



COTTONWOOD
tucson

July 2010

Alumni News...

the journey continues

Humility

Several times I have heard humility defined as not thinking less of yourself but thinking of yourself less. The dictionary defines it as a modest opinion or estimate on ones own importance. I agree with both definitions. I used to think self-deprecation was humility, but I've found that it is a reverse type of pride. Pride makes us artificial, humility makes us real. Slowly we learn that life experience is the greatest teacher of humility. When we learn from our mistakes it can be humbling and sometimes embarrassing. With each 24 hours of life in recovery there is hope for a humble new beginning. Hope and grace are hiding behind every mistake we make. Because we are all recovering human beings we get the chance to learn, to grow, to change, and to live. Humility is the gift of truth wrapped up in a life's worth of lessons. We have all had many of life's lessons hit us over the head and maybe we have accepted and received some truth in our lives, but humility still evades us or more specifically, me. Oh well, I guess I will just keep coming back. Like a good friend of mine used to say, 'God isn't through with me yet.'

Cottonwood is a unique and life changing experience. Let us help you find recovery and hope once again.

If you have any questions, please contact me at shicks@cottonwoodtucson.com or call 520-743-0411 extension 2517.

Be well, Sally

Reaching the 20-25 Age Demographic

By Charles Gillispie

Treatment Should Speak To Goals that Matter To Young Adults

At age 20, Zack dropped out of college after one semester. He had failed each of his classes, although he had been above-average student in high school. When Zack returned home to live with his parents, his mood was unpredictable, and he engaged in bizarre behavior. He became angry easily. He seemed depressed. He often slept all day.

When confronted by his father, Zack admitted to some drug use but offered few details. Zack later informed his father that the house phones had been bugged with a monitoring device and that the family may be in danger.

Zack's parents sought professional help and staged an intervention. With the help of a facilitator, friends and other family members, Zack's parents confronted their son about his substance abuse, irresponsibility, and recent

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Treatment Should Speak To Goals that Matter To Young Adults, continued

changes in mood and behavior. The intervention ended with a simple message. We love you too much to sit back and watch you self-destruct.

Twelve hours after the intervention, Zack was admitted to an in-patient treatment center with a provisional diagnosis of alcohol and methamphetamine abuse, and to rule out substance-induced mood disorder as set out in the DSM-IV, meaning that the question of whether the mood disorder was substance-related would be determined later.

Zack is part of a population whose presence is becoming more common in treatment centers in the United States. Young adults between the ages of 18 and 25 make up approximately 21% of people receiving treatment for substance abuse in hospitals, inpatient and outpatient rehabilitation facilities, and mental health clinics.

Special Challenges

Clients such as Zack present a number of challenges for counselors. Young adults often perceive substance abuse treatment as a punishment imposed by others, not a personal choice. Many young adults generally perceive recovery values as an infringement on independence and an unwanted extension of parental authority. Young adult clients may communicate ambivalence to treatment interventions in ways that frustrate counselors and threaten other adult clients in the group counseling environment.

Since young adult clients usually depend on family members for financial support, the troubled relationships that many have with parents or relatives may generate additional challenges for counselors. Family members will often constitute an integral part of a young adult client's treatment at every stage, from the admissions process to after-care planning. Family members may present complications to counselors by way of unrealistic expectations of the treatment process, poor boundaries with the client, or personal preferences that they wish to impose upon their child or relative.

Finally the 12-Step model itself may present difficulties for counselors attempting to address young adult clients' needs. Traditional concepts such as "hitting bottom" need to be modified for younger clients. The usual consequences that older adults use to measure the severity of their substance abuse, such as worsening physical health, or the loss of a meaningful career may not be applicable to clients ages 18-25. In fact, the concept of "recovery" itself may need to be modified, in that many young adult clients will not have established a measurement of health or success in life that they desire to regain or recover.

By informing counselors about current research pertaining to young adults' developmental needs, this article intends to help counselors intervene effectively on some of the more predictable problems presented by clients ages 18-25 with substance abuse problems.

Ambivalence and Motivation for Change

Professionals must present the recovery process as a method for young adults to achieve the goals they most often expect from themselves. At this juncture, an updated understanding of developmental needs for individuals between the ages of 18 and 25 is essential to treatment planning and problem solving.

A recent study shows that many young adults do not deeply value the traditional notions of adulthood as much as they do the notion of self-sufficiency. Completing an education, establishing a career, getting married, and starting a family are often ranked lower by young adults than are their desires to make decisions independently and to achieve financial independence.

Counselors can assist young adults in learning how to recognize abuse and other behavioral health disorders as barriers that, when not properly treated, prevent true self-sufficiency. This stance alone may improve counselor's likelihood of achieving a therapeutic alliance with the young adult clients.

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Ambivalence and Motivation for Change, continued

Even in alliance with counselors, however, young adults often will experience ambivalence toward the treatment process. Ambivalence, and the manner in which it is expressed, is most effectively intervened on within the context of a “readiness to change” model. Within such a model, a client's readiness to change may be rated on a continuum of possibilities ranging from “not ready to change” to “actively trying to change.” If young adult clients are not able to recognize behaviors such as substance abuse as undesirable and in need of change, counselors must create treatment plans based on the concept of discovery instead of recovery.

Young adults are particularly good candidates for discovery-oriented treatment interventions. Research indicates that one of the most important developmental tasks for young adults is the exploration and creation of a worldview. Many young adults' propensity for debating and challenging ideas should not be dismissed as merely “treatment resistant behavior.” This readiness to engage in debate is appropriate developmentally and should be harnessed toward the task of establishing and clarifying a young adult client's strengths, needs, abilities, and preferences.

The Family System

In regard to accomplishing developmental milestones, such as completing post-secondary education, entering a romantic relationship, or achieving full-time employment, research indicates that preadult family history tends to be a greater predictor of problems in this area than substance abuse alone for adult ages 18 to 25. Young adults who reported having lived with an alcoholic parent, having experienced parents' divorce, or having suffered from childhood sexual abuse also demonstrated the most difficulty in achieving traditional developmental milestones, even when not abusing substances.

Since substance abuse alone does not account for all aspects of poor psychological and social developmental, counselors must be prepared to help young adult clients address additional issues, including past traumas and family dynamics. Many young adults who remain ambivalent about their readiness to quit using substances are not as ambivalent about other contributing factors such as past sexual abuse or parental conflicts. If these issues are explored thoroughly and clients experience investment in resolving them, the issue of substance abuse will invariably emerge, but not as a separate, truncated problem.

Young adult clients must learn to understand the conditions that contribute to substance abuse, as well as the manner in which substance abuse exacerbates existing problems. Exploring and attempting to resolve conflicted family relationships provide an essential vehicle for achieving this goal.

The 12-Step Model and Developmental Needs

Young adult clients with substance abuse problems may need more assistance from counselors than older adult clients would in regard to addressing demographic differences in 12-Step meetings. According to a 2001 Alcoholic Anonymous (AA) member survey, the average member of AA was 46 years old. A similar survey showed that the average age of a Narcotics Anonymous member was 37.



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The 12-Step Model and Developmental Needs, continued

Although young adult clients may report a lack of identification with older adults in 12-Step meetings and group counseling sessions, it is important to note that young adult clients may be experiencing difficulty identifying with any peer group, regardless of age differences. In fact one of the developmental tasks for young adults between the ages of 18 and 25 is learning how to establish intimate relationships and to address successfully the inherent isolation associated with independence from family relationships.

Young adult clients who report problems of identification with others may benefit from interventions designed to help them explore their strengths and preferences, as well as their worldview and vocational aspirations. Examining these areas often will interest young adults, as well as direct them toward barriers and deficits—including substance abuse—that need to be addressed in their lives.

If young adult clients meet the diagnostic criteria for substance abuse or substance dependency, the 12-Step model for recovery offers a number of benefits. In addition to being free of charge and readily available in most areas, the 12-Step program has values that correlate with the developmental needs of young adults in regard to establishing mature relationships. Individuals capable of achieving intimacy in relationships have been characterized as being tolerant of differences in others, believing in the value of interdependence as a way to work through difficulties, and being willing to commit to relationships that demand some degree of sacrifice. On an interpersonal level, these are the very concepts the 12-Step model of recovery reinforces. Young adults who participate actively in 12-Step support meetings may benefit greatly from exposure to these ideals.

Conclusion

An accurate understanding of developmental needs allows counselors to empathize more deeply with clients. Counselors are also more likely to establish authentic relationships with young adults and to hold them in positive regard if developmental needs are appropriately assessed. More importantly, counselors can avoid the mistake of pathologizing normal stages of psychological development and can actually help clients negotiate through the difficult stage of young adulthood.

InnerPath Retreats

Beginnings & Beyond

July 2 • July 26 –30

Women's Retreat

July 19-23 • Aug 30-Sept 3

Developing Healthy Relationships

Dec 2-5

Developing Healthy Families

Monday • Friday
Contact us to schedule

We offer several 4 and 5 day programs for individuals, couples, and families who want to focus on codependency, relationships, communication, grief, loss, trauma, and anger. InnerPath is like a mini-Cottonwood experience where you can come back for a boost to your personal recovery plan. All of our retreats are held at the Cottonwood Nash House, meals and lodging included, and are limited to 8 people. Rokelle Lerner who is a therapist, author, and codependency expert, is our facilitator. Please contact Jana Zeff at 520-743-2141 or e-mail her at jzeff@cottonwoodtucson.com for more information about InnerPath.

Sweetwater Adolescent Program

Sweetwater is a 90-day residential program, internationally recognized for the treatment of co-occurring disorders with adolescent females ages 13-17. The *Sweetwater Program* has been designed to help girls and their families recover and make changes necessary to improve the quality of their lives. *Sweetwater* places a strong emphasis on scholastics, offering both structured classroom hours as well as a therapeutic curriculum designed to further the intellectual, emotional, and spiritual growth of each girl. Cottonwood de Tucson's *Sweetwater Program* is a recipient of the **Woodbury Reports, Inc.** "[Excellence in Education Award](#)" having been selected on the basis of our excellent reputation for producing positive and consistent results with at-risk young girls and their families. Additionally, Cottonwood Tucson is a proud member of [National Association of Therapeutic Schools and Programs \(NATSAP\)](#). If you and your family are struggling with addiction or depression, please contact us, Cottonwood Tucson (see below) and let us help you and your family experience recovery and health.

Farmington/Durango Alumni Meetings

Dear Farmington and all our New Mexico alumni,

I am looking forward to the July Alumni meeting. Your meeting topic will be "**Harboring Resentments or Taking Poison and Waiting for the Other Person to Die!**" We have a great group of alumni who are serious about supporting each other. The 2010 meetings will be held at the **First Baptist Church at 511 W. Arrington, 87401 in Farmington, NM.** (west side of building) The meeting time is from **7:00pm until 8:30pm**. I hope to see you there, all are invited.

2010 Farmington Alumni Meeting Dates

July 26 • September 27 • November 29

Phoenix Alumni Meetings

Dear Phoenix Alumni,

I look forward to seeing you and supporting you as you continue your journey towards recovery. We meet every other Tuesday night at the **ABC Wellness office**, located at **7219 E. Shea Boulevard Scottsdale, AZ 85260**. This month's topic will be, "**What are You Thinking About Today?**" The meeting time is from **7:00pm until 8:30pm**. The 2010 dates are listed below. Hope to see you there.

2010 Phoenix Alumni Meeting Dates

Jul 6 & 20 • Aug 3 & 17 Sept 7 & 21 • Oct 5 & 19 • Nov 2 & 16 • Dec 7 & 21



For more information, click here shicks@cottonwoodtucson.com or call 520-743-0411 extension 2517 or toll free 800-877-4520 www.cottonwoodtucson.com

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The Sweetwater Drive Cleanup Crew

