

California Together

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STRAIGHT TALK
from the Doc
Nicotine! The biggest drug by far



In the Holiday Spirit

Lisa Overton



A New Year

Rev. Leo Booth

Sober Living

Transforming Recovery Services in California

By **DAVE SHERIDAN**



California's current budget crisis has led to drastic cuts in human services programs, particularly those most needed by those struggling to overcome alcoholism and drug addiction.

The crisis highlights a more basic deficiency in these human services, namely the over-reliance on short-term and expensive treatment services. Most recovery-related (including mental health services) funding from State and county sources flows to institutions which primarily deliver short-term professional treatment services. However, addiction is a chronic, rather than an acute condition. Chronic conditions require a fundamentally different approach.

Other evidence shows that the best predictor of recovery outcomes is the amount of time during which someone receives supportive services. Short-term addiction treatment has been shown to have value, but is not a good predictor of long-term recovery outcomes. When cost is considered, it's far harder to justify our inordinate emphasis on short term treatment. Moreover, individuals in early recovery require a broad range of supportive services. Different people enter recovery with different needs, not all of which are obviously identifiable as addiction-related.

The Substance Abuse and Mental Health Services Administration (SAMHSA) published an important white paper in 2008, on the topic of Recovery Oriented Systems of Care (ROSCs). The full report may be found at: http://rcsp.samhsa.gov/_pubs/rsswhitepaper.pdf.

This paragraph from the report's introduction summarizes the problem:

"Addiction has long been recognized as a chronic disease. However, most treatment for addiction uses acute care interventions rather than a disease management approach. For many people seeking recovery, this has

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Optimal Health & Wellness in Recovery

By **DR. RAVI M. CHANDIRAMANI**

Over the years I've stressed the importance of adhering *the fundamentals of optimal health and wellness*. In thinking about possible topics of interest and who might find themselves reading this article, I decided to lend some attention to one of my favorite topics. These ideas are applicable to *anyone and everyone in recovery* and can be part and parcel of a short-term, intermediate-term and long-term strategy for maintenance of sobriety. Assuming the individual in early recovery is committed to abstinence, these fundamentals can assist in further optimizing one's physical, mental/emotional and spiritual recovery.

Stay well hydrated

This may seem like common sense but the fact is, subclinical dehydration is likely more rampant than previously thought. A survey of more than 2,800 people living in 14 U.S. cities (conducted by an independent research group for the International Bottled Water Association) found nearly three quarters of Americans are aware of the general recommendation to drink at least 8 – 8 ounce glasses of water daily but only 34% actually do! Most people consume about 6 servings a day and nearly 10% said they do not drink water at all. If this holds true for the population at large, then the likelihood is a higher percentage of drug addicts and/or alcoholics are dehydrated given that eating regularly and drinking water are not very high on their list of priorities. Drinking at least 8-8 ounce glasses of clean natural spring water or water that has been filtered by reverse osmosis seems to remain a sound recommendation for the majority of individuals, however, for those living in hotter, more arid climates, people who exercise frequently and lose water through perspiration and others with active lifestyles in general, adjusting water intake upward accordingly would be prudent. As it relates to the chemically dependent population, alcoholics and ecstasy users are particularly prone to dehydration albeit by differing mechanisms. Alcohol is a diuretic, and as such, promotes water loss via diuresis or urine excretion while ecstasy users are prone to water loss through perspiration secondary to an increase in core body temperature. Visit the website www.bottledwater.org it has some great research and a handy hydration calculator. You can also find useful information at Drinking Water Research Foundation www.dwrf.info.

You are what you eat

Through the years, I have had a myriad of patients ask my opinion on any of a number of avant-garde or fad "diets." My advice has always been the same, *no one diet works for everyone!* This is why fad "diets" eventually lose their appeal and make way for the latest, greatest, new fad "diet." Your diet should be individualized to your own

constitution. I have seen short-term and even intermediate-term success with certain fad "diets," however, I maintain that adhering to the following basic rules represents a far more effective, universal approach:

- **Eat a well-balanced diet.** Include all of the three major food components: protein, carbohydrate and fat. These components should be balanced with the portion of carbohydrate being least.
- **Dietary sources of protein** should be varied and lean and limited in red meat and include fresh cold water fish 2-3 times weekly.
- **Eat smaller, more frequent meals.** Food portions in this country are obscene. The standard American diet is likely the worst way of eating on the planet. No wonder the prevalence of obesity, metabolic syndrome and type II diabetes have escalated across the age spectrum at an unprecedented rate. The carbohydrate-dominance, fast food-dependence and disregard for portion control inherent in the Standard American Diet has created the perfect storm of nutrient poor calories and blood sugar spikes that pave the way for the onset of insulin resistance, obesity and Type II diabetes. Eating well-balanced, smaller, more frequent meals assists in maintaining one's blood sugar within a more narrow range throughout the day thereby preventing high highs (spikes or peaks) and low lows (troughs).
- **Eat more vegetables.** One third of your food intake should be uncooked and most of this should be uncooked vegetables and uncooked fruits to a lesser degree. Start slowly and gradually, work your way up to the one third. Cooking, heating and worse of all, microwaving can deplete fresh vegetables of select micronutrients, especially antioxidants. Another great way to get those greens into your diet is by juicing. Dr. Mercola's website is a wealth of information (www.mercola.com).
- **Eat a wide variety of foods.** Avoid eating the same foods too frequently as this may set you up for the development of food intolerances or allergies. A good strategy to employ is food rotation where no one food is repeated until the fifth day in a four-day rotation plan, i.e. if wheat is eaten Day 1, it is not eaten again until Day 5. Food from the same botanical food family may be used on an every other day basis. A family of foods is based on their common biological origin, and therefore those foods share common antigens and may cause similar reactions when eaten. (For example, oats, rye, rice, wheat all belong to the cereal grain or grass family. You could choose to eat a different cereal grain once every other day, such as oats on Day 1 and wheat on Day 3, but the same cereal



grain should not be eaten again until the fifth day). Lastly, no one food should be used twice in one day. For example, if a wheat cereal is eaten in the morning, (no wheat in any other form—bread, rolls or other baked goods should be eaten). The above represents a strict 4-day food rotation schedule and may be modified as appropriate.

Sugar

Sugar is so problematic it deserves its own category. Sugar is particularly problematic for alcoholics in early recovery. Drinking behaviors may be linked to blood sugar levels as indicated by the results of the Combined Pharmacotherapies and Behavioral Interventions for Alcohol Dependence (COMBINE) Study. The researchers concluded that blood glucose does likely play an important role in predicting heavy alcohol consumption. In clinical practice, this correlation has been observed time and time again and directly influences cravings for alcohol in early recovery. The goal then is to maintain a fairly consistent blood sugar level throughout the course of the day avoiding high highs and low lows which can trigger alcohol cravings. Even for those who are not in recovery, it is best to limit your intake of sugar in all forms. Sugar can wreak all kinds of havoc on the system. Sugar directly suppresses the immune system, adversely affects the cholesterol and triglyceride profile, contributes to premature aging and much more.

Regular Exercise

Everyone knows that regular exercise is good for you, but here are some specific benefits. Exercise can help improve your mood through the release of specific brain chemicals that make you feel good about yourself. It can promote better sleep. Physical activity may allow you to sleep faster and more deeply. The only caveat is that you should not exercise too close to bedtime as this may have the opposite effect. Exercise can boost your energy level by aiding in the circulation and delivery of oxygen rich blood and vital nutrients throughout your body. Another important benefit of exercise is what I term the re-priming of detoxification.

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STRAIGHT TALK *from the Doc* NICOTINE- Biggest Drug of Addiction By Far

By **DR. STEPHEN J. GROTH**

How fitting that nicotine would be the subject for my first Straight Talk of 2010! Nicotine is by far the greatest drug of addiction world-wide. And more New Years' Resolutions have been made up of promises to quit smoking than any other resolution.

How to quit?

Cold turkey has been the method of choice down through the ages, but surely there are better ways. Just as with any other drug, will power alone is bound to lead to failure. There remain three basic approaches to quitting smoking:

1. Nicotine Replacement (gum, candies, etc.)
2. Zyban (same active ingredient as Wellbutrin, the anti-depressant medication)
3. Chantix- (Varenclyline; a nicotine receptor agonist therapy)

The choice of methods for a given individual depends upon one's personal persuasions- and pocket book. Be prepared to spend \$200 to \$300 hundred for starters, i.e., for the first couple months of efforts.

Effectiveness of the listed methods above goes from least effective to most effective. Studies have shown that Chantix is decidedly more effective for continuous stop-smoking rates than any other of the listed approaches. Unfortunately, it, too, like many newer medications that modulate known pleasure receptor neuro-transmitter systems, exacerbation of depression and suicidal thinking have arisen and carry so-called "box warnings" for anyone choosing to pursue that approach. Why this would be is anyone's guess. Overall we are talking about well less than 1/10000. The FDA's philosophy appears to be "foretold is forewarned". Starter kits with both medications and ways to help bolster one's changes of habits costs just about \$300.

In coming months I will address each of the listed stop-smoking approaches in an effort to help the world's smokers honor their 2010 New Years' Resolution. TRIAD offers all three approaches and is ready when you are!

Dr. Stephen Groth is a licensed physician in the State of California and serves as Executive Director of Operations and Medical Director of the TRIAD Treatment Center in San Juan Capistrano, CA. He is in recovery and writes about medical issues in drug and alcohol treatment, as well as within the context of recovery and overall well-being for the recovering addict. If you have a question for him, or an issue you would like addressed in these pages, please contact Dr. Groth at drsteve@triaddetox.com.

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tion/elimination pathways or emunctories. The human body has some key methods of ridding the body of toxins: the kidneys rid the body of water-soluble toxins through urine excretion, the liver converts toxins to water and fat-soluble end products through phase I and phase II detoxification pathways, the gastrointestinal system eliminates fat-soluble toxins which have been incorporated into bile through feces, the lungs remove volatile toxins via exhaled air, and healthy skin removes toxins through perspiration. All of these emunctories are dependent on a healthy circulatory system which is optimized by regular exercise.

Quality sleep

Insomnia is ubiquitous in acute or post-acute withdrawal from drugs and/or alcohol and in many individuals in early recovery. It takes time to reset a healthy sleep wake cycle. Although certain medications may be helpful, I prefer to utilize the opportunity to establish sound sleep hygiene first. As with dietary modification, the treatment episode represents an ideal opportunity to establish new behaviors in lieu of maladaptive behaviors that either abetted the development of a lifestyle that included drug and/or alcohol or resulted from a lifestyle that included drugs and/or alcohol. So why is sleep so important for the population at large and for those in treatment? The Harvard Women's Health Watch suggests six reasons why:

1. **Learning and memory:** Sleep helps the brain commit new information to memory through a process called memory consolidation. In studies, people who'd slept after learning a task did better on tests later.
2. **Metabolism and weight:** Chronic sleep deprivation may cause weight gain by affecting the way our bodies process and store carbohydrates, and by altering levels of hormones that affect our appetite.
3. **Safety:** Sleep debt contributes to a greater tendency to fall asleep during the daytime. These lapses may cause falls and mistakes such as medical errors, air traffic mishaps, and road accidents.
4. **Mood:** Sleep loss may result in irritability, impatience, inability to concentrate, and moodiness. Too little sleep can also leave you too tired to do the things you like to do.
5. **Cardiovascular health:** Serious sleep disorders have been linked to hypertension, increased stress hormone levels, and irregular heartbeat.
6. **Disease:** Sleep deprivation alters immune function, including the activity of the body's killer cells. Keeping up with sleep may also help fight cancer.

Additionally, many drugs, both prescribed and illicit as well as alcohol can affect sleep. Alcohol interferes with your sleep cycle by disrupting the sequence and duration of normal sleep, thus reducing your brain's ability to retain information. The REM stage of sleep is compromised after a night of drinking, which is vital to memory. Therefore, even though someone who has been drinking might look as if they are crashed out, they will not be getting the deep sleep that is needed to recharge their batteries. Illicit psychoactive drugs such as cocaine, amphetamine and methamphet-

amine have been shown to provoke "ocult" insomnia: degraded sleep accompanied by deteriorated cognitive functioning without the sensation of lack of sleep. This is thought to be caused by a decreased drive for sleep. Prescribed and over-the-counter drugs such as allergy medications, diet pills and antidepressants may also affect sleep.

Sober support network

This one is fairly self explanatory and crucial for the individual actively in treatment, fresh out of treatment, or in "recovery" at any stage as part of working a fundamentally sound program. This is the reason why 12-step based groups such as Alcoholics Anonymous have been so successful and enduring. For many people in the throws of addiction, solitude and isolation became a way of life.

A sober support network allows people to feel as though they belong and are not alone. Like minded people gathering to share with one another and support one another to stay sober for one more day. Definitely sounds like a worthwhile endeavor that could benefit from a team approach.

Dr. Ravi N. Chandiramani is a licensed naturopathic physician specializing in the practice of integrative addiction medicine and has served as Corporate Medical Director for Journey Healing Centers since 2004. He may be reached at The Sundance Center, where he is the attending physician. 480-773-7329 or email at dr.ravi@thesundancecenter.com.

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created a revolving door of multiple acute treatment episodes."

"Multiple acute treatment episodes" means more crime, more homelessness, more violence, more unemployment, and perhaps most importantly from a public policy point of view, high costs incurred for generally substandard recovery outcomes. These shortcomings fail to adequately summarize the aggregate harm to individuals, to families and to communities. The paper goes on to describe what, unfortunately, is lacking in approaches by states including California:

"Creating recovery-oriented systems of care requires a transformation of the entire service system as it shifts to becoming responsive to meet the needs of individuals and families seeking services."

This transformation is both a challenge and an opportunity. Several of us at the Sober Living Network have been thinking about these issues in some depth. In future articles we will present some of our specific recommendations for change.

Dave Sheridan is a Board Member of the Sober Living Network. He also serves on the board of the Chandler Lodge Foundation, a nonprofit organization which operates a men's recovery facility in North Hollywood, CA. dmsheridan@verizon.net

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Making A Difference Again

By LISA E. OVERTON

Looking back over 2009, I notice that one of my recurring themes is “Making a Difference.” This is a theme that I will carry over into 2010.

I am excited for 2010. This month I will celebrate my 50th birthday. My first half-century has drawn to a close. I know I am blessed in so many ways; with freedom from addiction, good health, lovely children, many friends who love me as much as I love them, peace with the past and hope for the future.

More and more people are realizing that we are wasting our time, money and resources on the War on Drugs. They know that the money would be better spent on treatment programs. The new battle cry is “Education, not Incarceration!”

Last month the *New York Times* reported that Tom McLellan, deputy director of the Office of National Drug Control Policy, and his boss Drug Czar Gil Kerlikowske, have been composing a new Obama administration antidrug strategy. The word from Washington is that the policy will be to move funding into treatment and prevention rather than law enforcement and interdiction. Kerlikowske has said he wants to triple the number of Americans receiving addiction treatment. Both men have experience with the devastating effects of addiction on the family. Kerlikowske’s stepson Jeffrey has been arrested on drug charges and McLellan is reported to have an extensive family history with addiction which includes a 30 year-old son who died from overdose last year, another son in recovery, and a wife who is recovering from cocaine addiction. Let’s hope these men can make a difference in how this country allocates its resources as it relates to drugs.

Parity goes into effect this month.

The Paul Wellstone & Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 is designed to make sure that insurance plans offer mental health coverage as part of the overall health benefit packages, and to eliminate disparities between the coverage for mental health and more traditional physical health conditions.

While the new legislation will make a difference to those who have access to health care, millions still lack coverage. Yes, friends, the times they are a changing, again. But California’s future looks dismal in some places. Friends and colleagues of mine have told me that most funding for any kind of drug treatment has virtually disappeared,

from Proposition 36, to the number of beds available for detox, halfway houses and in-prison programs. Many addiction recovery advocates are on the front line, beating a path to the policy maker’s doors, working to change California’s backward approach to the problem of addiction.

Addiction and treatment are certainly mainstream topics now. In December I saw an article in the local newspaper food section. It was aimed at helping readers support people in recovery from addiction by giving tips on how to prevent parties from disrupting their sobriety.

I want to continue to make a difference in 2010

I will start in my home by treating myself and my family with love and respect. I will forgive more and blame less. In my walk and in my community I will speak up and advocate for recovery and treatment funding. I will help eradicate stigma by revealing my own success in overcoming addiction.

Upcoming Events in 2010

The CAADE Conference 2010: Charting the Course for a New Beginning will be in Palm Springs April 22-24. See their website CAADE.org.

If you’d rather be in Hawaii that weekend, the 22nd annual Big Island Bash “The Next Frontier: Emotional Sobriety” has information at www.bigislandbash.com. Early booking is encouraged.

The 25th San Diego Narcotics Anonymous Convention May 28-30, also at the Town & Country, is accepting speaker CDs now, deadline to submit is Jan. 29th.

A New PATH (Parents for Addiction Treatment and Healing) will hold their annual Strut for Sobriety Fashion Show fundraiser in September.

The CAADAC annual conference will be the first weekend in October at the Irvine Marriott.

Lisa Overton is a monthly contributor to California Together. She is a Board Member of A New PATH (Parents for Addiction Treatment and Healing). Email her at lisa@californiatogether.com.



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elements of recovery

By REVEREND LEO BOOTH www.fatherleo.com

Welcome in the New Year

I suppose when we say 'New Year' we really mean that 2009 is over and we are beginning 2010. Is that it? Could there be anything else that makes the New Year new?

For those of us who are in recovery, the idea of new-ness is constantly evolving because we are forever learning and discovering new and exciting things about ourselves and the program. The fact that a new year is actually happening encourages us to (a) go to the gym (b) begin the food-plan (c) decide to attend more meetings (d) affirm our openness to a relationship. It's called a New Year's resolution.

I rather like the idea of having New Year resolutions; it's just that I'm not very good at keeping them. I'm the kind of person who buys the shorts and running shoes, extravagantly shows the purchases to everyone, then doesn't run! The intention was good; however the follow through...awful. That's me.

However, I'm looking forward to 2010 because I intend to live my professional life differently. Oh yes, I'll still be going to conferences, churches, and consulting at treatment centers but I'm going to make myself available to do spiritual weddings, blessings of a significant relationship and funerals for the spiritual seekers.

If you are reading this recovery newspaper you know that many people do not attend church or synagogue regularly, indeed some have left religion and are embracing a variety of spiritual paths. This is great as I've done much the same, moving from Episcopalian to the metaphysical Unity church. And yet nonreligious people, the spiritual seekers, still want to celebrate a marriage, significant relationship or express their respect for the dead. I intend to bridge this need by providing spiritual services and ceremonies.

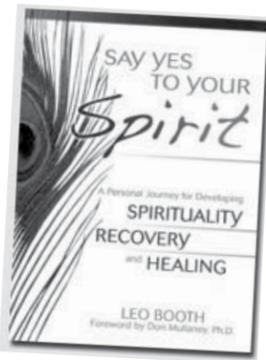
I also intend in 2010 to get out of the publishing business. I've done it for twenty years and now look forward to other

publishers marketing my books on spirituality, healing relationships and recovery. Therefore I'm clearing the shelf space and having a major clearance sale for some of my most popular books. Let me express myself clearly: The Wisdom of Letting Go that normally sells for \$15.00 is now \$6.00. Spirituality and Recovery is also \$6.00. For more information call my office and speak with Michael.

I've already spoken about spiritual seekers. They are people, like me, who not only want to think outside of the box but also want to experience new and exciting sacred places. In September 2010 I shall be taking a group to Egypt: this will include visiting the beautiful Temple of Philae in Aswan; the pyramids of Giza and Cheops in Cairo; the spectacular Valley of Kings in Luxor; also a three day Nile cruise. I'm already excited because this will be a new experience for me.

The beginning of a New Year is a time many take stock of where they are going in their lives, what they need to focus on... oh yes, and what needs to change. And it is all good. Remember, we were created to create. Let's make 2010 a great year, regardless of the economy!

Reverend Leo Booth is a Unity minister, a published author, conference and workshop presenter. He is a Spiritual Advisor at Renaissance Malibu and Casa De Las Amigas in Pasadena. He is the author of "Say Yes To Your Spirit". For more information visit www.fatherleo.com. Email fatherleo@fatherleo.com or call (562) 427-6003.



seminars, workshops & events

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Submissions accepted one month prior to event.

NCADD San Diego Breakfast. 2nd Wed. of month. Sizzler Restaurant, I-15 & Aero Drive, San Diego, 8-9:30 a.m. CEU's. (www.ncadd-sd.net) 619-685-6335.

OC-SOBER LIVING COALITION—Rock Harbor Church, 345 Fischer Ave., Costa Mesa. East of 55 Freeway. Take Baker Street exit to Redhill Ave. to Fischer Lane. Grant McNiff 949-549-2954, Patricia Bintiff 714-549-5739.

The California Association of Addiction Recovery Resources (CAARR). Social Model Recovery Systems (SMRS) CAARR trainings. www.socialmodel.com or margarete@socialmodel.com.

JAN. 30—A Narcotics Anonymous Service Learning Day from 10 -4:00 p.m. at Community Congregational Church, 276 F St., Chula Vista. Call Frank 619-966-8317 or Paulette 619-651-7609.

FEB. 26—The National Council on Alcoholism & Drug Dependence-San Diego (NCADD) will hold its annual conference on from 8 to 5 at the Handlery Hotel.

33RD Annual Alcoholics Anonymous ROUND UP "Sobriety Rocks!" April 1-4, Town & Country Resort Hotel. Discount registration deadline Feb. 15th.

SUPPORT YOUTH AFLAME—12 STEP SUPPORT MEETING—Thursdays - 8:00 p.m. Meeting focus on issues relevant to Youth, Teens & Recovery. 6641 Killarney Avenue, Garden Grove. Call Bodhi for details 714-786-8194 or 714-365-0503.

PANIC AND ANXIETY Anonymous—meets Monday evening, 7:30 to 9:00 p.m. 7701 Atron Street, West Hills, CA. Information call 1-800-273-6463

Fashion Valley Comprehensive Treatment Clinic presents Counselors in Recovery Support Group, Thurs., 5:30 to 6:30 p.m. Weekly group for recovery professionals. Refresh, Peer Support, De-Brief, De-Stress 619-718-9890 x 122. 7020 Friars Road, San Diego. Across from Macy's and Nordstrom's, Fashion Valley Mall next to Global Laser Vision.

ALL OF US OR NONE—Monthly meeting, 1-2:30 p.m. Guiding Light Church, 621 Brookhurst St. #114. Get involved to end discrimination against people with prior convictions. Rhonda 714-510-1536.

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CAME TO BELIEVE—A.A. meetings Thursdays 9:00-10:00 a.m. Venice Recovery Center. Meetings focus on issues relating to spirituality and recovery. 414 North Lincoln Blvd. Venice. North of Smart and Final, south of Rose Avenue.

DUAL RECOVERY ANONYMOUS (DRA) meeting. Thursdays 7:00 p.m. Veteran Rehab Clinic, 4141 Pacific Highway, San Diego. For more information call 619-497-0142.

COMEDY IN RECOVERY-EVERY FRIDAY NIGHT—9:30 p.m. following 8:00 p.m. CA meeting. Fountain Valley Alano Club, 16581 Brookhurst Street Fountain Valley. 714-839-5501. Free parking, show, prizes.

SUNDAY INSPIRATIONAL-4:00 p.m. Holy Ground Christian Fellowship, 7699 Ninth St., Buena Park. 714-736-9304 or www.holy-groundchurch.org.

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Al-Anon	714-748-1113
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Al-Anon	619-296-2666
Co-Dependents Anonymous	619-222-1244
Compulsive Eaters Anonymous	619-543-8961
Gamblers Anonymous	619-239-2911
MHS, INC.	858-573-2600
NCADD of San Diego	619-685-6335
Narcotics Anonymous	619-584-1007
Nicotine Anonymous	619-682-7092

Rape Crisis	858-272-1767
San Diego City Help	619-491-1194
Sex Addicts Anonymous	760-736-0644
San Diego Fellowship of Smart Recovery	619-819-7740
Suicide/Crisis Intervention	858-546-1100
	800-479-3339

—Los Angeles County—

Adult Children of Alcoholics	310-534-1815
Alcoholic Anonymous	323-936-4343
Al-Anon/Alateen	818-760-7122
Cocaine Anonymous	310-216-4444
Crystal Meth Anonymous	213-488-4455
Marijuana Anonymous	323-964-2370
Gamblers Anonymous	310-478-2121
NA North. OC	818-773-9999
NA for S. OC	949-661-6183
Overeater Anonymous	310-473-5207
Battered Women Hotline	818-887-6589
Rape Hotline	800-585-6231

—Inland Empire—

Alcoholics Anonymous	909-825-4700
Cocaine Anonymous	909-359-3895
Gamblers Anonymous	909-424-5020
Marijuana Anonymous	626-583-9582
NA West	909-622-4274
NA Foothills	
English	909-795-0464
Spanish:	888-622-4672

Get Listed: Information to info@californiatogether.com by 20th of month prior to printing.