

– IN MEMORIAM –

L.A. CADA Founding Member, Mrs. Alice Allen



Our world would be a very different place if not for the grace, kindness, and dedication of Alice Allen. Forty-eight years ago, together with her husband, Dr. Ethan Allen, Alice helped to found a little non-profit organization in Santa Fe Springs now

known as Los Angeles Centers for Alcohol and Drug Abuse. She dreamed of addressing substance use disorders in a way that would give hope to families struggling with addiction. This goal was achieved, plus much more.

Throughout the decades, Alice maintained a consistent and active role with our organization up until the day she passed away on May 6, 2019. She served as Secretary and member of the L.A. CADA Board of Directors, frequently attending program graduations and other special events, assisting with the planning and organization of fundraising activities, and bringing in other community organizations to provide support for the agency's work.

Mrs. Allen first moved to the community when her husband arrived to open his medical practice in Norwalk. She became active as a volunteer in the schools her four children attended, participating in PTA at all levels, providing effective leadership as President, and holding many offices and committee roles. Alice was active with the Camp Fire Girls, taking her three daughters and other girls on many happy camping trips, including field trips to Washington, D.C. As an active member of the Whittier First Methodist Church, Alice Allen participated in many efforts to raise

funds for church projects and to help her local community through church activities. She joined the Norwalk Women's Club, serving as president from 1973-1975, raising funds for needed community projects. Alice's contributions included youth scholarships, dental care, programs for seniors, and help for low-income families. A few years ago, Mrs. Allen was honored by the Boy Scout Council of Whittier, receiving a "Good Scout Award" along with her husband, Dr. Ethan Allen.

For all she did and all she was, the staff and clients of L.A. CADA will remember Alice as someone who always made sure everyone felt comfortable. Her presence within our agency added warmth and care everywhere she went (with a strong dose of professional advice about parliamentary procedure whenever needed). Through the years, as L.A. CADA grew from a small storefront operation to a well-



Dr. Ethan Allen and Alice in their early years.

respected, multi-million-dollar behavioral healthcare agency, we have always known that our success would not have been possible without the steady support and guidance of Alice Allen. She is well known in the community and appreciated by all who have ever come in contact with her. Alice Allen showed us all what a life well-lived looks like, and she will never be forgotten.



**A message from
Juan Navarro
L.A. CADA Executive Director**

Dear Friends,

Working in behavioral healthcare, we meet many unique and giving people. Sometimes, we fortunately encounter a particular person who is nothing less than unforgettable. For me and L.A. CADA staff and clients, that person was Mrs. Alice Allen. Alice served as Secretary and member of the L.A. CADA Board of Directors since 1971. She played an active role with our organization up until she passed away, on May 6, 2019. Alice leaves an enduring legacy at L.A. CADA. In fact, she “raised us.”

L.A. CADA was founded 48 years ago by Alice Allen and her husband, Dr. Ethan Allen, as the Rio Hondo Area Drug Abuse Coalition. And it seems we were a quite the difficult child to raise. Like many small nonprofits, L.A. CADA lacked funding, the community didn’t know who we were or what we did, and the agency needed staff, equipment, and supplies we couldn’t afford. Survival was day-to-day and the chance of this small storefront operation lasting into the 21st century was slim indeed. But then came Alice.

Alice Allen knew a lot of people. Medical professionals, attorneys, community groups, churches, philanthropists—basically anyone who was able to help. In her warm, but insistent way, she persuaded people to lend their expertise and support to the new little agency. When we ran out of money, Alice knew people who could help. When new staff were required, Alice knew where to find the best. And through it all, Alice Allen remained 100% committed to the mission of the agency. L.A. CADA clients and staff remember her coming to our programs for frequent visits, attending our treatment graduation ceremonies, and providing the kind words and interpersonal support both clients and staff need to continue on “one day at a time.”

Without the help of Alice Allen, Los Angeles Centers for Alcohol and Drug Abuse could easily have become a distant memory. Instead, today L.A. CADA is a vigorous, growing behavioral healthcare leader, with strong expertise in multidisciplinary treatment for disadvantaged populations.

Since thank you isn’t enough, I’d like to announce the renaming of L.A. CADA’s HOW House bridge housing program to **Alice’s House** for women and children, in perpetual memory of Alice Allen. Thank you, Alice, for your dedicated and successful work. You have provided the gift of a thriving, nonprofit behavioral health treatment agency to your community.

Yours truly,

Juan Navarro

page 2



**LOS ANGELES CENTERS
FOR ALCOHOL AND DRUG ABUSE**

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“Drugs, Viruses and the Law” Presented at L.A. CADA’S Conference 2019

Desirée A. Crèvecoeur-MacPhail, Director of Quality Improvement and Utilization Management

The L.A. CADA Annual Conference took place on June 18, 2019. This year, instead of in Whittier or the surrounding area, the conference took place at the California Endowment in Downtown Los Angeles—a more central location for some attendees and one of the few locations in downtown that offers free and abundant parking.

The conference included a wide range of speakers including clinicians Neva Chaupette, Psy.D and Tom Freese, Ph.D; medical doctors Randolph Holmes, M.D. and Gary Tsai, M.D.; Long Beach City Prosecutor Douglas Haubert, Esq.; Whittier Police Captain Michael Davis; social workers Cinthya Alcaraz, LCSW and Milena Abarca, LCSW; and a research psychologist—me!

The topics were as varied as the speakers and included an overview of the new substance use disorder treatment system, including a description of the varied services now available that were not previously reimbursed by Drug Medi-Cal, such as case management and Recovery Bridge Housing.

This was followed by a presentation describing the medications available for substance use treatment (MAT)—see “Drugs vs Medications: Problems, Solutions, and Implementation” on page 10 of this newsletter. And although opioid use disorder continues to claim lives, the conference also included up-to-date information on stimulants, lest we forget that stimulants are still the number one reported substance of abuse upon admission to L.A. CADA.

Following lunch, conference attendees had the opportunity to learn more about the treatment of clients with HIV, Hepatitis and other co-occurring disorders. The conference concluded with a panel discussion allowing the audience to ask questions and interact with the presenters. All told, the conference was designed to allow for more interaction between the audience and the presenters. We hope you will join us [again] at Conference 2020.



Some of the conference presenters (l - r): Thomas Freese, Ph.D, Desirée Crèvecoeur-MacPhail, Ph.D, Randolph Holmes, M.D., and Gary Tsai, M.D., with Juan Navarro, L.A. CADA Executive Director.

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GOLD TABLE SPONSORS



Dr. Robert and Ms. Caryl Lark

Dr. & Mrs. Ethan Allen

Tarkanian Family



(upper left) Bill Tarkanian, L.A. CADA Director of Program Development, moderated the conference panel discussion, “Adapting to Changing California Laws and Its Impact on Our Communities.”

TANU'S ROAD TO RECOVERY

My name is Tanuoma'aleu Nelson Ah. I go by Tanu. I am 45 years old and proud to report that I have one year of clean time. I began a six-month incarceration a year ago. During that time, I made the necessary life changes in order to move out of L.A. CADA's **Recovery Bridge Housing** at the L.A. CADA **ART House** and into my own apartment. L.A. CADA connected me with resources to help further stabilize me. I recently completed Peer Support training at L.A. CADA, but I know that I need to take care of me first before I can assist in the support and care of others. I'm a changed man. I'm now being selective about my employer and employment in order to ensure that I'm grounded in my sobriety and overall wellness. The following is about how I ended up at L.A. CADA and started making changes.

My drugs of choice were crystal meth and alcohol. I used drugs and drank to cope with secrets, loneliness, and a need to be accepted. I could act out sexually and escape. I was the life of the party and the attention reinforced me to use and drink more. When this happened, I would get more outrageous with my behavior. The more I acted out, the more others cheered me on and gave me attention. One of the worst things about my addiction is that it lasted for decades. I was humiliated on social media, incarcerated, and homeless on the streets. I ate out of trash cans, lived with never feeling fully rested as it was difficult to find a safe place to sleep on the street, and even turned to prostitution in order to survive on the streets.

My drug and alcohol use, along with other high-risk behaviors, confused, disappointed, and contributed to my family, friends, and employer losing trust in me. One of the things I wish my family would have done differently was just to sit with me and listen without judging. If they actually did this, I either never felt it or couldn't hear them.

I believe Jehovah God intervened to help get me into treatment. Being incarcerated gave me the opportunity to reflect on my addiction and the core issues that I had not addressed. There were also several friends who assisted during my incarceration by intervening and supporting me with letters, raising money, and even showing up at court to support me.

L.A. CADA has provided me the opportunity to recover from my addiction. Treatment allowed someone like me to rehab in a safe environment and be emotionally "messy." The ART House let me figure out what was personally meaningful, such as restarting my spiritual program. I chose to study the Bible again and work on my relationship with Jehovah. This experience has not been easy, however I feel stronger, I'm making better choices about my health and welfare, and I am grateful. I came to understand that getting healthy is a process that takes time.

Addiction is real and it affects everyone. Treatment and recovery look different for each person—it's not a cookie cutter approach. There is someone who can help and tailor approaches for treatment that are client-centered to meet your individual needs. L.A. CADA has provided me with the gifts of accountability and gratitude. Thank you to L.A. CADA, my friends and family, and to Jehovah for assisting in my recovery and not giving up on me!

My words of advice to others who are suffering in addiction is that there is a whole community who understands and is waiting to help you. Come home, it gets better!



Tanu Nelson is "a new man."

Did you know... that Los Angeles Centers for Alcohol and Drug Abuse is listed as a Charitable Organization on **Amazon Smile?**

This means... when placing an Amazon order through www.smile.amazon.com, L.A. CADA will benefit from a small percentage of your purchase and it won't cost you a penny more.

And so... let's do all we can to put smiles on the faces of those we serve and their families.
THANK YOU IN ADVANCE!



CCTRP-SFS Women Pursue Their Educations for Brighter Futures

Lauren Spicer, Adult Education Teacher

L.A. CADA **Custody to Community Transitional Reentry Program** (CCTRP-SFS) has much to celebrate, including a recent participant who graduated from **Cerritos College** with an Associate's degree and seven **ABC Adult School** graduates who earned high school diplomas and high school equivalency certificates. Our students optimized the use of their time and the benefits of our education program and rehabilitative services by working with their counselors, leaders, and correctional staff to develop themselves personally. They worked with their teacher to develop a spirit of excellence while learning online at CCTRP's education lab and on their school campuses. They know that it is essential to invest in self-improvement and to complete high school and various levels of higher education to become successful as they reenter their communities.

The graduates intentionally shared their accomplishments and the value of a good education with their loved ones. As they solemnly entered the college athletic field to the inspiring notes of *Pomp and Circumstance*, their families beamed with honor. This represented a new beginning for these forward thinkers who are determined to turn their lives around rather than allow the past to define them. They are on pathways to success and service to others—especially their families and communities!



Proud CCTRP-SFS women looking forward to their newly redefined futures.

Emphasizing the Value of Storytime at L.A. CADA's Women and Children Program

Soroptimist International of Norwalk/Santa Fe Springs member **Marilee Stefenhagen** has been providing Storytime for the mothers and babies at L.A. CADA's **Family HOPE Program** for the past year. "My mother was a kindergarten teacher who quoted poetry, sang songs to me and my sisters, and read bedtime stories to us every night." says Ms. Stefenhagen. "I became a librarian because I LOVE to read, and sharing my passion with the mothers at Family HOPE Program is very satisfying."

A retired L.A. County Public Library administrator, Ms. Stefenhagen teaches fingerplays and nursery rhymes, sings songs, and shares puppets and stories with the mothers and their babies. During April, the mothers created "boo boo" bunnies out of washcloths, which hold an ice cube in the event their child gets a bump or bruise. Each week, the moms receive a free book from Soroptimist International of Norwalk/Santa Fe Springs to keep for their baby's library.

Soroptimist International of Norwalk/Santa Fe Springs also supported Family HOPE Program by hosting two diaper collection drives at their 2018 and 2019 spring Educational Awards events.

September is National Recovery Month

National Recovery Month (Recovery Month), sponsored by the **Substance Abuse and Mental Health Services Administration** (SAMHSA) is a national observance held every September to educate Americans that substance use treatment and mental health services can enable those with mental and substance use disorders to live a healthy and rewarding life.

Now in its 30th year, Recovery Month celebrates the gains made by those in recovery, just as we celebrate improvements made by those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease. Recovery Month works to promote and support new evidence-based treatment and recovery practices, the emergence of a strong and proud recovery community, and the dedication of service providers and community members across the nation who make recovery in all its forms possible.

As part of the 30th anniversary, Recovery Month is introducing a new logo that signifies the true meaning and values of the Recovery Month observance which, since its inception in 1989, has positively changed many lives. The new Recovery Month logo features an "r" symbol, representing r is for Recovery and the need to support the millions of individuals who are proudly living their lives in recovery.



“Drugs vs Medications: Problems, Solutions, and Implementation”

Desirée A. Crèvecoeur-MacPhail, Director of Quality Improvement and Utilization Management

L.A. CADA’s esteemed medical director, **Randolph Holmes**, MD FASAM and myself, **Desiree Crevecoeur-MacPhail, PhD**, co-presented “Drugs vs. Medications: Problems, Solutions and Implementation” at L.A. CADA’s Conference 2019. The presentation focused on differentiating medications from drugs, and included information on different medications available for the treatment of opioid use disorders, as well as the medications used for alcohol and tobacco use disorders.

The differences between medications and drugs were also discussed. For example, taking a medication prescribed to you and as directed is appropriate. Taking someone else’s medication, even for a legitimate concern, is not appropriate and is referred to as “non-medical use.” In addition, even if you are taking a medication that is prescribed to you, if you are not taking it for the reasons prescribed (e.g. taking it because it gives a sense of euphoria), this is also an example of non-medical use. These non-medical uses coupled with the use of illicit substances are better referred to as “drug use.” In such circumstances, the drugs can produce unintended effects and consequences such as the development of dependence.

Following was an overview of the efficacy of the use of medications in the treatment of SUD. There is still significant stigma concerning their use although the number of people dying as a result of opioid use is significant. For example, in California there were 2,196 opioid overdose deaths in 2017 which amounts to approximately six deaths per day.

The presentation concluded by reviewing some of the difficulties experienced with attempting to implement medications for addiction treatment (commonly referred to as MAT). These difficulties include a lack of information, stigma, personnel needs, and coordination. Although these areas can be problematic, they are not insurmountable. There are several resources available to assist in the development of a MAT program including the Hub and Spoke program (<http://www.uclaisap.org/ca-hubandspoke/index.html>). For more information or a copy of this presentation, please contact Desiree Crevecoeur-MacPhail, PhD at desiree@lacada.com.

New Volunteers with Wet Noses

Becky Rau, Director of Crisis Residential Treatment Program

WHAT HAS SIX LEGS AND TWO ARMS? L.A. CADA’s new pet therapy, **Pet Partners Team: Andy and Argos**.

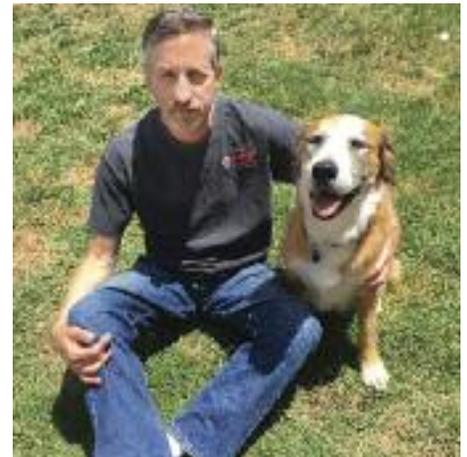
WHY PET THERAPY? Research shows that positive interactions with therapy animals increase endorphins and can improve motivation to participate in treatment protocols and lessen worry, anxiety, unhappiness, and alleviate pain.

WHAT ARE THERAPY ANIMALS? Animals that provide affection and comfort, participate in therapeutic activities and education, and live with their owner. Teams consist of one animal and one human.

WHO IS PET PARTNERS? Pet Partners is the leading therapy organization in the United States. Handlers and their pets go through rigorous training and testing.

Pet Partners pet therapy handler, Andy, is a high school teacher and former police officer. He loves giving back to others and seeing how they respond to him and his nine-year old, four-legged partner, Argos.

Argos entered Andy’s heart when he was a six-month old puppy that had been dropped off at a shelter. He’s a mixture of different breeds—possibly Retriever, maybe Bernese



Mountain, but definitely a great dog! He loves being petted and meeting new people with Andy. Watch for this dynamic duo—they’ll be coming to a site near you Summer 2019!

LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE FACILITIES

Corporate Office
12070 Telegraph Rd.,
Suite 207
Santa Fe Springs, CA 90670
562.777.7500

**Santa Fe Springs
Outpatient and HIV Services
Center**
11015 Bloomfield Ave.
Santa Fe Springs, CA 90670
562.906.2676

**Downtown
Outpatient and HIV Services
Center**
470 East 3rd St., Suites A & B
Los Angeles, CA 90013
213.626.6411

**Hollywood
HIV Services
Center**
6838 Sunset Blvd.
Los Angeles, CA 90028
323.461.3161 ext 3818

**Custody to Community
Transitional Reentry Program
(CCTRP)**
11121 Bloomfield Ave.
Santa Fe Springs, CA 90670
562.236.9390

**Allen House
Residential Treatment
Center**
10425 South Painter Ave.
Santa Fe Springs, CA 90670
562.906.2685

**Alice’s House
Residential Treatment
Center**
14100 Glengyle Street
Whittier, CA 90604
562.777.1222

**L.A. CADA
at ART House
Recovery Bridge Housing**
1646 North Fair Oaks Ave.
Pasadena, CA 91103
626.314.3333

**Long Beach
Outpatient Services
Center**
5861 Cherry Ave.
Long Beach, CA 90805
562.676.4259

**Orr and Day
Youth Prevention/
Supportive Services**
10210 Orr and Day Rd.
Santa Fe Springs, CA 90670
562.348.0083

**South Gate
Eden Manor
Board and Care**
8919 California Ave.
South Gate, CA 90280
323.564.1800

After 365 Days of Sobriety, Life Only Continues to Improve

Darrell Garnaas, Recovery Bridge Housing Resident

There are only two outcomes that stem from incarceration: increased recidivism or successful rehabilitation. The first and more common outcome is increased recidivism, the tendency for a convicted criminal to re-offend, by neglecting the core issues that cause offenders to engage in criminal activity such as mental illness and substance use disorder. This ensures the underlying disorder never be dealt with. The second and more logical outcome would be facilitating a successful rehabilitation, the action of restoring someone to health or a normal life through training and therapy.

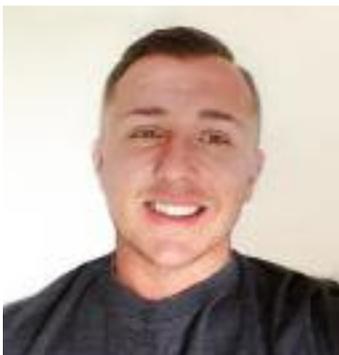
The **START** program offered by L.A. CADA in **Los Angeles County Men's Central Jail** is the only program offering SUD treatment to the LGBTQ community giving each individual in the K6-G unit a chance at rehabilitation. For me, being incarcerated was a lonely and terrifying experience. I began to develop resentment for everyone and everything around me. I could not comprehend how I had gotten in there or, more importantly, how I would stay out once released. I feared my future and mourned my past.

The **START** program was my Higher Power doing for me what I could not do for myself. While in the dorm one day, I was asked by the EBI (Education Based Incarceration) trustee if I would be interested in joining the **START** program, that it was an outpatient substance abuse program, and group would be held three times a week. That was all I needed to hear. Although I wasn't too convinced that I had a problem with substance abuse, I was positive I wanted to leave that dorm three more times a week!

Impressed would be an understatement for how I feel about the **START** program. The SUD counselor, **Ms. Norma**, was a breath of fresh air. She had a talent for meeting me at my level, and brought a positive light into my situation. It was in her groups that I would learn some of the strongest fundamentals of my recovery, such as being open-minded to all walks of life, living in the present moment, and giving myself credit for being sober 24 hours at a time. I was able to take this time to

educate myself, reflect on my life, and made a decision to change.

In addition to group counseling, I also met with **Mr. Gilbert** once a week for an individual session, and with **Ms. Samantha** for case management. Here I was able to develop an exit plan that would guarantee me sobriety, shelter, and safety after my release. My long-term goal was



to get to L.A. CADA's **ART House** in Pasadena. I had heard only great things about this location and felt confident that an LGBTQ-specific setting was where I would be most comfortable. Unfortunately, I was told I must complete some time in a residential program in order to qualify for **ART House**, and definitely considered that a barrier at the time. I was not court-mandated to treatment, so how could they expect me to get released from jail and check myself right back into

a controlled environment? Thankfully, I had now been sober long enough to make somewhat rational decisions and knew that inpatient treatment was what I needed.

Ms. Samantha presented me with two options: L.A. CADA's **Allen House** in Santa Fe Springs or **House of Uhuru** in South Los Angeles. I was raised in Santa Fe Springs, used in Santa Fe Springs, and had friends and enemies there. With validation from Ms. Samantha, I chose to remove myself and went to complete my inpatient care at **House of Uhuru** in South Los Angeles.

Every day during my inpatient stay I thought of a million reasons why I didn't need to be there. However, again this was my Higher Power doing for me what I could not do for myself. The most important thing I learned was to be patient and trust the process. With this mindset, I put 110% of my energy into working my program wholeheartedly, and utilized every resource available to me during my two months at **Uhuru**.

I established medical care, began weekly therapy, received new eye glasses, and got assistance from General Relief and Snap benefits. I was introduced to inspirational people like **Susan Burton** and life-changing programs like **INVEST**, which is dedicated to helping people on formal probation receive full time employment by any

CONTINUED TO PAGE 12

LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

serves the multicultural community of Santa Fe Springs, including cities throughout Los Angeles County.

OUR MISSION

is saving lives, empowering individuals and families, and strengthening communities through innovative, client-centered, culturally sensitive substance use and behavioral health services.

OUR VISION

is to enhance the educational and economic well-being of the people we serve by means of direct human services, advocacy, and referrals.

OUR VALUES

embrace the empowerment of people through compassion, perseverance and respect. We are able to provide a wide range of services thanks to a collaborative approach compatible with healthy communities, dedicated partners, and unique foundations.

Boardmember Recognition



Robert Rodriguez

L.A. CADA Board Member Robert Rodriguez is a busy guy. By day, he serves as **Senior Vice President and Director of Sales at 1st Century Bank** in Los Angeles. In his free time, Robert rates biking with his children as a priority, followed by attending sporting events, concerts, and traveling.

As an active member of the community, Robert serves on the Board of Directors of L.A. CADA. As Treasurer, he oversees L.A. CADA's financial well being. He feels working with an organization that helps people is an opportunity. The motivation to seize opportunities as they become available is part of his life philosophy.

"Having both friends and family who were impacted by the disease of addiction was a deciding factor," he says of his work with L.A. CADA. Robert watched a close high school friend struggle with serious drug problems, and later in life he lost a loved one as a result of alcoholism.

Believing "people can only change what's within their reach," he stressed that working with a nonprofit treatment agency is his chance to create meaningful change in his own community.

In embracing life as it comes—even when it involves working on difficult issues of addiction—Robert is working to make his corner of the world a better place.

We couldn't be more honored to have him on our side at L.A. CADA

El Rancho High School Partners with L.A. CADA

Rachel Price, Substance Abuse Counselor

I had the opportunity to work with a student we will call Linda in her sophomore year attending ERHS. She had been referred to L.A. CADA Outpatient treatment services as a result of being found under the influence of marijuana on the school campus along with two other students who were also referred to the program.

On Linda's first day of participation in the program, she was asked to introduce herself to the peers in her group by including her name, age, and drug of choice. However, when she started to introduce herself she became confused and said, "Wait, what was I supposed to do?" The other students began to laugh, her face turned red, and she became upset. I assured her that she was fine and that everything would be ok, but she remained upset.

Throughout her participation in the program, Linda was adamant that she did not want to be in it and that her mother made her come. She said she didn't have a good relationship with her mom who was always nagging and easily annoying her. Through the program, Linda was educated about being accountable and responsible for her choices, and making decisions associated with negative behavior and an inappropriate attitude.

One of the group topics includes "Why Am I Here." This provides students the opportunity to gain insight on why they feel confused, are afraid of the expectations they may face while in the program, and the anger associated with being referred to the program.

Following her time spent in the program, Linda began to engage in group sessions with an open mind and positive outlook, and accepted responsibility for her choices and decisions. She was able to recognize that the blame was no longer her mother's and that her mother didn't make the choices and decisions that led to Linda's referral to the program. She also came to realize that her anger was closely related to her inability to communicate with her mother, leading to frustration and resulting in negative behavior and drug use. She started communicating more effectively with her mother and was not so easily annoyed.

Before completing the program, Linda was able to maintain straight A's at school and spoke adamantly about attending college in the future. Today, her goal is to help her single mother who is raising her and her brother and "deserves more." In conclusion, this young lady learned how to be accountable and responsible and now vows to repay her mother the court fine she so graciously paid on behalf of her daughter.



Linda shares her Certificate of Completion with (l-r) Officer Rodriguez, her Aunt Julie, her mother Marggy, Rachel Price, L.A. CADA Substance Abuse Counselor, and El Rancho High School Officer Dominguez.

– ANNOUNCEMENT –
New Family Medicine
Addiction Internship and
Medical Residency
Available at L.A. CADA
Fall 2019

Becky Rau, Director of Crisis Residential
Treatment Program

Few doctors know how to treat addiction with the latest advances in treatment options, and even fewer medical schools offer training in addiction. A new program at L.A. CADA aims to change that. L.A. CADA has entered into a partnership with **USC Keck Medical School** and **PIH Health** to provide a learning and supportive environment to USC second and third year family medicine students to learn about addiction and how to engage with persons suffering from it. In addition, **PIH Health Family Medicine and Psychiatry residents** will provide services two days a week to patients receiving care at L.A. CADA. These opportunities have been made possible by L.A. CADA's Medical Director, **Dr. Randolph Holmes**, who has made it his mission to expand addiction training and knowledge of those training to become physicians.

Dr. Holmes, assisted by **Becky Rau**, LCSW, Director of Client Care, along with USC and PIH Health created curriculum and an experiential cultural experience for students and residents. The focus will be on understanding what addiction and treatment is like from a patient perspective, how multidisciplinary teams engage patients, and understanding treatment interventions and options for recovery such as MAT (Medical Assisted Treatment).

Additionally, L.A. CADA offers internships for students pursuing their bachelors in social work, psychology, and other helping professions. Those pursuing their Master's or Graduate studies in Social Work, Marriage and Family Therapy, Psychology, and more can contact L.A. CADA for their learning needs at 562.777.7500.

“Velvet Jesus” Play Uses Theater as a HIV Prevention Tool

Charles McWells,
Community Services Manager

Homophobia, sexual abuse, substance use, and HIV are four topics that have largely been avoided by mainstream playwrights from communities of color. But these themes are the focus of an explosive new stage drama. “**Velvet Jesus**” tells the story of Carl, a young African American man who seeks revenge against the stepfather who Carl says committed unspeakable acts of cruelty against him when he

was a child. The play was written by L.A. CADA Community Services Manager **Charles McWells**. The project was funded by a grant from the **Los Angeles County Department of Mental Health**.

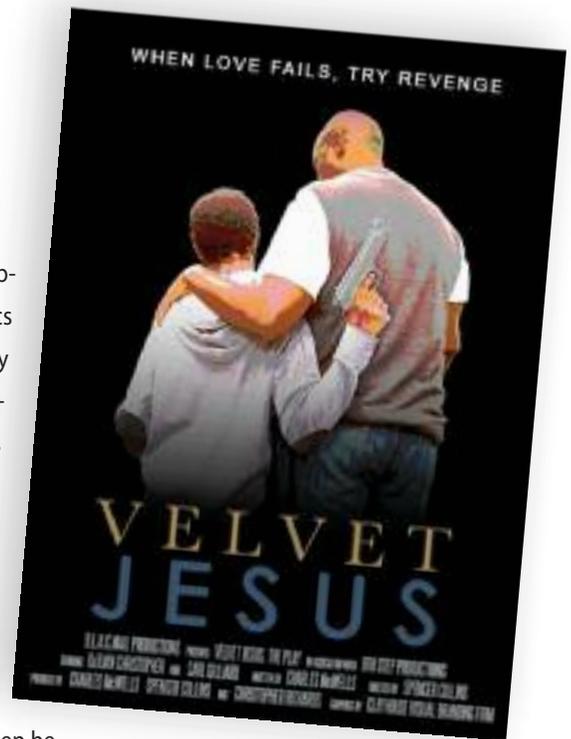
Three productions have been staged to date: Complex Theatre in Hollywood in October 2018; Waco Theatre in North Hollywood in January 2019; and Secret Rose Theatre in North Hollywood on June 30, 2019. Over 500 people have seen the play.

Clients from L.A. CADA's **ART House**, **Allen House** and **Project 90** joined over 200 clients from other substance use disorder treatment programs who attended closed performances of the play. Following these performances, mental health clinicians lead the audience in discussions that focused on the themes of the play, including the HIV risk behaviors different characters engaged in. This use of entertainment to convey a health empowerment message is called “educational entertainment” or “edu-tainment.” Research studies have documented that this form of community-level intervention can be more effective than more traditional behavior-change models like cognitive behavioral therapy or motivational interviewing.

“Carl's story seems all too familiar to many of us in the LGBTQ community,” says McWells. “But we almost never get to hear these stories on stage or in films. And we never get a chance to talk about these stories—to explore how the events we saw on stage parallel what we've experienced in our own lives,” he added.

That changed when McWells secured three grants that enabled L.A. CADA to sponsor productions of the play for LGBTQ audiences. These closed productions were followed by dialogue workshops with audience members. Workshops were facilitated by mental health clinicians, including L.A. CADA's Director of Continuum of Care **Becky Rau**. “The grants made it possible for us to bring people to the theater who could never pay \$25–\$40 for a ticket,” observes McWells.

So, did seeing “Velvet Jesus” help at-risk LGBTQ audience members reduce their HIV risk behaviors? McWells can't say for sure. “But,” he notes, “listening to those post-performance conversations proved to me that a lot of people had started thinking about change.”



Ask Dr. Holmes...

Dr. Randy Holmes is Board Certified in Addiction Medicine and Family Medicine, and on staff at **PIH Health**. He also serves as Chairperson of the **California Society of Addiction Medicine (CSAM)** Public Policy Committee, and is Co-Chair of the **American Society of Addiction Medicine (ASAM)** Public Policy Committee.



Dr. Holmes has agreed to receive and answer questions, and post them for readers of this newsletter. Questions may be emailed to administration@lacada.com.



Dear Dr. Holmes:

"What is the scope of prescription drug abuse in America?

Sincerely,

Need to Know



Dear Need to Know:

Misuse of prescription drugs in America is a serious public health problem. Drugs such as opiates (pain pills), sedatives (primarily benzodiazepines), and stimulants are prescribed every day to millions of people. Most people do not abuse their medications, but a significant number of adults and adolescents misuse prescriptions they have been given for a legitimate reason. Prescription medications are also stolen from others or bought on the black market.

In 2017, an estimated 18 million people (six percent of those over 12 years of age) misused their medications at least once in the past year. This can be as simple as taking too many pills on a single day or a more long term abuse involving getting prescriptions from multiple prescribers and stealing other's medications. In 2017, an estimated two million people misused opiates for the first time, one million people

misused stimulants for the first time, and one-and-a-half million people misused tranquilizers for the first time. Many of these people will go on to develop serious substance use disorders (addictions), so this is a very real problem for our society.

Signs that someone is misusing their prescriptions include running out of medication early, "losing" medications and asking for early refills, obtaining prescriptions for the same medication from several different doctors, and acting impaired or under the influence. Doctors need to be careful with prescribing potentially addicting medications to people who have a history of substance abuse. Family members who think their loved ones are abusing medications need to communicate with healthcare providers about their concerns. Often, close family members are the first ones to suspect or see signs that the medications are being abused.

One serious consequence of prescription drug abuse is progression to illegal drug use. If people can no longer get their opiate prescriptions due to misuse, they will often turn to heroin or other street opiates. Likewise, stimulant medication misuse can lead to street drugs such as methamphetamine. Fortunately, if misuse leads to addiction, there is treatment that we can use to help people get back to a stable life. The same medications we use for heroin addiction are also useful for prescription pain pill addiction.

Counseling, 12 Step meetings, and group and individual therapy all work well for prescription drug addiction. Treatment can include residential or outpatient modalities, usually needing at least several months before they get better. People who are in the grip of a prescription medication addiction need our help and support to move on into recovery. – *Dr. Holmes*

Socks for a Cause

Liliana Rivas, Program Director, CCTRP

Our long-time friends and supporters, Soroptimist International of Norwalk/Santa Fe Springs, donated 400 pairs of socks to CCTRP. A sock drive was recently held at the **Desert Coast Region Soroptimist Spring Conference** where participating clubs were asked to bring new socks of all sizes for women and children. The socks were then distributed to women's programs/shelters within the region. L.A. CADA CCTRP was one of the lucky recipients of this drive. Socks are an everyday item that many of us may take for granted, but for the CCTRP women, it means having a nice "welcome set" included with the everyday necessities they receive when they first arrive in the program. Thank you "Soropti-Sisters" for supporting the mission of L.A. CADA's programs for women.

page 10



Angie Guzman, CCTRP Administrative Assistant, Brenda Nickelson, CCTRP Assistant Director, and Marilee Stefenhagen, Soroptimist International of Norwalk/Santa Fe Springs.

Kids and Opioids

Lisa Berger, Principle, The Lisa Berger Group

Putting inexperienced young drivers out on the roads in cars is dangerous, but for the first time in U.S. history driving isn't the riskiest thing our kids do. The National Safety Council warns that Americans are more likely to die from an opioid overdose in 2019 than in a car crash.

The teen years are a high-risk period for substance use due to the natural course of human development. While young children are easily rewarded with small tokens, during adolescence and early adulthood humans are developmentally wired to pursue highly stimulating behaviors that provide large neurologic rewards. This triggers increased risk-taking behaviors to fill a young person's developmental drive for stimulation. By adulthood, the brain's prefrontal cortex develops enough to guide self-monitoring, error correction and impulse control. But this "behavioral brake system" doesn't mature until about age 25, leaving adolescents unskilled at self-regulation and less deterred by risk than adults. Drug abuse during this critical developmental period makes an adolescent's reward center particularly vulnerable to changes that can result in the neurologic disorder of addiction.

Adolescents may use opioids not only for stimulation, but also to reduce stress, peer pressure, and social or family anxiety. In the late 1990's, our culture began to make prescription pain medications more accessible. Easy availability in the family medicine cabinet combined with the perception that doctor-prescribed opioids were safe increased our risk for opioid abuse. Unlike 1970's heroin, which had to be injected intravenously, opioid pills are swallowed. By the 2000's, the purity of heroin had also increased, allowing users to smoke or snort it, further increasing ease of use. This paved the way for crossover from pain medications to the greater high of cheap street heroin and fentanyl products—even among young users.

Opioid prescriptions for adolescents and young adults nearly doubled from 1994 to 2007. And while the majority of overdoses still occur in adults, 50% of adults with drug use disorders began using before they were 18 years old—a phenomenon known as "adolescent onset disorder."

In 2016, 3.5% of American adolescents and 7% of emerging adults abused opioids. L.A. CADA urges adults to monitor the family medicine cabinet and become armed with facts to better prevent adolescent opioid abuse. Personality changes such as irritability and withdrawal from social or recreational activities, failure to fulfill school obligations, and the withdrawal symptoms of diarrhea, sweating, and moodiness can indicate an opioid problem.

"I was raised by the streets."

Henry Bouchot, City of Whittier Councilmember

Erik is originally from South Central L.A. where he shared a single bedroom with his mother and four siblings. His mother was constantly working and Erik explains that he got his attention from street life.

Eventually, the family moved to Rialto and Erik was already using by then. Paranoid while high, Erik carried a gun and ended up on probation by age 17. When he learned his girlfriend was pregnant, Erik turned himself in and was sentenced to ten months in a group home.

He tried to clean up his act, but when his baby daughter died, he started self-medicating with alcohol and weed. Not long after, another child was born. Erik again tried to go straight. He got married, found a job, rented a place, had another child, but his drug use continued. His wife eventually left him, taking the kids with her. His drug use worsened. "Being from the hood," Erik says, "you push down emotional pain. When they left, that pain came back ten times harder. I used drugs to cope with it."

Not wanting to move in with his mother, Erik chose the streets—full time. He'd sometimes sleep in park restrooms when he did sleep. High on meth, he could stay awake for days at a time. Using drugs to stay awake was partly out of fear. "Otherwise, you're vulnerable," says Erik.

Awake and high, "I felt like I was on top of the world." To keep up his appearance, Erik took "bird baths" in park restrooms. He had to stay in the "street game" and "make associates" in order to trade stolen goods and do other "unnamed things" to get high. He ended up contracting HIV and instead of getting treatment he took more drugs—that's how bad the cravings were. Alone now, Erik was "perfectly fine dying." He no longer had any contact with his family and his children were kept far away from him. That's when Erik entered **Allen House**, a residential inpatient rehabilitation center in Santa Fe Springs run by L.A. CADA.

Sober five years now, Erik manages a Jiffy Lube service center. "The best time getting high doesn't compare to the inner peace I feel now," Erik says.





From A(rt) to Z(umba): DTLA MINDFULNESS WORKSHOPS

Charles McWells, Community Services Manager

“Zumba? What’s that got to do with recovery?” If we could read the minds of our clients, that’s the question many of them would be asking the first time they take one of the **Downtown L.A. CADA Mindfulness Workshops**. For the past two years, clients have had the option of participating in twice-weekly workshops that include yoga, meditation, art therapy, line dancing, Zumba, nutrition education, HIV 101, and other topics.

The idea behind the workshops is that clients’ recovery prospects are enhanced if they are exposed to a wide variety of healthy life-change experiences. “Research shows that whether they engage in therapeutic sessions like meditation and yoga, or educational workshops like nutrition classes and HIV 101 workshops, people in early recovery are positively impacted by learning ways to reduce stress and have fun without the use of mind-altering substance,” suggests L.A. CADA Community Services Manager **Charles McWells**.

After participating in a few workshops, most clients would agree. To make participation even more fun, clients are given a “passport” that lists workshops scheduled for the current calendar quarter. Every time they attend three workshops, they receive a Subway gift card. Some clients like the workshops so much that they continue to attend them after they complete their enrollment in the DTLA Outpatient Program. In fact, the workshop line-up is so popular that clients from **Project 90**—the HIV prevention program that shares space with Outpatient—also attend the classes.

Beginning in July, DTLA L.A. CADA will experiment with “exporting” Mindfulness Workshops to other L.A. CADA sites, as well as to partner agencies. The first step in this next phase will take place from July through September when monthly workshops will be offered at **God’s Property** in South L.A. and at L.A. CADA’s **ART House** in Pasadena.

After 365 Days of Sobriety CONTINUED FROM PAGE 7

means necessary. I did a lot of personal inventory during my stay, growing and maturing consistently. My determination to succeed was transparent and I was asked to act as the male House Liaison during my last weeks of treatment. After 60 days in Uhuru, I was finally informed that a bed was waiting for me at ART House.

I have now been at ART House for approximately 90 days. It has been the perfect stepping-stone, allowing me to express myself and find my passion, while providing me the stability of a home and continuing to teach me basic life skills. During my time at ART House, I’ve completed a two-week peer mentorship program with L.A. CADA and have been to Sacramento twice for Advocacy events, lobbying at the capitol to restore rights to those who have served their time, and to eliminate so many barriers that we face after being released. These experiences have humbled and reminded me how important it is never to forget where I came from and to take pride in how far I have come.

While in Sacramento I made sure to network. This action landed me a temporary position as a **Community Organizer** at **Community Coalition** in South Los Angeles. Although I enjoy civic engagement,

I have decided my heart lies in the field of recovery—giving back to a program that saved my life mentally, physically and spiritually. I have recently celebrated 365 days of continued sobriety and life only continues improve.

START provided me the grassroots for success by ensuring I had a successful rehabilitation and would not be a contribution to the recidivism rate in Los Angeles County. Upon my exit from ART House, L.A. CADA asked me to join their staff. START found me at my worst and L.A. CADA’s team shaped my future into one I could never have imagined! I am forever grateful and can only repay them by accepting their offer and giving back what I have been given.

There is no royal road to anything.
One thing at a time, all things in succession.
That which grows fast, withers as rapidly.
That which grows slowly...ENDURES!

L.A. County Awards L.A. CADA \$2.3 Million in Recovery Bridge Housing

Bill Tarkanian, Director of Program Development

Recovery Bridge Housing (RBH) is how the **County of Los Angeles** characterizes sober living residences aligned with County funded treatment providers. In the past fiscal year (2018–2019), L.A. CADA operated several homes housing up to 40 persons, utilizing approximately \$600,000 in RBH funding. This upcoming fiscal year (2019–2020), the County increased L.A. CADA's funding for Recovery Bridge Housing by more than 300%, to \$2.3 million. This dramatic increase in funding allows L.A. CADA to provide this vitally important transitional housing to as many as 140 adult men and women at any time, and more than 300 every year.

In order to qualify for RBH funding, a client must have a diagnosable substance use disorder, for which they are in outpatient or intensive outpatient treatment, be homeless or at-risk homeless, and fit one of the following priority populations: 1. Pregnant; 2. Post-Incarcerated; 3. HIV Positive; 4. LGBTQ; 5. Transitional Age Youth (18–24); or 6. Identifiable High Utilizers of County Services.

Many of the RBH participants are step-downs transitioning from the residential level of care. Others come from jail or other in-custody settings. They are afforded an initial period of 90 days of housing and, subject to certain requirements, can apply for an additional 90-day stay. The housing is provided to participants for free, and the residents are allowed to keep earned income or gov-

ernmental benefits and save for their own independent housing.

This past year, L.A. CADA had 18 beds for men at the **HOW House** in Whittier, 18 beds for the LGBTQ community at **ART House** in Pasadena, **and four beds for women at Victoria's House** in Bell. The 40 beds were continuously kept full—a highly desirable commodity—especially for participants at our residential levels of care.

This upcoming year, L.A. CADA is looking to double the number of RBH beds for the LGBTQ community from 18 to 36, and to find housing in the East Los Angeles area to house L.A. CADA participants in treatment at L.A. CADA facilities in Santa Fe Springs, Downtown Los Angeles, and our field-based service sites at **Via Care** (East Los Angeles) and **Homeboy Industries** (Downtown Los Angeles). Additional RBH Housing in or near the Downtown Los Angeles area and in the Southeast portion of Los Angeles County are various other possible RBH sites under current consideration.

According to L.A. CADA's Director of Program Development, **Bill Tarkanian**, the goal is to house up to 140 participants in Recovery Bridge Housing before the end of the calendar year, and up to 300 persons over the next 12 months. If this goal is realized, L.A. CADA will become the County's largest provider of Recovery Bridge Housing in Los Angeles County.

Project 90 Prepares to Launch Health Ambassadors

Charles McWells, Community Services Manager

"Once you've been healed, go out and heal somebody else." – Maya Angelou

"Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics."

–Alcoholics Anonymous, pg. 89

As of 2016, an estimated 61,000 people were living with HIV in Los Angeles County, approximately 14.2% of whom were estimated to be unaware of their infection. L.A. CADA is preparing to initiate a program that will address the HIV epidemic on the disease's front lines. The new program will be launched by Project 90. Project 90 is an HIV and hepatitis C prevention program for substance using African American and Latino men who have sex with men and transgenders. The project is funded by the federal **Substance Abuse and Mental Health Services Administration**.

The new program will enlist a team of 15–20 previously high-risk HIV-positive and HIV-negative recruiters. These **"Health Ambassadors"** will be provided with training to enable them to conduct intensive HIV prevention street outreach. Ambassadors must have completed the six-month enrollment in the Project 90 intervention

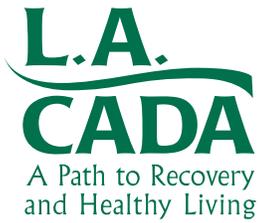
and then complete a two-week training on HIV education and outreach techniques. Ambassadors will engage contacts by talking about their own experiences with substance use and HIV risk behavior.

Health Ambassadors will receive stipends for each outreach engagement that results in an enrollment in Project 90. Funding for the incentives will come from a grant provided by the **Living into the Future Founda-**

tion, a division of the **California-Pacific Conference of the United Methodist Church**. Ambassadors can also receive incentives for making up to four public prevention presentations. Potential presentation sites include substance use disorder treatment facilities, HIV prevention programs, high schools, and churches with HIV ministries.

The Project 90 Health Ambassador program closely mirrors a similar program created two years ago by **Strength for the Journey**, an empowerment retreat supported by L.A. CADA.





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DATES	FACILITATORS/SPEAKERS	TOPICS
August 30 12:30–4:30 pm Bloomfield Wellness Center	Bob Tyler , BA, LAADC, CADC II Compliance Officer, L.A. CADA	<i>“Law and Ethics for Addiction Professionals”</i>
September 27 12:30–4:30 pm Long Beach Training Center	Bill Tarkanian , J.D., L.A.A.D.C. Director of Program Development, L.A. CADA	<i>“Treatment Planning and Engagement”</i>
October 25 12:30–4:30 pm Bloomfield Wellness Center	John Carlos Fabian Administrative Director of START Program In-Custody Treatment at Men’s Central Jail Diana Feliz Oliva , MSW HIV Community Liaison, Gilead Sciences, Inc.	<i>“Healthy Sexual-PrEP and Pep”</i>

TRAINING LOCATIONS:

Long Beach Training Center
Bloomfield Wellness Center

5861 Cherry Avenue, Long Beach, CA 90805
11015 Bloomfield Avenue, Santa Fe Springs, CA 90670