Inspiring Success on the Road to Recovery **AUGUST 2016**

Are Arizona Addicts for Sale?

By Jim Kreitler, CEO Calvary Addiction Recovery Center



lorida and California have well-earned reputations as states where addiction treatment programs play fast and loose with ethical guidelines, regulatory requirements, and the law. Now, national publications

are naming Arizona as one of the next worst states for these violations. I am disheartened to learn that some addiction programs in Arizona are paying marketers for referred addicted patients, a practice that is not only unethical but likely illegal.

I have been lucky in my time in this field to work for three great organizations: Banner Behavioral Health Scottsdale, The Meadows, and Calvary. All are licensed at the highest level, are fully accredited, employ full time compliance officers, and hold internal ethical and safety standards that are higher than required by state regulatory agencies. I didn't know anyone did it differently. But apparently they do! If something doesn't change, Arizona's premier reputation as a great place to recover will suffer. I am already hearing that programs in other states are becoming reluctant to refer patients here due to the worsening reputation for patient brokering and other questionable practices.

Patient Brokering

Patient brokering is the practice of accepting or paying remuneration for a referred patient. But brokers don't call themselves brokers; instead, they refer to themselves as "treatment advisors", "referral" or "placement services." They may advertise on the internet as such, or troll 12 Step meetings, in search of sources of increased commissions (that is, people).

MyPalmBeachPost.com reported last year that, "Halfway house owners pay a bounty, often \$500, to "junkie hunters" for every new addict they can deliver to the halfway house. Separately, if an addict in the halfway house relapses, detox businesses may pay bonuses to managers of the houses if they refer the addict to the detox facility."

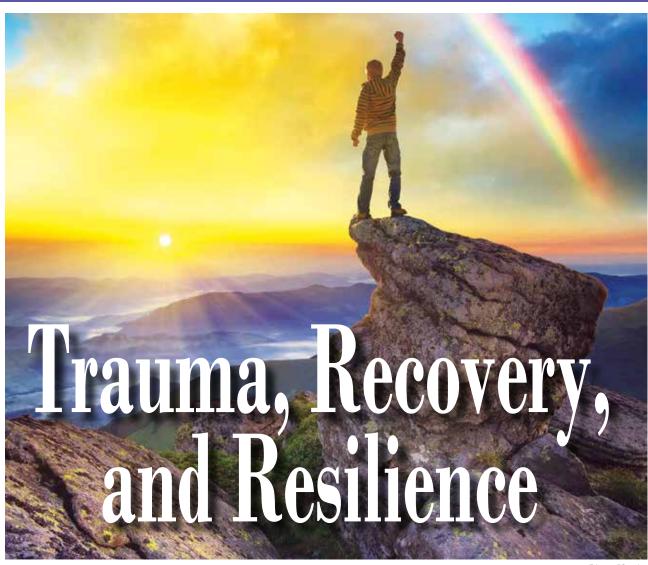
Robin Bright, CEO and Founder of Vive Media Group blogged last month that some of the marketers, interventionists, and individuals making referrals to treatment centers are actually getting paid up to \$4,000 per head to do so.

"Is this compassion?" she asks, "Do these people actually care about the addict?" to which the answer is, no —or at the very least, not required. Brokering is ultimately about numbers, not people, about monetary needs over human ones. Compassion is optional.

Patient Brokering, is it legal?

When Medicare or Medicaid are involved, patient brokering is clearly illegal, and penalties are severe, including prison.

Brokering is also in direct violation of ethical codes for licensed professional. For example, the American Counseling Association Code of Ethics



By Kathleen Parrish, MA, LPC, Clinical Director, Cottonwood Tucson

seems to be near daily reports of violence and unrest in our world. A friend recently told me she had made a conscious decision to eliminate television and other news sources from her life. She said it is too frightening and painful to watch the trauma happening around us. And do you know what? She is right. We are living in tumultuous times, with frequent reports of violence happening right in our own backyard. We are living in an atmosphere of increased tension, chaos, and unpredictability. We are living in an environment of trauma.

A recent CNN reports suggests there are more mass shootings in the U.S. than in any other country in the world, with 136 mass shootings occurring in the stressors, such as trauma, can affect the genetics of first 164 days of 2016. We are facing increasing ten-sufferers and be passed down to future generations. sions among ourselves, with frightening clashes and This theory suggests that stressful and traumatic tragic deaths and we are trying to find a resolution. events can act as chemical markers which change Many people suffer with long term effects stemming from these traumatic events. In fact, the National Institute of Health reports that approximately 7.7 million Americans are living with Post Traumatic Stress Disorder, or PTSD.

PTSD is a trauma and stressor related disorder that results from experiencing, witnessing, or being confronted by an event that causes intense feelings of fear or horror and in which safety and well-being are threatened or compromised. Many military veterans suffer from PTSD due to exposure to horrific events that are often imprinted on the mind and body, making it difficult for them to function in the day to day routines of life. Others suffer PTSD from events that occurred in their childhood, such as abuse, neglect, or violence. Some people suffer from PTSD from events that occur in our environment, such as the escalation in violence in our society.

Whether trauma occurs in a war zone or in the lives of civilians, it seems to happen on a regular basis.

t is difficult to watch the news today. There In many respects, technological advancements have increased our exposure to the gory details of global trauma. We can view the bloodshed, suffering, and chaos on our high definition televisions. We are so saturated by trauma that we may underestimate our physiological and emotional response to it. Our brains and bodies are being forced to adapt to life in a world where events are unpredictable and our environment is remarkably unstable.

> The reverberations of trauma can not only be expected in our current generation, but in the generations to follow. Emerging new research indicates that we can inherit trauma from our ancestors. The epigenetic inheritance theory proposes that environmental the function but not the structure of our genes. The genetics of trauma are then passed down with these new chemical markers, allowing the stress responses of trauma to be inherited by those of future generations.

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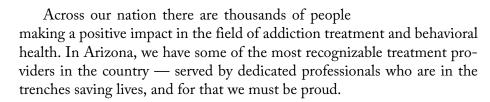
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Publisher's Note

By Barbara Nicholson-Brown

It Takes All of Us

The African Proverb says, "It takes a Village to raise a child." Applying these words to our world today, it takes all of us to raise awareness for addiction recovery.



So, I am honored to be walking along side all of you who work tirelessly offering your expertise, guidance and hope to people of all races, creeds and colors — from the young to our elders.

My contribution in this arena of awareness is through organizing the Art of Recovery Expo and publishing this newspaper. I urge you to join us on September 17th. Let's make some noise, let's create the change!

When families, peers and community members come together to find solutions, we are empowered, educated and armed with the tools needed for healthy families, communities and our future.



Join us – LET'S CREATE THE CHANGE The 11th Annual Art of Recovery Expo Saturday September 17 — Phoenix Convention Center Hall G 100 N. 3rd Street, Phoenix 9:30-4:00 FREE ADMISSION

Keynote Speaker: Greg Williams, Recovery Advocate Special Guest: Debbie Moak, Director Governors Office Youth, Faith and Family

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Recreational marijuana? The price is too high

By Seth Leibsohn and Sheila Polk, AZ We See It

Advocates say we need to regulate of less than 1 percent. Colorado's marimeasure doesn't even do that.

If insanity is repeatedly doing the same thing and expecting different results, no word better describes the legalization of marijuana for recreational use in Arizona.

Colorado and Washington, the first states to do this, have seen increases in teen use of marijuana, traffic fatalities and emergency room visits (including of toddlers) — all tied to marijuana. In Denver, home of most of the pot shops, more than one in three 11th- and 12th-graders are now regular marijuana users, an increase of 20.5 percent from two years ago, according to the latest Colorado youth survey.

Big protections for pot industry

Arizona should expect similar results, especially since this 20-page initiative is chock full of protectionism for the marijuana industry. Written by out-of-state lobbyists and Arizona marijuana-business owners, it creates two new government agencies, including a seven-member commission with three members mandated to come from the marijuana industry so they can "regulate" themselves.

This initiative gives current medical-marijuana dispensaries a virtual monopoly on retail stores and cultivation. This is not simple legalization, but increased government protecting special interests to the detriment of everyone else.

The initiative would legalize hashish as well, opening the door to highpotency marijuana candies. The marijuana of the 1970s had potency levels Price to High continued page 5

pot like alcohol in Arizona, but their juana edibles have potency levels of 60 percent.

Stiffer penalties for alcohol than

The proponents' claim that this initiative regulates marijuana like alcohol is disingenuous. The alcohol industry doesn't dream of being treated as lightly as this initiative would treat marijuana. At every opportunity to advance public safety, the initiative protects marijuana use instead:

- Using marijuana under the proposed initiative becomes a legal right. Someone who shows up for work drunk can be disciplined or fired based on an alcohol test. But under this initiative, showing up for work impaired by marijuana would be shielded from discipline until after the commission of an act of negligence or malpractice.
- Any driver with a blood alcohol content over 0.08 percent is legally drunk. The Arizona law would prohibit a THC limit from ever being set.
- Penalties for a minor using a fake ID to buy marijuana would be far lower than for his friend who uses a fake ID to buy alcohol. Same for someone selling marijuana to a minor using a fake ID.

The experiment in Washington and Colorado shows how disastrous this proposal is.

Fatal accidents involving drivers who recently used marijuana more than doubled in Washington in the year after legalization.

The rate of people going to Colorado emergency rooms with marijuanarelated symptoms rose 44 percent from 2012 to 2014.

Addicts for Sale? from page 1

states, "Counselors do not participate in fee splitting, nor do they give or receive commissions, rebates, or any other form of remuneration when referring clients for professional services."

However, when it comes to nonlicensed persons referring to a facility that bills private insurance, the legal and ethical guidelines are less clear. Florida cleared up this ambiguity by creating the Florida Patient Brokering Statute, which states

(1) It is unlawful for any person, including any health care provider or health care facility, to:

- Offer or pay any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, to induce the referral of patients or patronage to or from a health care provider or health care facility;
- Solicit or receive any commission, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, in return for referring patients or patronage to or from a health care provider or health care facility;

Efforts are underway to urge state legislators in Arizona to pass a similar law. It cannot come soon enough as the problem in our state is only getting bigger.

M. David Mick Meager, Esq. writes: "A few years ago I met with the director of an addiction treatment center in Southern California. He offered me a payment of \$4,000.00 per client that I referred to his center. He stated that with this payment and the amount of money I collected for the Intervention, I could make a very comfortable sum by simply putting 2 clients in his center each month. When I pointed out that his offer was a violation of B&P Code 650, and the prohibition of paying for referrals, his comment was an astonishing reflection of his lack of ethics. He said no one will ever know. He was wrong, I would know."

Credibility and Integrity

Bounty payments for referring patients hurts the credibility of our industry, our state, and — are likely illegal. If you are offering or receiving payment for patient referrals, please **stop.** Remember what this industry is really about: saving lives, whatever the cost. Our addicted patients are vulnerable and need their referral decisions to be made based on what is best for them. When they become pawns in a game of money and manipulation, treated as commodities and sold to the highest bidder, they are exploited by the very people they came to for help.

- *Beall, Pat and Stapleton, Christine. "County's \$1 billion gold rusb: Addiction treatment draws FBI." MyPalmBeachPost.com., 14 Aug. 2015.

 * Bright, Robin "Paid to Care?...Addiction Treatment Marketers." Thatso-
- berlife.com, 16 June. 2016.

 * Meager, M David Mick "Can Our Addiction Industry Withstand a "Fearless" and Searching Moral Inventory" of Our Business Practices?" Serenesce

Jim Kreitler, MS, LASAC, is CEO Calvary Addiction Recovery Center. After a successful 29 year corporate career Jim answered a calling to serve those with addictions in 2008. Since then he has served in many capacities including residential unit staff member, intake director, licensed counselor and since 2012, CEO. Jim currently leads Calvary Addiction Recovery Center, a state licensed and accredited inpatient facility with all levels of care. Calvary is a contracted in-network insurance provider that relies on local relationships and reputation for referrals.

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"Drunkorexia" on the Rise Among College Students

A growing number of college students are trying to avoid alcohol-related weight gain through a practice known as "drunkorexia," CBS News reports. Students skip meals, exercise heavily before drinking alcohol, take laxatives or diuretics, or vomit after drinking.

Some are engaging in drunkorexia to get a faster buzz, the article notes. Researchers at the University of Houston presented data at the recent Research Society on Alcoholism annual meeting that suggests the practice is increasing.

They surveyed 1,184 college students, who said they had drunk alcohol heavily at least once in the previous month. More than 80 percent said they had engaged in at least one drunkorexia-related behavior in the previous three months. College athletes and those who lived in fraternity and sorority houses were more likely to engage in drunkorexia, study author Dipali Rinker told CBS News.

While previous studies have suggested drunkorexia is more common among women, the new study found young men are engaging in the practice.

In a news release, Rinker explained why drunkorexia can be harmful. "Po-

tential outcomes may include less inhibition that could lead to more negative alcohol-related consequences," she said. "Restricting caloric intake to those from alcohol could lead to vitamin depletion, as it may keep the individual from eating more nutrient-dense foods."

Pfizer Agrees to Written Code of Conduct For Marketing of Opioids

Pfizer, the world's second-largest drug maker, has agreed to adhere to strict standards for marketing and promoting prescription opioids to treat common chronic pain conditions, such as arthritis and back pain.

HOT TOPICS continued page 8

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What's Your Next Move?

instein said, "Like energy draws like energy." It appears we have reached a tipping point in the energy of separation, hatred and extraordinary acts of violence. We live in a time filled with more contempt, violence and total disrespect for integrity and character than ever before. Integrity and character are labeled weakness today, classified as a lack of strength. Many of us are standing back aghast, wondering what the hell do we do and where do we even start to make things better.

Our systems are corrupt. Many of our politicians are corrupt. Safety and peace seem to be a notion from the past, long since gone. I don't know about you but I am hard pressed to find a television show or movie that isn't filled with the misuse of power as the main theme that includes killing (mostly women), deception and manipulation. It's dripping from the top of corporations and politics down like an old syrup that sticks to everything and creates the worst kind of nausea and stomach ache from which you can't get away.

Crimes, wars murder, deception, contempt, lawlessness and hate all depend on a basic belief in separation. We have to push away, because we can't see ourselves as part of something we want to hate. We have to make someone, some country, some gender, some belief system an other, in order to push them away and hate them. In addition, we abhor difference and we are a society addicted to sameness. If

you dare to be different there must be something wrong with you, or worse yet, wrong with me. So, for those of us who still long for a saner world, what's our next step?

Exactly what would help?

Shall we march en masse to Washington? That's been done, hasn't helped much. Shall we write letters, send emails, make phone calls, go door-todoor? That hasn't helped much either. We know the abuse of power certainly isn't limited to politicians or criminals. In my practice I see it all the time in managers, husbands, wives, partners and even children. It's about dominating others, gaining control and it is always driven by a lack of confidence in one's self. True power never seeks to control or manipulate. It leads by example and exercises compassion and respect. It's not power that corrupts, its corrupted individuals who misuse

What are we to do to change this?

Perhaps ignore it? Well yes, in the metaphysical sense at least, meaning we stop talking about it, feeding it and creating more energy around it. Instead I think we should Nike, Jordache or Apple it. You know...start a revolution of sorts and let it catch fire. Let's create a new level of consciousness and check out of the fear and hatred. What might happen if you walked up to someone you ordinarily wouldn't give a second thought to or had a judgment about

and said, "Would you be willing to create a space of peace with me for the next minute or two? What if you took that person's hand or just stood for a moment with a smile on your face and then made a mutual promise to pass the experience on at least once a day, everyday? What if we told our kids to do it and they did it with other kids? Maybe it's time to stop fighting the negativity and create what we want instead of feeding what we don't want. Our next move may simply be to start a movement that creates peace. What if we did that once a day every day? What if thousands of people were doing it?

How do we create a world filled with peace? Well if like energy draws

like energy, let's make peace and feed it like our lives depend on it because they do. Sounds Pollyannaish? Nike, Jordache and Apple didn't think so. Want to know what your next move looks like? Let's create some harmony and peace at least once a day, every day starting right now!



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Price to High from page 2

Employers there report having to hire out of state for a sober workforce. No amount of cash can justify this. Just as in Arizona, marijuana's apologists in Colorado and Washington said they wanted to keep marijuana away from children. It didn't work out that way there and it won't be different here.

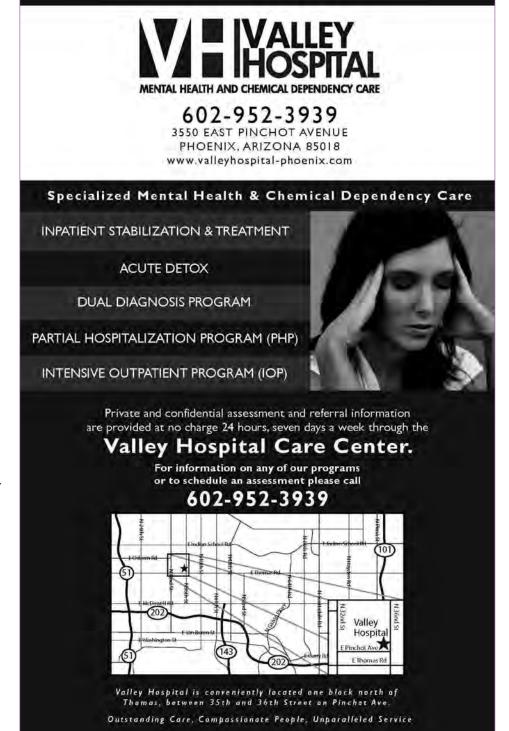
And this is why that matters: Marijuana is "addicting, has adverse effects upon the adolescent brain, is a risk for both cardio-respiratory disease and testicular cancer, and is associated with both psychiatric illness and negative social outcomes," according to the American College of Pediatricians.

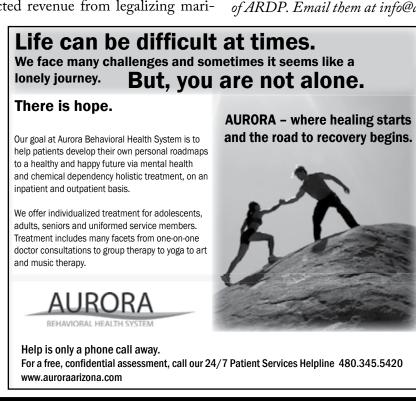
At what cost? According to the Arizona legislative budget staff, expected revenue from legalizing marijuana could put \$30 million into our education system, barely 0.33 percent of what Arizona now spends.

Now balance that minimal amount against the costs of treatment, tragic loss of life from traffic fatalities, workplace accidents, or the lost potential of young brains harmed by marijuana. No amount of money can justify that.

This law would contribute nothing positive to Arizona. Instead it exacts a tremendous cost, all to benefit a handful of marijuana-industry insiders. Arizonans do not need this and will not be able to afford it. The price is too high.

Seth Leibsohn chairs Arizonans for Responsible Drug Policy. Sheila Polk is the Yavapai County Attorney and vice chair of ARDP. Email them at info@ardp.org.





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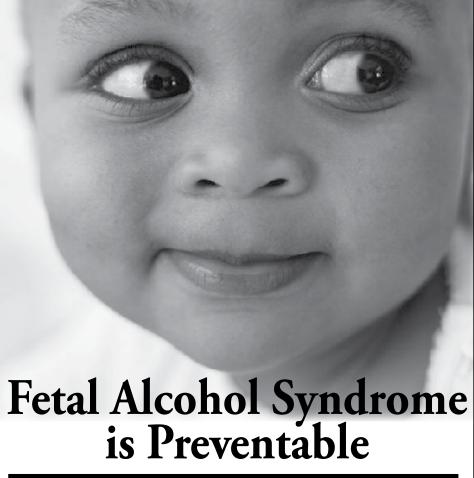
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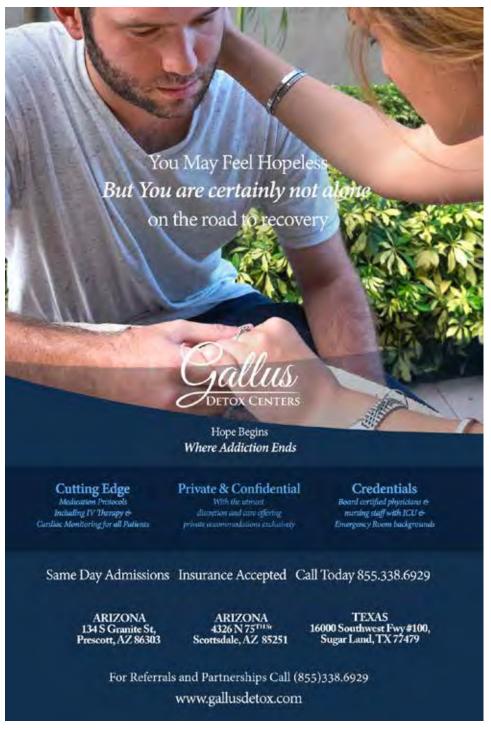
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Resilience > from page 1

In spite of the dire news and the fear we may feel about the events happening around us, there are many who seek to heal their wounds in powerful ways. Memorials are often held in the wake of shootings or violence, and marches are organized to allow for expressions of unity or peace. Many people who suffer profound traumatic losses create foundations to memorialize a loved one or to create community awareness. Some people may stay close to home, avoid going out, turn off the television, pray, and hope for peace. While none of these actions can guarantee healing or prevent further trauma, they do allow the sufferers to have a voice, to heal, and to search for meaning in what they survived.

The Power of Resilience

There are so many examples of people who are suffering unspeakable heartbreak and sadness. In spite of all that is shattered, there are certain people who exemplify resilience in the face of what is broken. These are the people who stand up in the midst of their pain and refuse to be hardened by it. In the throes of the chaos and darkness, they still believe in the tiny ray of light that emanates from within themselves and others. They search for understanding when confusion abounds and they look for ways to heal themselves and those around them. They are living proof of an unwavering resilience and the capacity to heal a broken heart.

Just as the study of epigenetic inheritance points to inherited trauma, it also points to the potential for inherited resilience. We are born with traits that give us buoyancy and a bounce-back-ability that stem from our parent's fierce and unyielding determination to move on. So, while we may inherit their trauma, we may also inherit the strength that enabled them to survive it. In addition, resilience can be cultivated by practice and determination. Those who truly seek to recover from the crushing blow of trauma can employ resiliency as both a foundation and a goal.

Resilience is defined as the power or ability to return to the original form, position, etc., after being bent, compressed, or stretched; elasticity. The concept of resilience is a popular topic in our modern culture. Resilience theories suggest that the idea be applied to the following groups of people: 1) those that have experienced traumatic events but have recovered from them 2) those who are in high-risk groups but have had a more positive outcome that expected 3) those who adapt well to significant stressors in their environment.

By definition, resilience is not just the capacity for positive thought and action, it is also the ability to return to who we were before; our original selves. Sadly, traumatic events often quell our ability to function in the same way. Following a trauma, we are often self-protective. We may feel intense sadness and fear. We may be more guarded and suspicious of others. We may struggle with negative beliefs about ourselves and the world around us. We may grapple with the neurological implications of PTSD, such as flashbacks and panic attacks. These factors may cause significant impairment in our life and leave us wonder-

ing how we can return to the trusting and carefree person that once walked in our shoes. It stands to reason why so many people who suffer a trauma feel lost.

Trauma does changes us

Recovering from trauma and embracing resilience requires an understanding that we may never completely return to who we were before the trauma occurred. Trauma does changes us—sometimes forever. In fact, research suggests that trauma causes identifiable changes to the function and structure of certain parts of the brain, setting the stage for other co-occurring disorders such as addiction, depression, and compulsive behaviors. Many people believe that they need to "get over" their trauma without fully recognizing the impact that traumatic events have had upon them. Others may become fully emerged in a trauma identity, living a life of hopelessness and powerlessness while engaging in rampant self-destruction. Considering these implications of trauma, the idea of resilience and recovery may require a new way of thinking.

Perhaps we should consider that resilience is returning to a new self, endowed with a powerful capacity to survive, and thrive. Recovery may begin with the acknowledgement that we are strong, wise, and powerful because of and in spite of what happened to us. In spite of and because of our pain and anguish, we survived difficulties that were likely to destroy us. In spite of and because of what happened to us, we refused to stay down when we fell. Instead, we chose to stand back up, again and again. We did this because we have an innate determination to survive; we did this because we are resilient.

Trauma survivors often struggle to see themselves as resilient. Instead, they may only see themselves as marred by the painful events in their lives. It may be difficult for them to recognize the beauty in their survival or the sheer force of determination that allowed them to live. Many trauma survivors have experienced a lifetime of suffering, seeming to move through one traumatic event only to be faced with another. When trauma becomes a way of life, it is difficult to extract the evidence of their resilience from the rubble around them.

Recognizing personal resilience starts with understanding survival. How did you survive? What were you able to accomplish in spite of what you went through in your life? What are you most proud of in your life? How were you able to accomplish those things? The answers to those questions point toward resilience. Resilience is not always evidenced by great strength and ability on display for all to see. Rather, it is seen in the quiet ways that we embrace a life of recovery. Resilience is embodied in our capacity for compassion or our determination to live a life of integrity. Resilience can also be seen in our willingness to forgive others and ourselves. Resilience is often that quiet voice that whispers in the darkest of night "I won't give up".

Resilient people are those who aren't defined by their suffering but by their ability to shine brightly, in spite of their suffering. Trauma recovery must begin with an intention to harness and cultivate resilience in all of its forms. While we are required to examine our wounds, we are also invited to appreciate the strength of our character and the depth of our hearts, in spite of and because of those wounds. Conversely, we cannot appreciate our resilience until we understand the extent of our suffering. True recovery allows us to hurt and to heal; to fall and to stand once again.

We are powerless over the trauma that is swirling around us today. We can neither predict nor prevent the next tragedy that might bestow us. We may acquire more wounds in our life as we walk through tumultuous times. These are difficult and frightening things to consider. But, in spite of the air of uncertainty and unpredictability in our lives, our country, and the world around us, we can live lives of resilience and strength. We can recognize and embrace the indefatigable spirit that lives within us and refuse to give in to hate, violence, or fear. While trauma becomes a part of the landscape of our culture and our lives, we can hold on the anchor of our resilience.

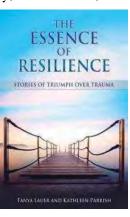


Kathleen Parrish is a Licensed Professional Counselor in Arizona and the Clinical Director of Cottonwood Tucson, an internationally renowned, residential treatment program for co-occurring disorders in Tucson, Arizona. She earned a Master of Arts degree in Marriage and Family Therapy and a Master of Arts Degree in Religious Education from Southwestern Baptist Theological Seminary in 1999. Kathleen has worked in private practice, outpatient treatment, and residential treatment settings. Kathleen has worked

with trauma survivors for over 20 years, focusing on story, mindfulness, and

self-compassion. She has written articles for *Counselor*, *Addiction Professional*, *Addiction Today* and *Together AZ* magazines. She has presented seminars on trauma and eating disorder in the U.S. and Europe. For information on Cottonwood and their treatment programs visit www.cottonwooddetucson.com or call 844.802.9535.

Pre-order your copy of **The Essence of Resilience** at https://www.hcibooks.com/p-4380-the-essence-of-resilience.aspx





LIFE 101

By Coach Cary Bayer www.carybayer.com

The COACH of AVON

The writing of William Shakespeare, the Bard of Avon who died 400 years ago this year, is so abundant with wisdom, he might also be called the Coach of Avon. Percy Shelley, the great British Romantic poet, wrote, "Poets are the unacknowledged legislators of the world." So can we conclude from this that playwrights can be the unacknowledged life coaches of the world? Imagine Shakespeare as one. Below might be his life coaching brochure.

WILLIAM SHAKESPEARE, LIFE COACH **Purpose & Spiritual Coaching** "This above all; to thine own Self be true."

It is not in the stars to hold our destiny but in ourselves. You'll discover in my Purpose and Spiritual Coaching program that the fault, dear prospective client, lies not within the stars, but in ourselves, that we are underlings. You can consult astrologers, or pastlife therapists to discern your karma, or even a biologist to understand the influences in your genetic makeup, but ultimately you'll realize that the choices you make with your own free will helps create fulfillment or the lack thereof in your life. As I tell each and everyone ofmy clients, "life's but a walking shadow, a poor player, that struts and frets his hour upon the stage, and then is heard no more; it is a tale told by an idiot, full of sound and fury, signifying nothing."

It's up to you to create significance and meaning. The sign on my desk says,

"All the world's a stage, and all the men and women merely players. They have their exits and their entrances; and one man in his time plays many parts."

Dost thou want to play the role of father or mother, Christian or Jew, lower self or higher Self? The choice is yours, but if you choose higher Self then awakening can be yours. After all, we are such stuff as dreams are made on, and our little life is rounded with a sleep. My Purpose and Spiritual Coaching Program will help you wake from that sleep, and discover your higher Self to live an awakened life.

Part of becoming awakened involves changing your belief system from one of disempowerment to one of empowerment.

As I like to say: There is nothing either good or bad, but thinking makes it so. Changing the way you think is critical to creating a life based on purpose, but awakening the foundation of your thinking—in the field of transcendental Being—is even more imperative. I frequently tell my clients that it's all about awakening that level of Being. In other words, choose: To Be or not to Be. That is the key question. The courageous choose life and enlightened life at that.

Relationship Coaching "The course of true love never did run smooth"

Let me not to the marriage of true minds admit impediments. While I recognize the universal principle that love and marriage bring up everything unlike themselves for the purpose of release and healing, I also understand that with the learning of important relationship skills, everyone in a significant other relationship can overcome all that is not smooth and learn the love that looks not with the eyes, but with the mind. This can achieve ongoing love and happiness.

Prosperity & Empowerment Coachina

"Cowards die many times before their death, the valiant never taste of death but once."

Some are born great, some achieve greatness, and some have greatness thrust upon them. My coaching program enables you to achieve greatness or enable you to become so in tune with the Universe that the Fates thrust greatness upon you. If you want to empower your financial life, create harmony in your income, saving, spending and investing.

Toward that end, I say:

"Neither a borrower nor a lender be; for loan oft loses both itself and friend, and borrowing dulls the edge of husbandry."

I wouldst speak to thee in this brochure because parting is such sweet sorrow, but I must sign off, for brevity is the soul of wit. I leave you with this thought: You may know what you are, but you know not what you might be.





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You can tell the size of your God by looking at the size of your worry list.

The longer your list, the smaller your God.

Author Unknown

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- · Attend a free monthly networking luncheon, tour our facilities, and meet with the Intensive Coordinator about how you can become a referral resource.



Dr. Ralph Earle



Dr. Marcus Earle

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HOT TOPICS from page 3

The company made the agreement with the city of Chicago, which sued five other opioid manufacturers over alleged misleading marketing of opioids, The Washington Post reports. Pfizer was not named in the lawsuit. The company has been helping the city with its investigation and lawsuit, the city said in a news release.

The company said it will disclose World Drug Report 2016 found. in its promotional material that opioid painkillers carry serious risk of addiction, even when they are used correctly. Pfizer pledged not to promote opioids for unapproved, "off-label" uses, such as long-term back pain, and said it will acknowledge there is no good research on the drugs' effectiveness beyond 12 weeks.

Adriane Fugh-Berman, Associate Medicine, said she thinks the agreement notes will have limited value.

counting on pharmaceutical companies unlikely to lead to major shortages in the to get us out of this opioid mess is not likely to be successful," said Fugh-Berman, who is also Director of Pharmed Out, which advocates rational prescribing practices.

Pharma, which makes OxyContin, has been widely blamed for the quick growth of opioid painkiller use, the decline in opium production for the reperarticle notes.

Heroin use Tripled in 2014

triple the 2003 rate, according to a new report by the United Nations Office on Drugs and Crime. Heroin-related deaths have increased five-fold since 2000, the

"While the challenges posed by new psychoactive substances remain a serious concern, heroin continues to be the drug that kills the most people."

Heroin use is at its highest level in 20 years CBS News reports. The report calls the rise in heroin use in some regions of the world alarming. "While the challenges posed by new psychoactive substances remain a serious concern, heroin continues to be the drug that kills the most people. This resurgence must be addressed urgently," the report concludes.

Western and Central Europe have Professor of Pharmacology and Physiol- been hit hard by heroin use and overdose ogy at Georgetown University School of deaths in the last two years, the report

There was a sharp global decrease in "Maybe it's a first step, but I think opium production in 2015, but that is global heroin market for some time, because of high levels of opium production in previous years, the UN says.

"The build-up or depletion of previous years' opium inventories may be used Aggressive marketing by Purdue to offset annual changes in production and maintain the supply of heroin to user markets. It may take a period of sustained cussions to be felt in the heroin market," the report stated.

Heroin abuse is an especially big An estimated one million people used problem in prisons, according to the heroin in our country in 2014, almost report. The UN recommended looking at alternatives to conviction or incarceration.

Significant pain increases risk of opioid addiction

What do we really know about the relationship between the experience of pain and risk of developing opioid use disorder? Results from a recent study show people with moderate or more severe pain had a 41 percent higher risk of developing prescription opioid use disorders than those without, independent of other demographic and clinical factors.

These results, from researchers at Columbia University Medical Center, were published today in American Journal of Psychiatry.

The researchers analyzed data from a national survey of alcohol and substance use in more than 34,000 adults in two waves, three years apart. At each point, they examined pain (measured on a five-point scale of pain-related interference in daily activities), prescription opioid use disorders, and other variables such as age, gender, anxiety or mood disorders, and family history of drug, alcohol, and behavioral problems.

Participants who reported pain and those with prescription opioid use disorders were also more likely than others to report recent substance use, mood, or anxiety disorders or have a family history of alcohol use disorder.

"These findings indicate that adults who report moderate or more severe pain are at increased risk of becoming addicted to prescription opioids," said Mark Olfson, MD, MPH, professor of psychiatry at Columbia University Medical Center, and senior author of the report. "In light of the national opioid abuse epidemic, these new results underscore the importance of developing effective, multimodal approaches to managing common painful medical conditions."

Males and younger adults were at increased risk of prescription opioid use disorders, a finding that confirms results of previous studies. In addition, females and older adults were more likely to report pain.

"In evaluating patients who present with pain, physicians should also be attentive to addiction risk factors such as age, sex and personal or family history of drug abuse," Dr. Olfson added. "If opioids are prescribed, it is important for clinicians to monitor their patients carefully for warning signs of opioid addiction."

The study, titled "Pain as a Predictor of Opioid Use Disorder in a Nationally Representative Sample," was published in the American Journal of Psychiatry on July 22, 2016. The authors are Carlos Blanco, Melanie M. Wall, Mayumi Okuda, Shuai Wang, Miren Iza, and Mark Olfson.



Calendar Community

Send your events and support group information to aztogether@yahoo.com. Due 20th of month prior to printing

FREE Professional Networking Luncheon Psychological Counseling Services (PCS) Join us for a free networking luncheon experience from 12:15- 1:45 P.M. Mark your calendar: **AUG. 16.** If you have attended in the past, join us. If you are new send an email request for an invitation to pcs@pcsearle. com or call 480-947-5739. Ellen Hamilton for details.

RIO RETREAT CENTER — A Man's Way[™] Intensive. *Upcoming October 3-7*. Using the powerful curriculum developed by Dan Griffin, The Meadows Senior Fellow and based on his two groundbreaking books A Man's Way through the Twelve Steps and A Man's Way through Relationships. A five day intensive and challenging experience for to transform your understanding of what it means to be a man in recovery. Register: 800-244-4949.

Clinical Breakfast Series — First Wednesday of the month 8:00-9:00 A.M. St. Luke's Behavioral Health Trends and treatments in the behavioral health field, 1 CEU. St. Luke's Behavioral Health Center Auditorium. 1800 East Van Buren Street.

Mondays-Scottsdale-FAMILY RECOV-ERY GROUP at The Meadows Outpatient **Center**. Facilitated by Brough Stewart, LPC. 5:30-7:30 p.m. Designed to help begin, continue family recovery. Stop enabling behaviors, learn how to set healthy boundaries based on Pia Mellody's Model. No RSVP or charge. The Meadows Outpatient Center, 19120 N. Pima Rd., Ste. 125, Scottsdale. Contact: Jim Corrington LCSW, 602-740-8403.

Every Week - Tucson - COTTON-WOOD TUCSON - Developing Healthy Families Workshop. Five-day workshop is for families impacted by addictions, psychiatric disorders, anger & rage, and trauma. Facilitated by Cottonwood staff. Visit www. cottonwoodtucson.com or call 520-743 2141 for information.

SIERRA TUCSON— Alumni Groups. Scottsdale, Tues., 6:00- 7:00 p.m. Valley Presbyterian Church. 6947 E. McDonald Drive, Paradise Valley. 480-991-4267. Alumni meet in the Counseling Center (Parlor Room). Park in the west parking lot, follow signs to the Counseling Center, located in 280 or at JACSarizona@gmail.com the chapel complex. Contact: Rob L. at 602-339-4244 or stscottsdalealumni@gmail.com.

SIERRA TUCSON— Continuing Care Groups in Phoenix. Wednesdays — for Family Member Alumni (18 and over). (PCS) Psychological Counseling Services, 7530 E. Angus Drive, Scottsdale. 5:30 - 7:00 p.m. Thursdays — for Patient Alumni, PCS, 3302 N. Miller Rd., Scottsdale, 5:30 – 7:00 p.m. Facilitated by the clinical staff of Psychological Counseling Services. No charge for Patient by another person's compulsive sexual beand Family Member Alumni.

Valley Hope hosts—Voices Of Hope: Our 85202. Information 602-793-4120. Families, Our Community, Our Stories. This is a FREE community event. Voices Of **WOMEN FOR SOBRIETY — www.** Hope is a march designed to create awareness womenforsobriety.org Meeting every Satur-

around recovery and inspire. Inspirational keynote speakers, every participant will receive a FREE shirt, snacks and beverages. Designed to provide the public with awareness, understanding and resources for those suffering from substance use and mental health disorders. **September 24**. Voices Of Hope 7:00 AM at Valley Hope of Chandler. Chandler PD's event, "A Focus On Understanding And Hope" 9:00 AM.

On Going Support VALLEY HOSPITAL— IOP Group for Chemical Dependency/Co-Occuring.

Mon., Tues., Thurs. 6-9:00 P.M. Call intake for details: **602-952-3939.** 3550 E. Pinchot Avenue, Phoenix. www.valleyhospitalphoenix.com

Open Hearts Open Minds Counseling Services — Women's Therapeutic Group for Partners of Sex Addicts. Find comfort, strength and hope while exploring intimacy issues. Shea/Tatum area. Men's Therapeutic Group for Sex Addiction— work through addiction therapist. Call Cynthia A. Criss, LPC, CSAT 602-677-3557 for details.

Families Anonymous—12 step program for family members of addicted individuals. Phoenix -Mon. 7:00 P.M., First Methodist Church, 5510 N. Central Ave. 602-647-5800. Scottsdale Sun. 4:00 p.m., 10427 N. Scottsdale Rd., North Scottsdale Fellowship 480-225-1555 or 602-647-5800

Thursdays— Men's General Therapy **Group** empowering work through blockages to living. Dennis Ryan, M.C., L.P.C. 5-6:30 P.M. and 6:30-8:00 P.M. Transformation Institute. 4202 N. 32nd St., Suite J, Phoenix. 602-381-8003.

Chronic Pain Sufferers "Harvesting Support for Chronic Pain," third Saturday of month, 12—1:00 P.M. Harvest of Tempe, 710 W. Elliot Rd., Suite 103, Tempe. Carol 480-246-7029.

Hope, Strength, Support—Jewish Alcoholics, Addicts, Families and Friends (JACS*) 1st / 3rd Wednesday, 7:30 p.m. Ina Levine Jewish Community Campus, 2nd floor. 12701 N. Scottsdale Rd. 602-971-1234 ext.

PSA Behavioral Health "The Guild" Monday 5:30 -7:30 P.M. A fun-filled, educational, supportive get-together. Guild is open to the community and brings the community together in raising awareness of mental illness and recovery. PSA North, 2255 W. Northern Ave. in B109. Barbara 602-995-1967 x 207.

COSA (12-step recovery program for men and women whose lives have been affected havior)—Being in Balance. Thursday 11:00 am-Noon. 2210 W. Southern Ave. Mesa,

NDEPENDENT TALK THE HERMAN CAIN SHOW THE LAURA INGRAHAM SHOW KFNX exclusively leatures five of the Top Ten Talk Shows in the country To advertise, host a show or for more information: Call 602-277-1100 or THE ALEX
JONES SHOW THE LARS LARSON SHOW visit 1100kfnx.com

day —10-11:30 A.M. All Saints of the Desert Episcopal Church-9502 W. Hutton Drive. Sun City. Christy 602-316-5136.

CO-ANON FAMILY SUPPORT GROUP - Carrying the message of hope and personal recovery to family members and friends of someone who is addicted to cocaine or other mind altering substances. "Off the RollerCoaster" Thurs., 6:30-7:45 P.M., 2121 S. Rural Rd., Tempe. Our Lady of Mount Carmel Church. Donna **602-697-9550** or Maggie **480-567-8002**.

GAMBLERS ANONYMOUS — ACT Counseling & Education. 11:00 am to 12:30 pm. **602-569-4328** for details. 5010 E. Shea Blvd. D202, Phoenix.

COTTONWOOD TUCSON. ALUM-NI—First Wednesday of month 6:00-7:30 p.m. Cottonwood campus in Tucson. 4110 W. Sweetwater Drive. 5:00 p.m. dinner. 800-877-4520 x2141. cottonwoodtucson.com

ACOA Thurs., 7:00 p.m., North Scottsdale United Methodist Church, 11735 N. Scottsdale Rd., Scottsdale.www.aca.arizona.org

ACA. Tucson. Wed. 5:30-7:00 p.m Streams a task-centered model with a certified sex In the Desert Church 5360 E. Pima Street. West of Craycroft. Room A. (Follow signs). Michael 520-419-6723.

> Overeaters Anonymous (OA)- 12 Step program for addictions to food, food behaviors. **520-733-0880** or www.oasouthernaz.org.

Pills Anonymous (PA)—Glendale Tues. 7-8:00 pm. HealthSouth Rehab 13460 N. 67th Ave. Rosalie 602-540-2540. **Mesa** Tues. 7-8:00 pm, St. Matthew United Methodist Church. 2540 W. Baseline. B-14. Jim, 480-813-3406. Meggan 480-603-8892. Scottsdale, Wed. 5:30-6:30 pm, N. Scottsdale Fellowship, 10427 N. Scottsdale Rd., Rm 3. Tom N. 602-290-0998. **Phoenix,** Thurs. 7-8:00 pm. First Mennonite Church 1612 W. Northern. Marc 623-217-9495, Pam 602-944-0834, Janice 602-909-8937.

CELEBRATE RECOVERY—Chandler Christian Church. Weekly Fridays 7 p.m. Room B-200. For men and women dealing with chemical or sexual addictions, co-

dependency and other Hurts, Hang-ups and Habits. 1825 S. Alma School Rd. Chandler. 480-963-3997. Pastor Larry Daily, E: larrydaily@chandlercc.org.

GA Meetings —ACT Counseling & Education. Phoenix/Glendale. Tuesday, Spanish (men) 7:00 -9:00 pm. 4480 W. Peoria Ave., Ste. 203, Glendale. Thursday, Spanish 7:00 -9:00 pm 4480 W. Peoria Ave., Ste. 203, Glendale. Sunday, Spanish 6:00 - 8:00 pm 4480 W. Peoria Ave. Ste. 203, Glendale. Sunday, English 6:30 - 8:00 pm 5010 E. Shea Blvd., Ste. D-202, Contact Sue F. 602-349-0372

SAA www.saa-phoenix.org 602-735-1681 or 520-745-0775.

Tempe Valley Hope Alumni Support Groups, Thursdays 6-7:00 p.m., 2115 E. Southern Ave. Phoenix. Tues. 8-9:00 p.m., 3233 W. Peoria Ave. Ste. 203, Open to anyone in recovery.

SPECIAL NEEDS — AA Meetings. Cynthia SN/AC Coordinator 480-946-1384, email Mike at mphaes@mac.com

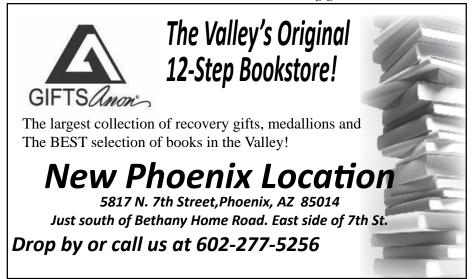
OA—Teen Meeting, Saturdays 4:00 p.m. 1219 E. Glendale Ave. #23 Phoenix. www. oaphoenix.org/ 602-234-1195.

SLAA—Sex and Love Addict Anonymous 602-337-7117. slaa-arizona.org

GAM-ANON: Sun. 7:30 p.m. Desert Cross Lutheran Church, 8600 S. McClintock, Tempe. Mon. 7:30 p.m., Cross in the Desert Church, 12835 N. 32nd St., Phoenix, Tues. 7:00 p.m., First Christian Church, 6750 N. 7th Ave., Phoenix, Tues. 7:15 p.m. Desert Cross Lutheran Church, Education Building, 8600 S. McClintock, Tempe, Thurs. 7:30 p.m.

DEBTORS Anonymous—Mon., 7-8:00 p.m., St. Phillip's Church, 4440 N. Campbell Ave., Palo Verde Room. Thurs. 6-7:00 p.m., University Medical Center, 1501 N. Campbell. 520-570-7990, www.arizonada.org.

Crystal Meth Anonymous www.cmaaz.org or CMA Hotline 602-235-0955. Tues. and Thurs. Stepping Stone Place 1311 N 14th St. cmaaz.org/god-zombies-the-awakening.





The National Council on Alcoholism and Drug Dependence

One Agency – Three individual Programs for Women

- Intensive Outpatient Therapy-Group therapy for addictions, facilitated by LISAC Counselors. Clients receive one-on-one, family and couples counseling as needed
- Weldon House-Supportive Housing for mothers with children. Women already in our IOP needing safe housing for themselves and their chil-
- Healthy Connections for Moms-to-Be-Case Management and service referrals for pregnant women with addictions

4201 N. 16th Street | Suite 140 | Phoenix, AZ 85016 602.264.6214 Fax 602.265.2102

PHOENIX /VALLEY AREA

Support Groups			
Alcoholics Anonymou			
Al Anon			

oupport Groups	
Alcoholics Anonymous	602-264-1341
Al-Anon	602-249-1257
ACA	aca-arizona.org
Bipolar Wellness Network	602-274-0068
Cocaine Anonymous	602-279-3838
Co-Anon	602-697-9550
CoDA	602-277-7991
COSA	480-232-5437
Crystal Meth Anonymous	602-235-0955
Emotions Anonymous	480-969-6813
Families Anonymous	602-647-5800
Gamblers Anonymous	602-266-9784
Grief Recovery	800-334-7606
Heroin Anonymous	602-870-3665
Marijuana Anonymous	800-766-6779
Narcotics Anonymous	480-897-4636
Overeaters Anonymous	602-234-1195
Parents Anonymous	602-248-0428
Phoenix Metro SAA	602-735-1681
Sexaholics Anonymous	602-439-3000
Sex/Love Addicts Anonymous	602-337-7117
Sex/Love Addicts Anonymous	520-792-6450
Sex Addicts Anonymous	602-735-1681
S-ANON	480-545-0520

Treatment Service Resources

602-684-1136
602-684-1136
602-569-4328
520-749-5980
602-364-2086
ng
800-NEXTSTEP
623-344-4400
602-421-8066
866-76-SOBER
480-612-0296
Christian Church
480-963-3997

Chandler Valley Hope	480-899-3335	
Choices Network 800-631-13	314 - 602-222-944	
Community Bridges	480-831-7566	
CBI, Inc. Access to Care Line	877-931-9142	
Core Recovery Services	602-810-1210	
Cottonwood Tucson	800-877-4520	
Crisis Response Network	602-222-9444	
The Crossroads	602-279-2585	
Decision Point Center	928-778-4600	
Dr. Marlo Archer	480-705-5007	
Dr. Janice Blair	602-460-5464	
Dr. Dina Evan	602-997-1200	
Dr. Dan Glick	480-614-5622	
EVARC	480-962-7711	
Franciscan Renewal Center	480-948-7460	
Gallus Detox	928-227-2300	
Gifts Anon	480-483-6006	
Governor's Office of Youth, F	•	
	602- 542-4043	
Hunkapi Programs	480- 393-0870	
Intervention ASAP	602-606-2995	
Geffen Liberman, LISAC	480-388-1495	
Lafrontera -EMPACT	800-273-8255	
The Meadows	800-632-3697	
Mercy Maricopa Integrated Care (MMIC)		
602-222-9444 or I-800-6	631-1314	
National Domestic Violence	800-799-SAFE	
NCADD	602-264-6214	
D.J. D.	400 001 4050	
Pathway Programs	480-921-4050	
PITCH 4 KIDZ	480-607-4472	
Psychological Counseling Servi		
B. III. II. (CASA)	480-947-5739	
Rape Hotline (CASA)	602-241-9010	
Remuda Ranch	800-445-1900	
Rio Retreat Center	800-244-4949	
River Source-12 Step Holistic		
с. т	or 866-891-422	
Sierra Tucson	800-842-4487	

SOL Recovery	866-212-3420
St. Luke's Behavioral	602-251-8535
Suicide Hotline	800-254-HELP
Sundance Center	844-878-4925
Teen Challenge of AZ	800-346-7859
Teen Dating Violence	800-992-2600
TERROS	602-685-6000
Valley Hosptial	602-952-3939
<u>Legal Services</u>	
Dwane Cates	480-905-3117
Tax Intervention	
Renee Sieradski, EA	602-687-9768
www.tax-intervention.com	

THESON

ACA	aca-arizona.org
Alcoholics Anonymous	520-624-4183
Al-Anon	520-323-2229
Anger Management	520-887-7079
Center For Life Skills Develop	ment
·	520-229-6220
Co-Anon Family Groups	520-513-5028
	520-326-2211
-	800-877-4520
Crisis Intervention	520-323-9373
Desert Star Addiction Recovery	520-638-6000
•	800-352-3792
•	520-881-8381
•	520-299-7057
•	520-733-0880
•	
,	520-792-6450
Sex Addicts Anonymous	520-745-0775
Sierra Tucson	800-842-4487
Suicide Prevention	520-323-9372
Men's Teen Challenge	520-792-1790
•	520-887-2643
	520-403-3559
	Alcoholics Anonymous Al-Anon Anger Management Center For Life Skills Develop Co-Anon Family Groups Cocaine Anonymous Cottonwood Tucson Crisis Intervention Desert Star Addiction Recovery Information Referral Helpline Narcotics Anonymous Nicotine Anonymous Overeaters Anonymous Sex/Love Addicts Anonymous Sex Addicts Anonymous Sierra Tucson

To get listed email Barbara Brown: aztogether@yahoo.com

We want to assist you on your journey to recovery from addictions, trauma, mood or other behavioral health issues, and empower you to create a full, authentic, joyful life.

The Meadows Outpatient Center provides Intensive Outpatient Program (IOP) services to adults, ages 18 years and older. Patients benefit from The Meadows Model and the same high quality of care that exists on The Meadows' main campuses in Wickenburg, Arizona.

The Meadows IOP is designed for individuals who require a stepped down level of care or who may have been informed during their intake screening that they qualify for the IOP program without having the need for a higher level of care. Every individual's current issues and circumstances are taken into consideration to be sure they are offered the safest and most appropriate program for their clinical needs.

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- Cognitive Behavioral Therapy (CBT)
- Trauma Sensitive Yoga
- Neurofeedback
- Somatic Experiencing® (SE)
- Family participation
- Medication management
- On-site Brain Spa
- Dedicated meditation room
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Why College Kids Are Sobering Up and Enjoying Partying Without the **Booze**

The fun no longer outweighs the risks

By Andrea Jones

College and drinking: two concepts so closely linked that many students can't conceive of one without the other. It may be surprising to learn binge drinking among college students has dropped 13% over the past decade. While it would be foolish to pretend binge drinking isn't still prevalent on many campuses, this is a very significant (and fortunate) decrease.

- What's behind the fall in binge drinking students?
- What's the reality of being a sober scholar, and can college be just as fun without drinking?

While many see binge drinking as more of a modern plague, young people have been drinking too much at college for a long time.

The National Institute of Alcohol Abuse and Alcoholism (NIAAA) reports some startling statistics:

- 1,825 college students between ages 18 and 24 die each year from alcohol-related unintentional injuries,
- 20% of students struggle with an alcohol use disorder each year,
- Over 690,000 are assaulted by another student who has been
- 97,000 become victims of alcoholrelated sexual assault or date rape.

The long-term consequences

About 25% of college students report damage to their academic performance as a result of their drinking.

The consequences?

Missed classes, falling behind, doing poorly on exams or papers, and receiving lower grades. Most upsetting of all, more than 150,000 students each year develop an alcohol-related health problem.

Things have gone too far, and it was statistics like this that began to tip our academic establishments over the edge. Many colleges let drinking culture dominate so much that students were attending with the main intention of partying, not studying. For several schools, that was the last straw.

Frostburg State University is one college actively fighting against the ish to pretend that abstaining from domination of drinking culture, and

the results are encouraging. When FSU president Jonathan Gibralter joined the college in 2006, over half the students said they binged on alcohol at least once every two weeks. There was a culture of 24-hour beer pong tournaments, dime beer nights, and even a "drink of the week" section in the student paper. Today, bi-weekly binge drinking at FSU has dropped dramatically thanks to a series of strict measures imposed by Gibralter. What were these methods?

"The popularity of sober partying has spread onto many campuses, and alcohol-free dance parties and raves are a welcome addition for sober students who don't want to compromise on fun."

Gibralter introduced a campus police patrol in student neighborhoods and launched a number of "dry" programs like crafts, magicians, and sober karaoke. He paid to train local bar employees and student group leaders on how to deal with drunken behavior, and new freshmen must now pass an online alcohol education course, with in-person counseling for those who seem at risk. Frostburg's attitude reflects a growing national consensus, but it isn't just the colleges cracking down on binging — students are too.

The rise of sober partying in the past couple of years highlights a new thirst for clean, conscious clubbing, and though this movement began in New York City, it quickly spread through much of the U.S. and is now a hugely popular global movement. Events like the No Lights, No Lycra sober dance party and the sober rave Morning Gloryville reflect a shifting attitude among many young people: Alcohol is not a requirement to let your hair down and have fun.

The popularity of sober partying has spread onto many campuses, and alcohol-free dance parties and raves are a welcome addition for sober students who don't want to compromise on fun.

Be that as it may, it would be foolalcohol at college is easy.





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