson-Wade, Co-Founder Lost Dreams Awakening RCO

February is a month that our nation is encouraged to turn its focus towards Black Excellence and the History of Black Citizens of the United States of America. And yet, as I work on these brief reflections, I can't help but take note of this celebratory month being eclipsed by the reality that a great number of black citizens still struggle to realize full agency here in the USA; and this reality is substantiated by the most recent public—and traumatic—events that we have collectively witnessed and are now grappling with in 2023.

I ponder the layers of my identity—black, female, in Substance Use Disorder (SUD) recovery since 1991, along with the other intersectional aspects that make me who I am; I absolutely see my “resiliency” as an indispensable strength.

I would like to offer the following as a gift during Black History Month 2023. This is a briefing that was sent to me June 2020, from Dr. Ryan Niemiec, from Via, following the murder of George Floyd (a black citizen who struggled with SUD at the time of his death on May 25, 2020).

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Reflections in the New Recovery Advocacy Movement – Excerpts from an interview with Mark Sanders on the Development of African American Recovery Communities



By William Stauffer, PRO•A Executive Director with Mark Sanders, LCSW, CADC

Forward — The first time I had heard about Mark Sanders was when I was preparing for Black History month in early 2013. I wanted to highlight the history of recovery within African American communities in our quarterly recovery newsletter. After initiating an internet search, I quickly found the [Online Museum of African American Addictions, Treatment and Recovery](#) which is curated by [Mark Sanders](#). It is a fascinating site with what is easily the most comprehensive history of African American recovery and the contributions of African Americans to recovery efforts ever put together. A resource for historians interested in these topics. What I soon realized is that he was the only person to have compiled and preserve this history to this extent.

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WORKING TOGETHER TO MAKE "RECOVERY VOICES COUNT" IN PENNSYLVANIA



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Resiliency & Recovery Reflections for Black History Month 2023

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Amidst the global activism, in particular the focus on justice for Black people, I offer some insights from the science of character strengths and the African American community. Note that the term “African Americans” is used here because in this context that is the term used by the researchers themselves.

—Dr. Ryan Niemiec, VIA Education Director

FROM THE RESEARCH: CHARACTER STRENGTHS AND AFRICAN AMERICANS

Researchers often study groups with common characteristics to explore whether there are unique patterns to help in the understanding of different cultures and communities. African Americans are an understudied group in terms of the science of character. But, with some digging into the research, interesting strength findings can be uplifted and highlighted to help people understand African American culture and appreciate the strengths therein.

- **TEAMWORK/CITIZENSHIP:** Exposure to racism is connected with an increased likelihood of African American adults being involved in political and social justice activities (Mattis, Beckham, et al., 2004).
- **PERSEVERANCE/RESILIENCE:** The persevering processes African Americans use to face adversity include many character strengths, such as positive outlook (hope), spirituality, religiousness, meaning-making, forgiveness, expression of empathy (social intelligence), compassion (kindness), gratitude, and humility (Mattis et al., 2016).
- **CREATIVITY:** African Americans have developed many strategies to handle adversity and highlight the joys of life. One of the central approaches is through the strength of creativity which comes in the form of storytelling and the creative arts (Mattis et al., 2016).
- **LOVE:** In seeking closeness/intimacy, young African Americans seek unconditional support, try to defy stereotypes about African American partnerships, try to avoid relationship mistakes made by their parents, and make efforts to behave with integrity in their relationships with partners (Collins & Champion, 2011).
- **HUMOR:** “African American humor” is distinct from other cultural communities and includes many forms of humor, such as satire, metaphor, double entendre, self-deprecation, improvisation, and word play (Gordon, 1998).
- **FAIRNESS/SOCIAL INTELLIGENCE:** African Americans are more “perceptually primed” to detect unfair treatment, hypocrisy by those in power, and misalignments between actions and words (Simons et al., 2007).
- **SELF-REGULATION:** To decrease the likelihood of being seen as aggressive, threatening, or unfriendly, African Americans learn a number of socialization and protective strategies (Baumeister, Vohs, & Tice, 2007), for example, not putting their hands in their pockets or making sudden movement when with police.

Resiliency and Recovery allows me share my whole self with humanity, as expressed in ancient the African Philosophy of Ubuntu (I am, because we are). I love my work, family, community, and I serve! I am honored to be the Co-Founder along with my husband, Dr. Von Wade, of Lost Dreams Awakening (LDA) Recovery Community Organization (RCO), in New Kensington, PA.

Resiliency and Recovery allowed me to design and creatively express an Afrocentric Recovery Pathway – *LDA Ubuntu Recovery*, in 2020, to create a communal/collective recovery support circle that joins the recovery-oriented system of care to provide unconditional belonging and hope; and where abstinence is not a requirement to belong to humanity.

Finally, Black History Month permits me to amplify my courageous ancestors. See my fourth great grandparents: Henry & Martha (Jackson) Waugh, freed slaves from the Waugh Plantation, in Culpepper, VA. (Pictured here with their children).

While many of my well-intentioned peers say, “Laurie, why do you keep talking about all of this ‘stuff,’ you have it good.” While I am grateful for my beautiful life, I am equally my brothers’ and my sisters’ keeper, without regret.

As Dr. King so eloquently stated:

“Injustice anywhere is a threat to justice everywhere.”

Onward & Upward, Laurie J-W





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RCO CORNER

Be a Part of the Conversation is a nonprofit organization located in southeastern Pennsylvania. Founded in 2011, our mission to equip families and communities with skills and resources to understand substance use, addiction, and related health issues. We provide community programs, foster supportive connections, highlight lived experiences, and challenge stigma.

We are a collaboration of community leaders, families, educators, prevention and treatment experts, and individuals with lived experience. We believe that having meaningful, inclusive conversations about substance use will support individuals and their families in their efforts to develop healthy coping skills and access support whenever there is a need. Learn more about Be a Part of the Conversation here:

<https://conversation.zone/>

Community programs address a variety of topics that fall under the categories of prevention, early intervention, the challenges associated with particular substances (alcohol, cannabis/vaping, stimulants, opioids, etc.), process addictions, co-occurring addictions, pathways to recovery, family recovery, and much more. Our presenters include treatment experts, local clinicians, individuals in recovery, and families who share their personal experiences.

We partner with school districts, agencies, and organizations across the five-county region in southeastern Pennsylvania to provide programming for educators, families, health care providers, elected officials, and communities at large. At each program, our goal is to cultivate an inclusive and interactive atmosphere free of judgement or stigma. You can find upcoming community events on our calendar: <https://conversation.zone/calendar/>

A growing branch of Be a Part of the Conversation are Parent Partnership meetings, which provide an opportunity to meet weekly, throughout the year, with other parents, grandparents and guardians who love someone with a substance use disorder. While we heartily recommend Al-anon, Na-anon and other 12 Step meetings that support families, we have found that the parenting role has unique challenges when our child struggles with substance use. We need engage with other parents who understand the importance of setting boundaries and finding our own recovery. We dramatically expanded our Parent Partnership network of support groups in 2021 and currently have 18 meetings taking place each week – some meet on Zoom and some meet in person. You can learn more about Parent Partnership meetings here: <https://conversation.zone/partnership/>

The newest initiative under the Be a Part of the Conversation umbrella is the Family Recovery Course (FRC). The FRC is a three-part series of peer-led interactive educational trainings for parents or guardians whose child, at any stage of life, has struggled with substance use. Enrollment is limited to a maximum of 12 participants in each of the courses, which are led by two trained instructors who have personal experience with a child who has struggled with addiction to drugs or alcohol.

The FRC was developed in collaboration with licensed clinicians currently working in the fields of addiction treatment and behavioral health. Since the spring of 2022, nine courses have been completed -- some in-person and some on Zoom. Survey results have shown overwhelming satisfaction with the course and the related materials and supportive resources. Ninety-five percent of participants have completed all three parts of the course. You can learn more about the Family Recovery Course here: <https://conversation.zone/frc/>



is

Please Welcome

our new PRO•A team members!



Dale Heffline, CRS, CFRS

My name is Dale Heffline, I have joined PRO•A as a Recovery Employment Coordinator in Luzerne and Schuylkill counties. I am a person who has been in long-term recovery for 31 plus years. I have a background education in Theology and Psychology. I am a native of the Philadelphia area and an avid sports fan. I am a lover of food and dogs (I have two border collies, Nutmeg and Saffron).



I have had two major careers, one as an Executive Chef and the other as a Finance Manager for an automobile dealer. This first of which carried a long bout with addiction/alcoholism and the second which began in addiction (first two months) and ended with a sober record. During my substance use I had several encounters with the law, was homeless for a short time and at the end was facing some serious court issues.

I am an advocate of recovery and a public speaker for recovery and a liaison for people seeking recovery, jobs, or anything attached to the 8 domains of wellness. I'm an advocate of progress, not perfection, and a promoter of partnering with resources available to help an individual sustain a productive and sober lifestyle.

I believe that there is a spiritual component that needs to be applied to the recovery process. Whether by the Church or basic belief in a power greater than ourselves, through nature or overall awareness that there is SOMETHING bigger to believe in and turn to, in order to conquer each day without a pill, fix, joint or drink.

In 1998 my son died at 25 from a heroin overdose. I live this every day and share my story every time and place I can. It is what helps me and in turn helps others. It is personal, pervasive, pertinent, and powerful. Though painful, it is crucial to be honest and share my story with others to help save lives. I believe in "giving it away to keep it" one of the four paradoxes of recovery.

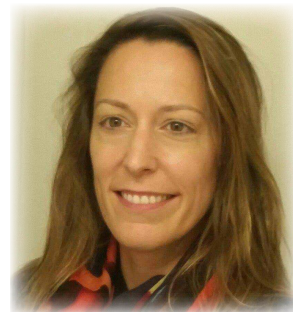
I am currently a Certified Recovery Specialist, Certified Family Recovery Specialist, Certified Youthful Offender Instructor for DUI/ DRUG Countermeasures and a Certified Smoking Cessation Instructor (American Lung Association).

Courtney Kole, MS, CRS

Courtney is the Recovery Employment Coordinator for Northampton and Lehigh counties under the PRO•A Workforce Support Program. Having received her CRS certificate, she has been working in the SUD/AUD treatment field for a few years now. She is on the Board of Directors for Northbound & Co and a fundraising committee member for the SYNC

Recovery Community. In addition to being a Certified Recovery Specialist, she has worked as an Intake Coordinator for Brookdale Recovery Center and with Treatment Trends as a Recovery Court CRS and a Utilization Review Coordinator.

Courtney has a public relations and project management background, and these skills will lend well to her REC role. Her passion is to give others hope and to help participants think outside-the-box for their own recovery journey. She has held several life skills groups at Keenan House to include resume writing, mock interviews, time management and budgeting. She enjoys spending time in the Lehigh Valley and New Jersey with her two children and dog, Rocky, and her supportive fellowship friends.



All of us at PRO•A would like to congratulate Recovery Employment Coordinator Nikki Jo Weir-Barsotti on completing her Associates Degree in Applied Science in Human Services. Nikki is a tenacious, compassionate, and driven individual who gives her all in everything she does. We are honored to have her on our team and commend her on this fantastic achievement.



My Journey

Cassandra Ellen Joy Bradford-Drumheiser



My name is Cassandra Ellen Joy and I have been in recovery without occurrences since 2013. That statement is powerful and empowering as I was raised in a two-parent, African American Christian home. My father was a COGIC assistant pastor and primary pastor. Both of my parents were born prior to the passing of the Civil Right and Voting Act. There are things they both witnessed that are unspeakable. And they came of age during the '60s and the Civil Rights Era. Consider this as you read this article, it will help your perception and appreciation.

Finding help for mental illness was a challenge for the Black religious community when I was a child. I was born in 1966 and came of age in the '70s and '80s. My sphere of influence was limited to family and members of the church. Though alcoholism existed in my family, it wasn't talked about. My family operated under the mind-set that if you were employed and earned decent money, you weren't considered an 'alcoholic' or an 'addict', but merely someone who enjoyed their liquor. Mental illness and substance use disorder weren't acknowledged. This was how most African American families thought and to be forthright with your issues would bring shame to you and your family.

I had my first traumatic experience resulting in PTSD in 1972 when my grandfather died suddenly from a heart attack. Getting help wasn't easy! My father was adamantly opposed to therapy. I was told that prayer and Jesus were enough, and seeking professional help was a sign of weakness. My father believed that he would be deemed a failure as a parent if he allowed his baby girl to get outside help. But as I began to lose more and more of my hair due to what I now know was a mental health issue, my mom became desperate and found a child therapist that I saw for a year and a half. My struggles would continue until I was 47. In the summer of 1977, I was sexually assaulted by a close family friend. Being sexually assaulted would be a part of my story until I was 18. I began drinking and experimenting with drugs and alcohol. At the age of 15, I began to experience issues related to food, and in 1996 I added laxatives to the mix. Finally, the summer of my senior year of high school would be my first suicide attempt. There would be two more attempts in the years to come.

Due to the years that I suffered needlessly, I always promised myself that if my children ever needed mental or substance use treatment, I would get it for them. I did not keep secrets from them. And though I remain a serious believer in my Christian faith, I believe that we're to use all the resources available. In my family I was considered "the clown" or the "black sheep." However, while in treatment I learned that I wasn't a "bad kid" but a person suffering from mental health issues and substance use.

Though the stigma has decreased for African Americans and their communities, there remains fear, and judgment regarding substance use and mental health disorders. In addition, there are often disparities and discrimination in treatment.

Today, I am a happy and whole person. Throughout my life, from the age of 6, I have been THAT PERSON who's broken cycles by choosing against the status quo. By breaking those cycles it's enabled subsequent generations to speak out about their illness and experiences and the shame they've endured by familial ignorance. It's been quite a journey, one that I'm still on helping those in my community, circle of friends and families receive help as they set out on their own journey in recovery by speaking out and helping others.



Reflections in the New Recovery Advocacy Movement – Excerpts from an interview with Mark Sanders on the Development of African American Recovery Communities

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By William Stauffer, PRO•A Executive Director with Mark Sanders, LCSW, CADAC

I have often written in recent years about the importance of preserving our history and likened efforts to record and preserve our history to a [seed bank](#). A place we store vital seeds to nurture future generations in case something happens to our current harvest. Mark Sanders has created this vault. The entire and most complete record of African American recovery history is in one place and available to the public. What he has done is remarkable and worthy of high praise. We have far too few historians who have undertaken this vital work to preserve, protect and use such information to inform more effective strategies into the future. A whole lot of history is getting lost forever with each passing year.

I have referred to Mark's online museum over the years to learn about the rich history of recovery in African American communities. I also wonder what would happen if the lights went out in his online museum. What would happen to his life's work? Would we lose this history? We should heed the adage that one should never put all of one's eggs in a single basket. I have asked myself similar questions about the [life work of Bill White](#). We need more such historians establishing additional repositories for our recovery history, in all its rich diversity.

If you are reading this and feel inspired, take action. If you see recovery history worth recording and nobody is, it just may be something you are called to do. Learn about and record your own community recovery history and seek ways to preserve that information for the future. I hope you read this interview and check out Mark's Museum and his written works. Take up the challenge, learn your own community history and use it to inform what you do, how you do it and help mentor the next generation!

Perhaps the thing that means the most to me in my efforts to strengthen recovery efforts in the United States and beyond is my work to record and preserve the recovery history within African American Recovery. I am the sole curator of the [Online Museum of African American Addictions, Treatment and Recovery](#), to the best of my knowledge it holds the most comprehensive record of recovery within the African American community ever compiled.

● Values that helped with the work to unite the community and forward these goals?

I think that some of our African Cultural norms have had a significant positive impact on the efforts within our communities and to support recovery in our communities. One of the pillars of these values is collectivism. It has been expressed as the concept of "[Ubuntu](#)" – [I am because we are](#). Who we are as people is shaped by our elders and our relationships with our whole community. We are all connected. That our common bonds within a group are more important than any individual arguments and divisions within it. It fits well with the core values of the new recovery advocacy movement.

The second value relates to our extended family orientation. We have a [value of interdependence and communal support](#). It is a huge strength to tap into for improving wellness and support within our communities. Thinking of a personal example. In the family I am thinking about addiction was prevalent, the father died in 1986.

One of the sons went into treatment in 1987. When it came time for family sessions, and the son reached out to connect, at first efforts were not successful. Harms had occurred to the family and there was some estrangement due to his use and the impact his addiction had on the family. When the lens was shifted and the counselor working with him reached out to recruit the extended family members and to focusing on the extended family and their collective wellness, the response was very different. Food was included as sharing of meals is an essential ritual when family comes together. Everyone showed up and rallied together. 39 members of the family, aunts, uncles, nieces, and nephews came together to support not just him, but each other. It was a beautiful thing. This individual was the first member of that family to get into recovery, but now that entire extended family is in recovery. This really highlights the need to focus on extended family work to support recovery in African American communities.

● What message would you want to pass on to the next generation about what has been learned and what remains to be done?

A quote from [Carter G. Woodson](#) come to mind. "When you control a man's thinking you do not have to worry about his actions." It is vital that we study and understand our own recovery history. It is a rich history. It can inform us of effective ways to harness our resources to strengthen our communities and it can inform us about potential pitfalls and barriers. If you are new to this work or a young person wanting to get involved and support effective change, start with becoming a student of our history and what has been accomplished and how it was done. This is so very important.

The other thing we need to do is focus on mentoring. Wherever you are, establish mentoring processes in which older generations mentor younger generations. These need to be set up as permanent structures within our treatment and recovery support infrastructure. Thinking back to what I was saying in respect to the values and strengths of our extended family focus and the critical importance of supporting each other. What I am thinking of is similar to that. Multigenerational mentoring circles where we invest in the development and the support of our younger leaders. They are our future; it is through them that we will accomplish even greater things. Start these processes now and our younger leaders will see their work extend into the next generation beyond them and into the future.



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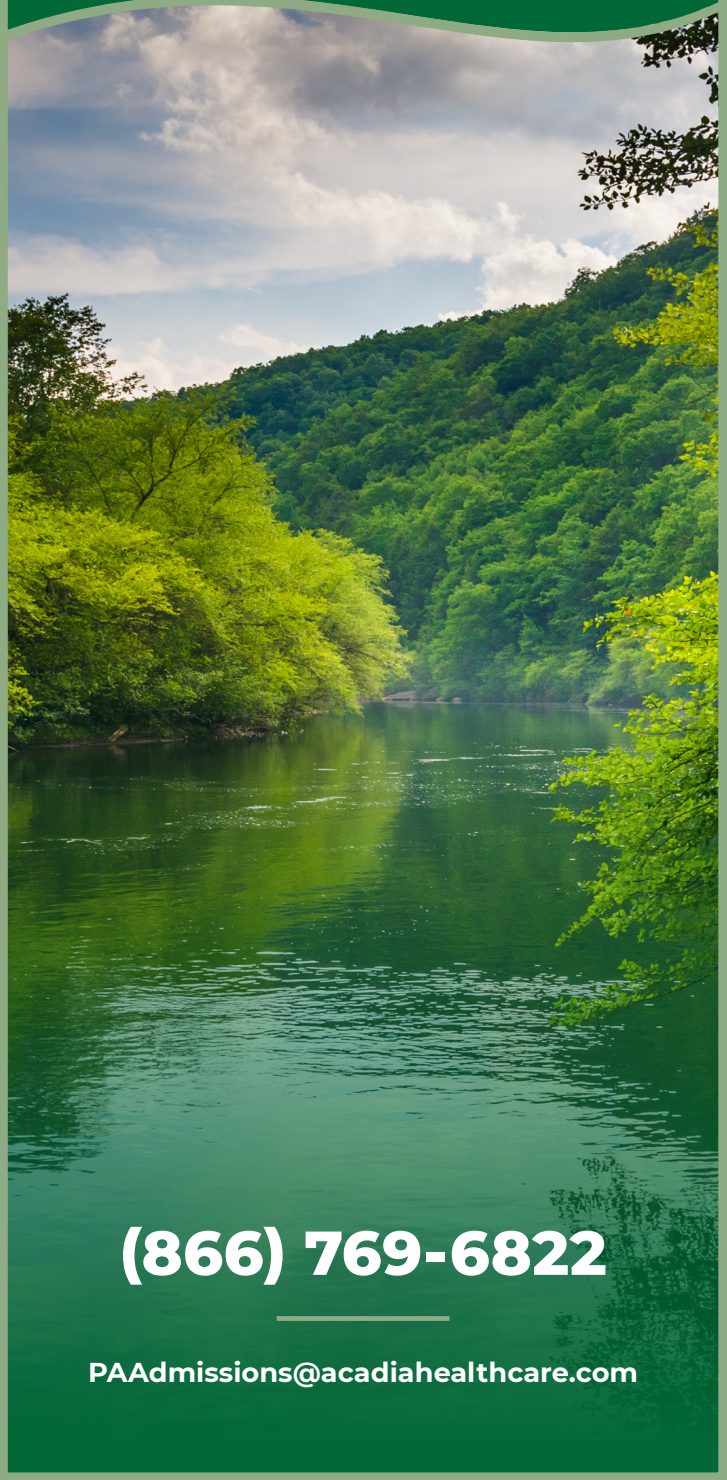
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