

QUARTERLY report



Volume 25, No. 4 | 2023

PRO•A

6th Annual Leadership in Recovery Event



“Together, We Can And Will Make A Difference.”

“Nothing About Us, Without Us.”

Our PRO•A Executive Director, William Stauffer, spoke the above universal recovery language to all present at our 25th Anniversary event. The former recovery quote came in his welcome to the event, and the latter he resurrected from the grassroots movement which began a generation ago, a recovery statement used to voice that no policy should be decided without the representation of those which that policy affects. Both recovery expressions became the theme of this night’s celebration, and served to bring the past and present together as a means to fuel our future common goals.

The event was made possible by the remarkable support of our sponsors, Board of Directors and staff. Our thanks go out to our speakers, awardees and treasured guests. Their participation and dedication made the night a resounding success.

Our awardees included: Marissa O’Neal, founder and CEO of Jeannette Outreach Factory Inc., who was our Individual 2023 Champion of Service awardee. Sage’s Army, Carmen Capozzi, founder, is our Champion of Service Organization awardee. Dr. H. Westley Clark, retired and former Director of the Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration and a gentleman with many, many accomplishments, is our Ambassador of Recovery awardee. Rick Esterly, Founder and developer of Esterly Consulting Associates, and a man who also has too many accolades and accomplishments to add here, is our Lifetime of Service awardee.

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IN PENNSYLVANIA



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Distribution of Kloxxado in Harrisburg Couldn't Have Come at a *Better Time!*

By *Nikki Weir*, AAS, AAC, CRS, PRO•A Recovery Employment Coordinator Team Lead

In July 2023, Hikma Community Health donated 15 big boxes of Kloxxado (6 boxes that contain 12 2-packs) for distribution throughout Pennsylvania. At the time, I was planning Recovery Month with a couple of providers in Harrisburg. One of the providers asked if PRO•A would partner with them for our first Narcan Distribution. The plan was that the distribution would be on September 11th and PRO•A would provide the Kloxxado to hand out.

The weekend before September 11th there was a ‘Tragic’ surge in overdose deaths in Harrisburg. WGAL reported, “The number of people in Dauphin County who died from suspected overdoses in recent days has increased, prompting the dissemination of overdose-reversing medication in the Harrisburg community and a criminal investigation into the origin of the drugs.

“The Dauphin County Coroner's Office says seven suspected overdose deaths occurred Friday night through Monday morning, with an eighth expected case involving a patient from UPMC Harrisburg pending further investigation.” (Lehman, T. 2023). There was a total of 27 overdoses that weekend.

On September 11th, PRO•A and 2 other organizations handed out over 8 boxes which had 72 2-pack doses of Kloxxado to individuals in Harrisburg. Initially we stood out front of the facility asking people leaving the facility or driving by if they wanted Kloxxado, while we explained how to use it.

Since there were six of us handing it out in one location, I decided to walk around several blocks looking for individuals outside to give Kloxxado to. At one point, I passed a man that told me two different locations where there are many individuals selling drugs and/or using. I went back to my vehicle, broke open a box, and with all of the cartons on my passenger seat drove around the areas that an individual told me to go to and emptied the whole box.

People in Harrisburg were very appreciative of receiving the free Kloxxado and the fact that organizations were that concerned about them and people that are using substances. Timing couldn't have been more perfect! And the feeling that I left that area with that day was grateful and humbled.

Our gratitude to Hikma Community Health for providing the resource that will save lives. This could not have been accomplished if it wasn't for their generous donation to PRO•A. **Thank you Hikma Community Health.**

Reference:

Lehman, Tom 2023. ‘Tragic’ surge in overdose deaths in Harrisburg. WGAL. Retrieved from: <https://www.wgal.com/article/harrisburg-surge-in-overdose-deaths/45088936> on November 19, 2023.





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Social Movements End. *So How Will Ours End?*

By William B. Stauffer, PRO•A Executive Director



Six years ago, I had the opportunity to spend time with [David Mactas](#), the first Director of the Center for Substance Abuse Treatment. He got the ball rolling on establishing the funding for recovery community organizations nationwide, including the Recovery Community Support Program (RCSP) grants from SAMHSA. I was talking with him about what had risen from early efforts to establish drug and alcohol recovery community grants and the rise of the “[New Recovery Advocacy Movement \(NRAM\)](#).” I was excited to share what had happened in part because of his efforts.

To summarize the recovery movement. NRAM is grounded in our own history to further common objectives achieved through meaningful representation and voice in policy matters that impact us. Its aim includes developing resources focused on recovery, building recovery community, celebrating recovery as a transformative process, while furthering research to understanding the positive impact of recovery to more effectively spread recovery in diverse communities across America. There is clear progress on all of these objectives.

As David and I talked as I drove him to the train station about the progress made, he dryly noted that all movements end. He asked me if we really want to frame efforts to alter public and professional attitudes toward addiction, recovery, developing recovery-focused policies and programs, and supporting efforts to break intergenerational cycles of addiction and related problems as a social movement. He had an important point, but it is a movement. Part of a larger history of recovery movements. Communities who rise up in their eras to change how we deal with addiction and recovery. It would not be possible to frame what has occurred in any other way than a social movement.

The conversation has been with me ever since. So where are we heading, and how will NRAM end?

Bill White’s 2013 address to ARCO and Faces & Voices [State of the New Recovery Advocacy Movement](#) highlighted five threats to the cause:

- The mobilization of people in recovery in sharing their stories and celebrating recovery not centered on common purpose, a topic we later collaboratively wrote about in [Personal Privacy and Public Recovery Advocacy](#). There is a growing risk our stories are being used for other purposes by other groups. Ownership of our own stories is vital.
- The implosion of the movement through loss of key leaders, the collapse of key organizations or movement exhaustion. He noted that centralization of leadership made this a significant risk for the movement. It is a greater risk now due to the generational transition of key leaders.
- Colonization/Professionalization/Commercialization are significant risks. One of the early developments exposing these risks was the shift of focus from recovery community development to peer services. This has led to professionalization and commercialization of Peer Recovery Support Services. He noted “if the recovery advocacy movement morphs solely into a PRSS appendage to the addiction treatment system, the movement will have failed and will recreate conditions that will set the stage for a future revitalized recovery advocacy movement.”
- Marginalization of the movements efforts if it fails to achieve significant representation and accomplishes a restructuring of addiction treatment system. This includes “death by dilution” from either the treatment system or alignment with sister movements. He emphasized the need to keep our “eyes on the prize” and not lose our addiction recovery focus. We must have organizations nationally focused on recovery to move forward.
- Professional/Cultural Backlash resulting from excesses within the movement. As he wrote, “such backlashes are intensified when they allow full expression of dormant prejudices related to highly stigmatized issues, e.g., addiction.” The highly charged, partisan world we now have increases the risk that our work gets associated with one political tribe, something that will almost certainly result in significant backlash and loss of common goals.

It is clear that NRAM is a social movement and that it will ultimately end. In general, social movements have four stages, from emergence to coalescence through bureaucratization and finally decline. Decline can take several courses, including success, repression, co-optation, failure, or establishment within mainstream perspectives.

My sense is that a case can be made that we are to some degree in each of the stages. There is still widespread dissatisfaction with how our care systems and institutions view addiction and recovery. It would also be safe to argue that there has been some bureaucratization, our early successes systematized, with inherent risks and benefits. Decline is evident through the loss of clear consensus goals across the country that everyone is working towards, which is perhaps the most profound risk to our forward momentum.

While there seems to remain widespread agreement on saving lives and expanding recovery to all Americans experiencing addiction, we get mired down in nuanced difference. We argue incessantly about language, move our missions to fit funding or we get sidetracked by interest groups with

their own agendas. These trends run in contrast to one of the fundamental understandings of the early days was that what was being built was incredibly fragile. An understanding that stemmed from the timely publication in 1998 of the seminal history of recovery in America, [Slaying the Dragon](#) by William White. It highlights this threat. The risk remains very real, the fragility is less widely understood.

Recovery support peer services are becoming formalized. For better or worse we have institutionalized peer services into our care system. While they have helped people, they generally replicate services from an individual orientation grounded in the traditional treatment system model. This model inherently deemphasizes community and focuses on individual wellness. It risks fostering dependency as providers bill units of care and are incentivized to center peer workers as the change agent, rather than the individual being served and the community as was originally conceived of as part of a recovery-oriented system of care.

The case can be made that our movement has partially achieved goals and is now in decline. People and institutions are losing focus on the primary goals, shifting to other aims as funding and public interest changes. It seems evident that we are at a crossroads. It is a time for great caution. History is instructive here. Progress can reverse. Gains lost. History is not linear. A lot of the dynamics that can make this occur, such as changing drug use patterns or public attitudes are perhaps beyond our control. Yet how we respond always matters. It is our movement to sustain or lose.

Do we act with unity and integrity and “keep our eye on the prize” as Bill White urged a generation ago, or do we respond otherwise? The stakes are high. We have achieved what we have by placing the greater good and a focus on recovery above all else. As gains have been made, the forces that would pull us apart grow. They include:

- Cashing out – There is always a risk of people using the movement for personal gain or notoriety.
- Cooptation – Early success increases the risk of other groups re-defining core concepts or taking them to redirect our energy to achieve their own goal at the expense of the primary goals of the recovery movement.
- Loss of lane – Groups redefine their objectives for funding or other reasons, resulting in the loss of critical focus centered on recovery resulting in diminished focus on recovery.

The hope is for success. Achieving that would include:

- A robust investment in long-term recovery as the focus of our care systems for persons with severe SUDs.
- A broad focus on developing recovery community capital that supports recovery across the diverse communities that make up this nation.
- Authentic inclusion of persons in recovery in system design, service provision and evaluation of treatment and recovery-oriented services.

Mactas was right. Movements end. How ours will end is dependent on what we collectively do. The movement started when the forces that drew us together became stronger than the forces that pulled us apart. Nothing about us, without us, depends on there being a unified center. In communicating about this issue and asking for reflections, Bill White considered the ending of NRAM and noted the goal of every social movement is to become obsolete and die: due to having successfully altered the conditions that spawned it and imbedded these social changes in new institutions sustain and improve on prior efforts. He noted that in some of his early work, he considered the goal of an “appropriate death” —a death one might choose for ourselves. His wish for our movement, one he and many others invested significant effort a future appropriate death. One in which its focus is no longer needed.

An appropriate death would include a world in which meaningful representation and voice in policy matters that impact us is systemic. We are not there yet. It is a goal worthy of sustained effort. That answer of whether that occurs is up to us. Long term history is always on our side. Recovery always finds a way. Recovery is highly resilient on both the individual and community level. The question is more of one related to how long we can sustain forward momentum. The farther we get, the less ground that the next movement will need to walk again.

The stakes are high, but so is our demonstrated capacity to accomplish great things, together. So, let's go make history!



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Please Welcome

our new PRO•A team member!



Tanya Dailey

My name is Tanya Dailey. I joined PRO•A as the Administrative Assistant. I have an administrative background from serving full-time for 16 years in the Pennsylvania Army National Guard as a Human Resources Specialist, and look forward to bringing some of those skills to my new role here at PRO•A. I live in Harrisburg, PA with my husband, Sean, and four of our six children and our two dogs.

I am a Facilitator for Strengthening and Celebrating families and really enjoy working with children in both of those groups. My faith is a very big part of who I am and of my life. I attend Living Water Community Church and serve as a teacher's assistant in the children's ministry.



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F.A.V.O.R. Western PA is a recovery community organization (RCO) located in rural Western PA. Our mission is to be a positive face and voice of recovery in our community by supporting individuals seeking to live a better life from substance misuse, and their families by providing support in three key areas.

First, we are dedicated to educating, empowering and advocating for our clients and their families through peer support services, family education and our All Recovery groups help twice a week. At F.A.V.O.R., we understand that a peer specialist may not always be available; however, their family members and loved ones are integral to their daily lives. By focusing on the individual's immediate support system of family and friends, we are able to educate them on signs and symptoms of relapse, local community support and how to help their loved ones build their recovery capital.

Secondly, through a partnership with Allegheny Health Network, the Center of Inclusion Health is able to send one of their community inclusion vans from their center in Pittsburgh to our center in Bolivar. From this resource we are able to provide two pivotal services for our rural community. We are able to provide medically assisted treatment (MAT) services for clients who are unable to obtain transportation to the metropolitan areas. The mobile clinic van also provides us and the AHN staff with the ability to provide testing and treatment for several communicable diseases, such as hepatitis. Providing these services has enabled our center to better interact and engage our community and individuals seeking recovery.

Lastly, through a workforce development grant from the Appalachian Regional Commission, F.A.V.O.R. Western PA is able to assist individuals in recovery to find sustainable employment and support. Together with renewals of several federal workforce development incentives, partnerships with eight county Career Links, F.A.V.O.R. teams with recovery friendly workplaces to assist companies and organizations better support their employees who may be seeking or are in recovery maintain their recovery.

For more information, please visit www.favorwesternpa.org or by emailing us at info@favorwesternpa.org.



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VeteransEvent



November is a month to honor our U.S. Military Veterans. This November, organizations throughout the Commonwealth celebrated by inviting Veterans and their loved ones, as well as community members, to share in a day of remembrance, honor and sharing resources. One such event took place in the Lehigh Valley, hosted by MidAtlantic Rehabilitation Services (MARS) and Szucs Foundation. A formal dinner was held, with an informational panel of speakers—all Veterans—to share not only their experience and strength, but also to share resources and address the challenges that Veterans face in our communities. This fundraising dinner benefitted the Veterans in our community. Thank you, MARS, Szucs Foundation, and all organizations that serve those that have served, for all that you do for our Veterans!



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25th Anniversary Leadership in Recovery Training Event

PRO•A's Leadership in Recovery Event began with an afternoon conference that included two continuing education trainings. The first of the two trainings this year was the Tobacco Recovery Panel with the State Tobacco Free Recovery Initiative Panelists included Tony Klein, MPA, NCACIL, PA STFRI, Katie Gassner, CTTS, Consultant, and Cassandra Joy Drumheiser, REC, PRO•A. This panel highlighted collaborative efforts to increase tobacco recovery through the CDC funded State Tobacco Free Recovery Initiative (STFRI). PRO•A has been deeply involved in this project since its inception. Panelists explored high smoking prevalence in the recovery community and severity of tobacco use disorder, disproportionate health consequences, and common misconceptions that sustain smoking as a social norm in the recovery and treatment culture. Evidence-based tobacco interventions that align with recovery-oriented principles were highlighted. This included panelist Q&A to allow participant discussion on knowledge gained and how to get resources and information about tobacco recovery to our statewide community. For information about tobacco recovery <https://pro-a.org/tobacco-recovery/>



The second training was facilitated by Joseph Green, Spoken Word Poet, on the Importance of Inclusivity in Recovery Spaces. In this workshop participants learned how diversity is greater than race, ethnicity, and gender and how inclusion can be best understood through exploring the emotions and motives associated with exclusion. Joseph Green discussed the principles behind creating brave and safe spaces to have these uncomfortable conversations at work. Attendees participated in an impactful and personal exercise relating to values in recovery. Through exploring art of storytelling, participants found creative and responsible ways to express themselves and listen to the journeys of others.

Joseph Green is a nationally recognized trainer and educator who has facilitated training for SAMHSA and a number of states across the country. More information about him here <https://josephgreenspeaks.com/>


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6th Annual Leadership in Recovery Event **RECAP**

continued from page 1

Our Keynote Speaker, Danielle Torino, honored Dr. H. Westley Clark and took us on an incredible journey that depicted the deep and caring nature of a man who dedicated his life to bring about changes that affects all of us in the recovery community today; a man who seemed to know his life may not extend to see all his hope accomplished and had the insight to mentor and mold others to carry on his visions. She spoke with gratitude of how Dr. Clark changed her life, gave her direction and purpose, and in doing so, she conveyed to us all the gratitude we should extend to the gift of his life and work.

Carmin Capozzi, founder of Sage's Army, shared with us all the depths of anguish he experienced in the loss of his son, Sage, to an accidental overdose. He recounted his 10-day struggle in anguish before coming to the spiritual revelation that pain could be turned into something meaningful. He shared how he started the nonprofit organization, which is now his life purpose. Through stories he shared, he gave us a glimpse of how, after making this decision, his life and the lives of many others have been blessed. It was a moving moment for us all.

Rick Esterly, our Lifetime of Service awardee, spoke of his own struggles with substance abuse 53 years ago, and how his life had changed after freeing himself from that affliction. He spoke briefly of his journeys throughout the world to carry the message of recovery to others, and his position at the Chit Chat Program, which became the Carron Foundation. Not a man to sing his own praises, he focused mostly on his gratitude for the family and friends that have been a part of his journey, naming all ten of his grandchildren and family members while expressing to us all the blessings they are to his life and work. It was clear to all present how worthy he is of this award.

PRO•A is very grateful for him.

This evening together gave us all a glimpse into where we are, where we come from, and what stands before us. Together, "We can make a difference, and we will."

The evening ended with the reliving of a moment from our past, when all participants stood in the darkened venue, flashlights glowing in hand, shouting, "Nothing about us, without us." Our future may have obstacles, but it reminded this writer, that it is bright with hope.

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Kloxaddo Helps Provide Comfort in Wake of Area Deaths

By Tom Rice

On a weekend in September, a local news channel reported that eight people had died due to acute fentanyl overdose after consuming crack cocaine; that number later increased to nine deaths and 27 reported overdoses in one weekend. Shortly after hearing this disturbing report, I received a call from one of the participants on my caseload who was requesting packages of Naloxone. Living in York, PA, he was concerned that many drug users in his apartment complex buy drugs from the Harrisburg area, especially crack cocaine. He stated, "Having Naloxone on hand would give him comfort, as his complex has previously lost several tenants to Fentanyl." Due to the concern and generosity of those that provided our organization with Kloxaddo to hand out to those in need, I was able to help this man find a measure of comfort.

Recovery Voices MATTER!

PRO•A is collaborating with Penn State University to recruit participants for a paid research study about the day-to-day process of maintaining recovery. The study uses ZOOM to meet with potential participants, explain the study—which uses an online survey to collect background information—and then a smartphone app to collect 10-days of information about daily well-being, recovery-supportive behaviors, and social interactions. Participants can earn up to \$70. To learn more and to see if you, the people who you support through your organization, or other members of the larger recovery community, are eligible to participate, please email the study team at

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Gaudenzia uses an evidence-based, person-centered treatment model to help individuals and families break the cycle of substance use and co-occurring disorders.

OUR SERVICES

- ✓ Crisis Stabilization
- ✓ Detox/Withdrawal Management Treatment Programs
- ✓ Medication-Assisted Treatment (MAT)
- ✓ Partial Hospitalization
- ✓ Residential Programs
- ✓ Men's Treatment Programs
- ✓ Women's Treatment Programs
- ✓ Pregnant & Parenting Women Programs
- ✓ SUD and Co-Occurring Disorders
- ✓ Outpatient Treatment Programs
- ✓ Harm Reduction Services
- ✓ Justice Involved Programs
- ✓ Prevention & Support Services
- ✓ Affordable Housing



NEED HELP?

Contact our 24-hour Treatment and Referral Helpline

**833.976.HELP(4357) OR
HELPLINE@GAUDENZIA.ORG**

PRO·A

Pennsylvania Recovery
Organizations Alliance



Highlights of the Leadership in Recovery Event

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pa.performcare.org

PerformCare offers hope and compassionate care to members who struggle with substance use issues.

Remember: Recovery begins when you ask for help.

The PerformCare provider network provides drug and alcohol services for adults, adolescents, and children enrolled in the HealthChoices program.



Capital area

Cumberland, Dauphin,
Lancaster, Lebanon,
and Perry counties
1-888-722-8646

North/Central region

Franklin and Fulton
counties
1-866-773-7917

Deaf or hard of hearing:
1-800-654-5984 TTY
or 711 PA relay

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