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How To Help

Foreword

By Dr. Jerine Griffith

Manager of Clinical Services, Clinical Supervisor, Clinical Psychologist



Addiction does not discriminate; it destroys the lives and wellbeing of both men and women. In this edition of *Renew*, the entire magazine will be devoted to issues surrounding women, mental health and addiction.

Historically, matrifocal societies such as Barbados and other countries of the Caribbean, place women in the central role of raising the children and being the stability of the family unit. The role of “mother” and “caretaker” often extends outside of the immediate family to include extended family, friends and neighbours. Thus, the impact of substance abuse and addiction becomes multilayered.

Current research has indicated that women with addiction and mental health disorders are impacted differently than men. For example, the psychological and physical effects of drugs and alcohol on women are often more severe. Unfortunately, the disease of addiction is often misunderstood, and is generally perceived to be controlled by choice, willpower or moral values. With regard to women, this misperception is amplified because of society’s general expectations of women.

Too often women who struggle with addiction are viewed as women with loose morals who do not care about their children. They are berated and stigmatized. These and other factors present real barriers to treatment that men do not necessarily have to contend with to the same degree. Some of the barriers to treatment are understandable: lack of child care and family support; fear of losing custody of one’s children; bearing the burden of stigma of substance abuse and mental

When one weighs the perceived barriers against the perceived gains, the decision to enter treatment becomes much more complex.

illness and; fear of losing one's jobs and the ability to take care of oneself financially. When one weighs the perceived barriers against the perceived gains, the decision to enter treatment becomes much more complex.

In October 2015, through the very generous gift by The Maria Holder Memorial Trust, women in Barbados and the Caribbean now have access to residential treatment. Marina House treatment programme takes a holistic approach to treat the whole person. The programme takes into account the issues facing women and their families, and it aims to reduce barriers and provide gender-focused interventions.

We trust that as you read through the pages of Renew 2017 you will find the information helpful in increasing your knowledge about women, addiction and mental health. We also hope that you will be moved to become an advocate for assisting women with addiction disorders seek the help they deserve! ▲

Women & Gender Differences in Addiction



By Janelle Chase-Mayers

Over the years, while working with women, I have heard several comments from professionals and the general populace that clearly shows the ignorance that exists amongst us with regards to women's issues and women's treatment in Barbados. Now this ignorance is in no way meant to hurl insults at people, but to stimulate interest in recognising that we really don't know much about the Barbadian landscape with regards to women and drugs in Barbados.

Ask yourself a few questions - what are the main drugs that are presenting for women in both outpatient and residential treatment? Where are the alcoholic female drinkers in our society?

Do we look at a woman that is using drugs as just having a drug addiction problem, or do we stigmatise her sexuality and her parenting skills?

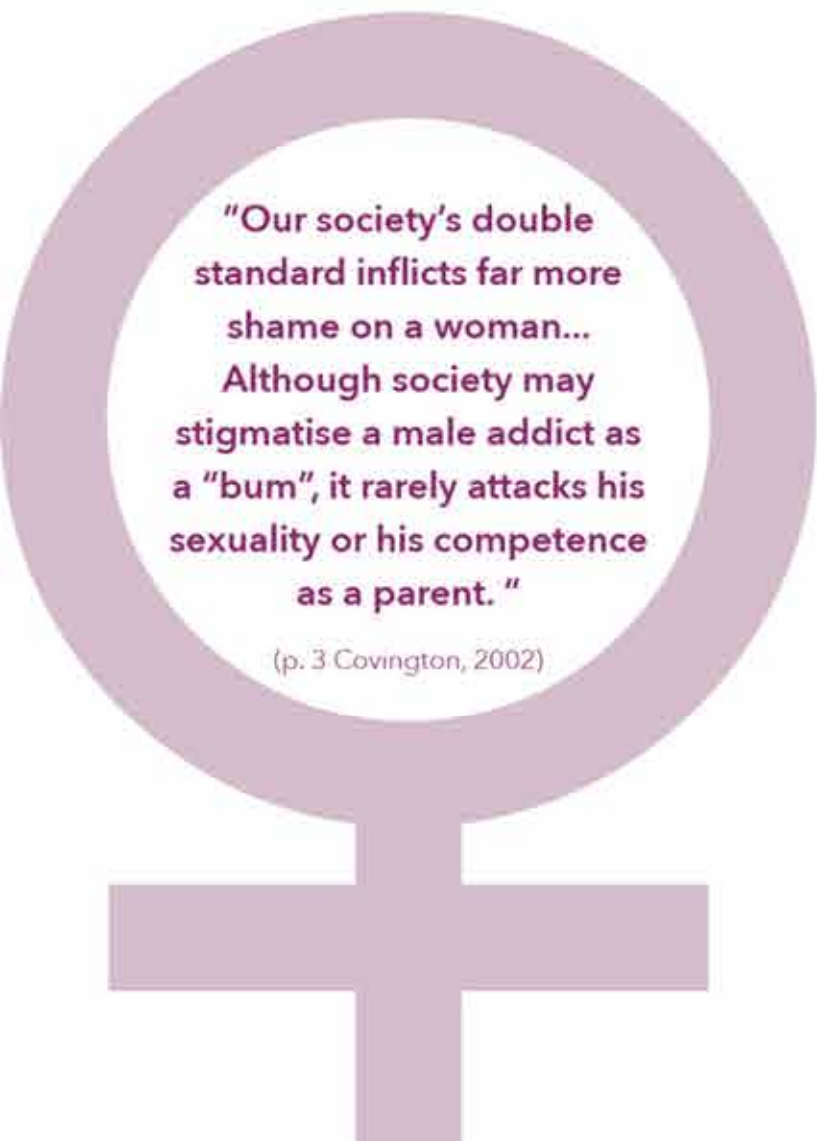
One of the world's renowned authors in women's treatment and addiction, states: "Our society's double standard inflicts far more shame on a woman who has an addiction than on a man who does. Although society may stigmatise a male addict as a "bum", it rarely attacks his sexuality or his competence as a parent. We must understand that a woman who enters treatment may come with a heavy burden of shame. She does not need to be shamed further; rather, she needs to be offered the hope that she can heal." (p. 3 Covington, 2002)

Her sentences are truthful and are food for thought in a society where women's issues are not discussed because the infrastructure is not always present to have the discussion.

Her sentences are truthful and are food for thought in a society where women's issues are not discussed because the infrastructure is not always present to have the discussion. Today we can begin to look at some issues that are unique to women in treatment and deserves attention in order to have successful treatment outcomes. While treatment may appear to be a single construct of dealing with one's issues, namely addiction, with women, there are multiple layers that constitute her treatment experience.

Some of these layers include trauma, drug use as a means to creating and keeping interpersonal intimate relationships, parenting and child care issues, eating disorders, sexuality, grief and loss.

Women's relationship with trauma may be different from their male counterparts as research indicates that there are a few areas that exist that require more attention to be paid to women. Covington in her research identifies the common themes in the lives of addicted women as addressed by the United Nations in 2004.



"Our society's double standard inflicts far more shame on a woman... Although society may stigmatise a male addict as a "bum", it rarely attacks his sexuality or his competence as a parent. "

(p. 3 Covington, 2002)

"She does not need to be shamed further; rather, she needs to be offered the hope that she can heal."

(p. 3 Covington, 2002)

These areas include:

- ▷ *Shame and stigma;*
- ▷ *Physical and sexual abuse;*
- ▷ *Relationship issues – Fear of losing children, partner or needing a partner’s permission to obtain treatment;*
- ▷ *Treatment issues – lack of services for women, not understanding women’s treatment, lack of childcare services, long waiting list;*
- ▷ *Systemic issues – lack of financial resources, lack of clean/sober housing, poorly coordinated services (UNODC 2004).*

While addressing the issue of drug use, interwoven in the layers are understanding safety and trust, empowerment and mutuality in treating women. Women’s treatment must be considered to be in a safe environment and free from any type of harassment. Creating healthy boundaries between staff and clients can assist in creating safe environments for women attempting the treatment process. In women’s treatment the appropriate use of power is also a factor that is specific to the gender. How we encourage the staff and females to use their power, accounts for developing mutually respected relationships. The power can be used to help encourage healthy decision making, creating self-belief in personal abilities and engaging in dynamic interpersonal relationship that foster movement, change and growth.

Whatever the challenges that exist in addiction, the individuals, families and corporations should be aware that gender differences do exist. We do need to look at how we treat and provide women


with treatment versus how we treat and provide men with treatment opportunities. Women present with a myriad of challenges that are unique to their bodies, their familial relationships and the experiences in life. We must be aware and willing to provide them with the best care that supports and encourages their growth as a woman. △

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A single family member who is suffering from the disease of addiction affects the family.

Get her the help she needs at <http://thesafinc.com>



Dual diagnosis: A common phenomenon

By Pallavi Balkaransingh

The Caribbean society is generally considered to be a predominantly male dominated society, even though the women folk, usually being single parents, are left to bear and take care of the children, many a time even being the household breadwinners. In this regional scenario of gender inequality socio-economic and health issues affecting women are usually accorded backburner status and given less priority in the regions strategy for development. This is reflected by an absence of statistics on drug use and its effect on female mental health. Up to the latter half of the 20th century, attention was only being paid to male members of the Caribbean society on the use and abuse of illicit drugs but in more recent times, women are beginning to close that gap.

The U.S. National Survey on Drug Use and Health found that 11.5% of males ages 12 and older had a substance abuse or dependence problem, compared with 6.4% of females. Despite the smaller number, women tend to face tougher challenges. According to The Substance Abuse and Mental Health Services Administration (SAMHSA) 2014, scientists have discovered special issues related to hormones, menstrual cycle, fertility, pregnancy, breastfeeding, and menopause that impact women who use illicit drugs or overuse medication. Additionally, women have described distinctive reasons for using drugs, which include controlling weight, fighting exhaustion, coping with pain, and self-medicating mental health problems.

In the National Comorbidity Study, a nationally representative population study in the United States, about 41-65% of participants with any lifetime substance use disorder also had a lifetime history of at least one mental health disorder (Kessler et al., 1996). Comorbidity, which is also referred to as “dual-diagnosis” or “co-occurring”, describes two or more disorders or illnesses occurring in the same person. In this instance it would be a substance addiction alongside one or multiple mental health disorders. SAMHSA, regularly publishes studies exploring different causes, effects, and treatment options related to dual diagnosis and have indicated that more men than women are diagnosed with co-occurring disorders, but the percentage of females living with a dual diagnosis has increased in recent years. Between 1995 and 2001, the proportion of women admitted into dual diagnosis treatment programmes increased from 28% to 44%.

Unfortunately, there are no specific statistics on the extent of the addiction problem in the adult female population in Barbados or the Caribbean. Neither has there been research done on dual diagnosis. Since 2015, the clinical team at Marina House has come across five clients that have been admitted with dual diagnosis.

An interview conducted with a client admitted to Marina House Drug Rehabilitation Facility provided us with some insight into how Caribbean women might be impacted by dual diagnosis. This particular client’s primary drug of choice is marijuana and her secondary choice is cocaine. The client identified her first experience with

drugs at the age of 15 where she started off with marijuana and alcohol and then she was introduced to cocaine. Eight years later, at the age of 23, she was diagnosed with bipolar disorder and then at 25, she was diagnosed with Borderline Personality Disorder. These two mental health disorders were diagnosed by the Psychiatric Hospital in Barbados where the client went to seek treatment. The client feels that her drug use did not affect her mental health disorders, due to the fact that the diagnosis was made eight and ten years after she started using the drugs. The client describes her moods to be heightened. Especially while on marijuana but doesn’t see a change while on cocaine. The client indicates that she has no need to go back to drugs and has become more cognizant of her mood changes and behavior patterns since she has been undergoing treatment.

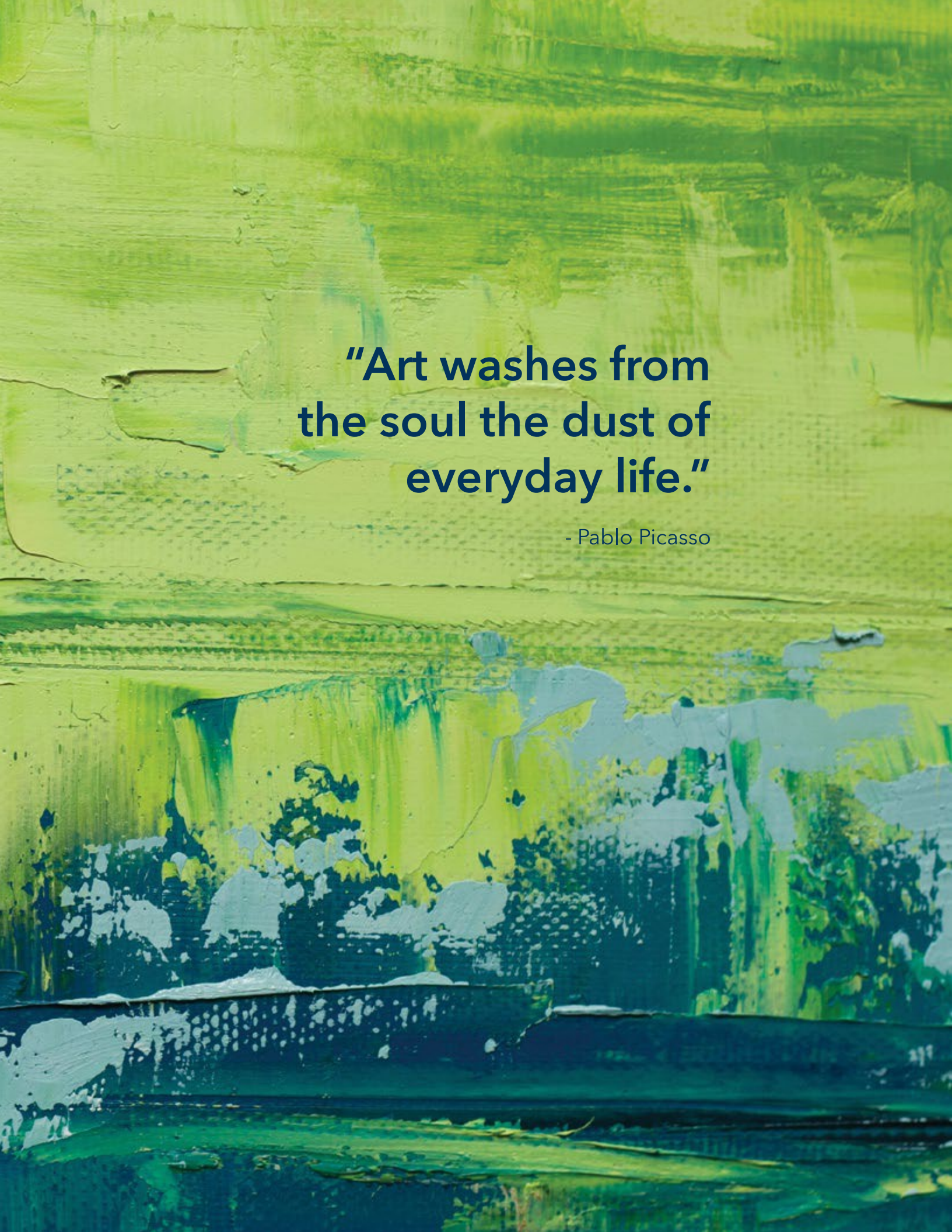
At Marina House the clients not only receives treatment for her addiction but she also receives education about dual diagnosis through The Substance Abuse Foundation Inc., Marina House seeks to address and treat similar cases with utmost care. It is in Marina’s plans within the next three years to gather and use statistics to contribute to research in this field which is specific to women in Barbados and the Caribbean.

file:///C:/Users/User/Downloads/WomenAndAddiction.pdf

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<http://www.hazeldenbettyford.org/articles/research/women-and-addiction>

The background is a vibrant, textured abstract painting. The upper portion is dominated by various shades of green, from pale lime to deep forest green, with visible brushstrokes and some areas where the paint has been scraped or layered. The lower portion features a mix of dark blue and teal, with white and light blue highlights that create a sense of depth and movement. The overall effect is one of raw, expressive energy.

**"Art washes from
the soul the dust of
everyday life."**

- Pablo Picasso

Recovery & The Family

A Daughter's Perspective (Unedited)

"How having a mom addicted to drugs affected life."

To take a trip down memory lane is what you sent me to do. To recall things which aren't in my thoughts. Anyways here goes.....

My mother often said I told her I would care for her when I was a child. Though I can't remember saying those words I lived them. Adopting a mind set to be there for my family's need has caused me to adapt to our every situation. Through it all I've been hurt, neglected, embarrassed, disappointed and deprived of enjoying my own life.

Before my mother's absence I would say life was good. My memories of her reveals a caring, loving woman. She would make sure we were fed. Vitamins (seven seas cod liver oil) was a part of our diet. We didn't go to church we went to the Kingdom Hall as she was a Jehovah's Witness at that time. She hosted and partake in family events thus sustaining good family relations. I could not miss a day of school unless I was sick. Trust me she knew when I was faking it. She would always say "I know when you are sick. I can see it in your eyes." Before I fully

understood what was happening with her or to her around age 9 she began to shun her responsibilities until she was skipping days from home. If I was to go further back in our past I can trace our moving a lot to her habit. My sister took on her role. Instead of her being at my graduation it was my sister. Her absence was felt.

Socially her lifestyle didn't impact my life to a great extent. My friend circle was always a few in numbers. However my friend's parents is another story. I had to learn to be contented with whatever state I was in. That became my thought pattern and soon my way of life. Life in her world was a different story. As a teenager visiting your drug addicted mother in a foreign place was scary yet embarrassing. After a few visits those feelings passed. I followed her almost everywhere she went.....so I knew where she lived, buy drugs etc. I walked proudly next to her because she's my mother. People respected me for staying by her side. I received plenty praise in this area.

Regarding my family I believe if she wasn't an addict our relationship could be better. Some say I blame them for not assisting her especially when she was sick. That can be debated. I knew I had to be wise and gain understanding. If they treated her so what would they do to me whose blood isn't that thick.

I'm a strong woman today because of what I've been through. God became my crutch very early shielding me from harm. My emotions were controlled from early (as I've mentioned earlier I had to be there for my family). The areas affected by my mother's habit would be my physical and social wellbeing. ▲



▲ Janelle Chase-Mayers

Women's Addiction Treatment:

A look at changing the family construct

By Janelle Chase-Mayers

Traditionally, Barbados is a matrifocal society, with women being the head of the household in terms of child care and guidance.

Treatment facilities have been dotted with individuals' need for personal care and personal recovery efforts. The state of women's treatment in Barbados was at an all-time low or one could say hidden in the shadows, as there was no physical treatment facility geared specifically to women. With the opening of Marina House, we have changed the landscape of treatment and now we are forever changing the landscape for women in recovery.

Traditionally, Barbados is a matrifocal society, with women being the head of the household in terms of child care and guidance. A woman's role in society is to rear children, creating opportunities for nurturance. A woman with an addiction is the starting point for

many societal challenges. If a mother is using, then the responsibility for child care begins to shift to the extended family. Now one may ask, why can't she take care of her child while she is using? First of all we must look at the type of drugs that we are seeing in treatment at the moment. Women are currently using alcohol, marijuana and cocaine. Women have a lower tolerance for drugs, based on their physiological make-up and any drug entering the system can be potentially hazardous to the woman. It is therefore important to realise that drugs such as alcohol and cocaine, can take a woman away from her home for extended periods of time, leaving the care of her children to other family members or the state.

When we start to look at the type of drug use we are seeing in treatment, one must then ask, are we having larger conversations about these types of drugs and women, or is it hidden in the shadows? Do we talk about the mother who is a raging alcoholic who only drinks in the comfort of her own home? Are we talking about the young mother who uses cocaine and disappears for days on end, while the family is frantically searching for her? While these are only brief examples, imagine the tremendous impact that they would have on the larger family construct.

Here are a few ways in which the family construct could be potentially challenged during drug use.

- ▶ *She would be spending more of her time using and less of her time parenting.*
- ▶ *If she is involved in a marriage, there is a new strain*

on the marital relationship.

- ▶ *While child rearing, there would be increased risk associated with drug use. The risk may include exposing the child to the drug environment, leaving children alone to seek drug use, or engaging in risky behaviours that could physically harm the child.*

- ▶ *Children may not be able to concentrate at school as a result of their mother's interactions, or the parents' interaction with each other.*

- ▶ *Children's emotional attachment may waver during the time of drug use.*

- ▶ *Husbands or partners may have a tough time concentrating and completing tasks at their workplace.*

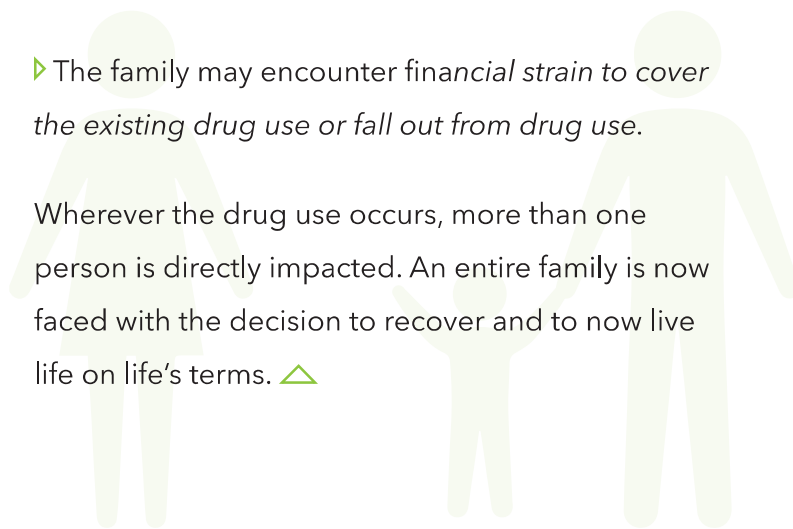
Grandparents may have an increased participation in child rearing from financial to emotional.

- ▶ *The productivity of the workforce is reduced significantly if more people have to take care of the children or family members have to take time off from work.*

- ▶ *The family may experience isolation from social activities.*

- ▶ *The family may encounter financial strain to cover the existing drug use or fall out from drug use.*

Wherever the drug use occurs, more than one person is directly impacted. An entire family is now faced with the decision to recover and to now live life on life's terms. △



Music Therapy in Addiction Treatment for Women

**“Understanding Resilience
through Lyric Analysis”**

By Sharon Moaze



To the average man on the street, lyrics are nothing more than a fancy term for WORDS. However, lyrics are special words because they are generally set to music and this is where the genius begins. Words set to music have a profound and stimulating impact on our subconscious. Their ability to stimulate thoughts, change moods and attitudes, enhance learning, and trigger memories can significantly and positively impact recovery within the treatment experience and beyond.

Virtues are notoriously multifaceted and resiliency is no exception. Dr. Maya Angelou stated that "courage is the most important of all the virtues, because without courage you can't practise any other virtue consistently". Therefore it can be said that courage is the birthplace of resiliency since it takes courage to do and be all that resilience demands.

Resiliency is defined as the ability to bounce back from adverse circumstances, better and stronger. It takes courage to choose to use those "bounce back" muscles and let's be clear about this, resiliency is a choice.

By now you're probably wondering what is the link between lyrics and resiliency, and furthermore, what is their connection to addiction treatment. However, the real question is - how does the use and analysis of lyrics cull our brains and enhance our understanding of resilience?

In addiction treatment, lyric analysis uses live or recorded music to listen to song lyrics to prepare for discussion and counselling. Thus, lyric analysis is able to teach the conscious and subconscious

mind concepts that promote strength in spite of adversity, courage in spite of fear and so on. All of which can lead to health and healing. Through lyrics that convey an understanding of the purpose of pain, clients are able to connect with their own inner strength and their own ability to fight back to health and consistent recovery. Lyrics, specifically those featuring resilience, can break through dysfunctional patterns of thinking and maladaptive behaviours.

*Music is the universal language
of mankind*

- Henry Wadsworth Longfellow

In this type of treatment, allowing clients to connect with their own emotions, fears and struggles by connecting with the same in others is key. Evidence has shown that women who stay in treatment and stay in recovery longer, do so because of a sense of connection. Using lyrical analysis in therapy helps to create this sense of connection that is so necessary for women. Johann Bari, a British journalist and author of "Chasing the Scream - The First and Last Days of the War on Drugs" proffers that what ails the addict is not the drug, but in fact, an inability to connect with others in healthy ways. By understanding and practising resilience through lyric analysis, self can be forgiven, hope of a different past can be surrendered and bright new beginnings can be grasped. △

Animal Assisted Therapy Gives Clients A Second Chance



At the start of this year, the counsellors at Marina House embarked on a bold and exciting decision to introduce Animal Assisted Therapy - a well-known technique in the counselling world, but a little used form of treatment in the Caribbean and indeed in Barbados. The earliest documented mention of Animal Assisted Therapy (AAT) within the therapeutic community was found in 1792 at the York Retreat in England where it was observed by the doctors that the animals aided in the socialisation of their clients (Serpell, 2000). In 1860, Bethlem Hospital followed the

practice of the York Retreat and added animals to their ward. Doctors there also observed a marked difference in the patients and noted that the morale was immediately increased. The therapeutic benefits towards patients who were physically ill were also noted during this period by Florence Nightengale in "Notes on Nursing" (Serpell, 2000). These early introductions of animals within the therapeutic community became the birth place of what was later coined Animal Assisted Therapy.

Marina House's introduction to Animal Assisted Therapy

began in January 2016 in an effort to assist one of our clients with reconnection. This reconnection manifested in the form of equine therapy where the client rediscovered her love of horses, a love that was lost during the throes of addiction. The weekly and sometimes daily treks to the stable

In 1860, Bethlem Hospital followed the practice of the York Retreat and added animals to their ward.

reawakened her long lost passion for riding and life. Although the client's physical health prevented her from riding, she indicated that being in the presence of horses made her feel alive again. The client's outlook on her treatment was immediately impacted in a positive way by her visits to the

...being in the presence of horses made her feel alive again.

stables and this was evidenced by the bond that was established between her and the horses.

After this first introduction to equine therapy, we decided to undertake pet therapy with our own puppy, Second Chance (familarly known as Chance) and so we partnered with the Hope Sanctuary and the adventure began. Chance's introduction into the peer group was immediately well received and the nurturing side of our clients surfaced or resurfaced during their interactions with him. Chance's presence allowed the clients to step outside of their norm and discover or rediscover their purpose as recovering addicts as they bonded with him. One of our clients stated that Chance gave her an opportunity to do the things she didn't do for her children. She further highlighted that this was

the first time in her life that she wanted to take care of "something without getting anything in return".

Research has shown that the benefits of animal assisted therapy in recovery include:

- ▶ Lower stress levels
- ▶ A reduction in anxiety and depression
- ▶ Lower blood pressure and heart rate
- ▶ Higher self-esteem
- ▶ The release of endorphins that have a calming effect as the act of petting produces an automatic relaxation response
- ▶ A reduction in feelings of alienation and isolation
- ▶ Improved/increased levels of communication
- ▶ The lifting of the patient's spirits
- ▶ A reduction in anxiety and boredom
- ▶ Increased motivation in the client during recovery

Based on the results observed at Marina House, there is no doubt that recovering addicts in particular can be helped by spending time with other beings who will give unconditional acceptance and love. △

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CREATIVE ART THERAPY

Art therapy can pave the way to clean living and a happy, healthy life long after the recovery process is over.

▶ Upper: Appreciating Marina,
Appreciating Me
- art creations by the clients on the
first day in session (4)



▶ Middle: Beauty from Brokenness -
Paper Mache Fridge Magnets

▶ Lower right: Affirmations in
Pyrography
- Wood Burnished Keyrings

▼ Below: Appreciating Marina,
Appreciating Me
- art creations by the clients on the
first day in session (1)



A Client's Perspective

(Unedited)

I admitted to myself that I was an addict a long time ago but I never thought to do anything about it. Now I'm at Marina House I have that opportunity. I've learned that addiction is a disease to which there is no known cure, it, however can be arrested at some point. I don't just identify myself as an addict but as a recovering addict.

Before I came to Marina House I was told that it was the best place to go to work on my addiction and also on other areas of my life that I had difficulty doing so in the past. This is now my sixth month and I have realized that what I was told was true. Marina House has turned my life around.


Upon arrival and during my stay I had a problem with aggression, in other words I dropped the drug but not the drugging behaviours. Through open discussion, learning to resolve conflict in group

therapy sessions and assertiveness classes including much needed practice, my aggression had been nipped in the bud.

The Counsellors who make every workshop, lecture and group session a learning experience are to thank for all the progress I've made in recovery. Along with the Psychologist and Psychiatrist who are available to clients on a weekly basis.

Family sessions are also available to assist those clients who may have been disconnected from family during drug use. Marina House has two phases. First there is Primary which lasts up to three months and then there is second phase or the 'half way house' as it is otherwise called, which is up to six months. The duration of stay if you complete both is nine months which can be extended for one year if applicable. In second phase you are given the chance to further your education or look for a job. Either way it is beneficial.

I've been given the opportunity to go back to school which I'm entirely grateful for and if I hadn't made the decision to come here my life would be stuck in a rut. I've learnt about 'slick' the voice that persuades you to use, and triggers and people, places and things. The tools you need to ensure that you don't regress or relapse in addiction.

Along with three square meals a day, regular exercise, yoga, an efficient twelve step AA/ NA programme and a magnificent view. If you are a woman in need of a place for healing from addiction then Marina House is for you. 

HIV in Recovery

This isn't the End

by Tonia Forde

A decade ago people believed being diagnosed with HIV was a death sentence and while this is no longer so due to medical advancements in treatment, HIV/AIDS remains a global concern, killing 1.1 million people (amFAR) in 2015 worldwide. HIV/AIDS attacks the body's immune system, resulting in dysfunctional

**HIV/AIDS remains a global concern,
killing 1.1 million people (amFAR)
in 2015 worldwide.**

organ systems. In 2015, 17 million people were receiving antiretroviral treatment (ART) worldwide or 46% of the individuals living with HIV. (WHO) Yes, people are receiving treatment and maintaining their livelihood. Medical management through medication has found a way to suppress the HIV virus, and also totally cease transmission from an HIV positive female to her fetus. Although the battle

is far from over, the future for a cure does look brighter compared to 20 years ago. HIV has no face, religion, identity, class, nor ethnicity, however it has had an impact on the drug culture.

What is HIV in recovery? Many women who abuse drugs are known to use their bodies in order to obtain the controlling substance, these activities are usually associated with many sexual partners and this increases the risk of STIs such as HIV/AIDS. Many women are ashamed to even discuss their past sexual practices due to the fear of being judged. This is where extreme sadness, hopelessness and suicidal thoughts - signs of major depression - are seen and this contributes to the vicious cycle of drug abuse. In recovery, basic concepts are analysis to ensure self-esteem and self-confidence

are restored. The ability to love your body's image and to view yourself as worthy is very critical for the woman who is now going to return into the community and become a productive individual.

The body operates as a unit for the brain needs the body and vice versa. HIV/AIDS has a detrimental impact upon the body as an entity, but with the assistance of modern medicine the virus is suppressed via medical compliance. For example, not only taking your medication as prescribed, but keeping your appointments, engaging in counselling sessions with your medical team, as well as ensuring the body's nutritional needs are met. In recovery, acceptance is key for growth, and the willingness to learn and understand any condition along with its management, can result in not only productivity,

but a more fulfilling journey. Looking and feeling healthy is not only a positive step, but it also brings families and friends closer and can facilitate healthy interpersonal relationships. Humans are social beings and there is a drive to socialise and be socially accepted. Therefore, a support system is not only beneficial for women, drug abusers, or HIV/AIDS victims, but every living person.

HIV in recovery means to abstain from the controlling substance(s), and simply do what other people are doing to stay healthy, possessing sound mental capabilities, providing yourself with a balanced diet, adequate exercise and rest, maintaining family, friends and work relationships, and taking general care of your health. A brighter future awaits anyone who is willing to grasp it with both hands and who is motivated to continue living in recovery with or without HIV/AIDS. ▲

Many women who abuse drugs are known to use their bodies in order to obtain the controlling substance, these activities are usually associated with many sexual partners and this increases the risk of STIs such as HIV/AIDS.

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<http://www.unaids.org/en/resources/fact-sheet>

Second Chance

Poem by Client
re Animal Therapy



When you arrived at Marina House
I heard your name is Second Chance
And from that day I saw you
You made my heart dance.

You put a smile on my face,
When I am down and lonely
Just thinking about you Chance,
Makes me holy.

When you were under attack,
Chance I had your back.
I will defend you to the end

Because Chance, you will always be my
friend.

I'm glad I got to know you
And things that we been through
You bring out the best in me
And I will never forget you.

You are my Second Chance
You taught me how to love
For the kind things I do,
And Jesus knows it's true.

You are my Second Chance
you taught me how to love

CHANCE

SAF NEWS

Exciting, New Chapter For Jacqui Lewis



▲ Jacqui Lewis
Director - Referrals and Community Liaison

We are excited to announce that after more than 16 years working for The Substance Abuse Foundation Inc. (Verdun House) in various capacities, Jacqui Lewis is now taking up her new role as Director - Referrals and Community Liaison. Over the course of her career, Jacqui has always been a critical member of the Verdun team - first as a founding member and Board member and then as an Addiction Counsellor.

Now, having relinquished the role of Clinical Director effective April 1, 2016, a position that she held for the last 12 years, Jacqui Lewis is poised to use her unique experience to help families impacted by addictions.

Starting out as one of the first members of the clinical team, Jacqui later took up the post of Clinical Director and managed Verdun House, the only male residential treatment centre of its kind in the English-speaking Caribbean Region. In this capacity, Jacqui, whose skills have often been described as unmatched in the treatment field, provided services in the areas of therapy and counselling, as well as addiction and chemical dependency.

Her pioneering work in the delivery of chemical

dependency treatment services and the treatment model adopted were supported by many years of international consultations, supervision and continuing education

...she has helped to mould several of her clinical team members into clinicians who stand tall among international clinical service providers.

by the most respected treatment centres in the United Kingdom (Action on Addiction) and the United States of America (Hazelden Betty Ford).

Over the years, her caring, non-judgmental and competent manner has served as a magnet for the individuals and families she has helped. Indeed, she has a long list of clients and families who often say they owe her an immeasurable debt of gratitude. Never one to be selfish with her experience and knowledge, she has helped to mould several of

her clinical team members into clinicians who stand tall among international clinical service providers.

All this and more will now be brought to her new role as Director - Referrals and Community Liaison. In this senior executive position she can now satisfy her insatiable desire to work more closely with men, women and families with several years in recovery through her Recovery Workshops. Her passion is to help individuals and families who need treatment to get it and this work will continue as she focuses more on providing intervention and referral services. In addition, to this Jacqui will extend efforts to assist individuals in the Caribbean region to access treatment services, having

“The role that Jacqui has played in the establishment of The Foundation leaves one breathless...”

Chairman and CEO
Peter Boos

worked with many of them from Barbados over the years.

In commenting on the move, Chairman and CEO Peter Boos had this to say: “The role that Jacqui has played in the establishment of The Foundation leaves one breathless. She has been tireless in her efforts, giving her time, energy and self, caring for clients and their families. Indeed, The SAF/ Verdun House has been her life’s work following her own recovery. Families impacted by addiction need a reliable and knowledgeable source to turn to when in need of support and guidance. We are proud to be able to make that service available through Jacqui Lewis whose experience in this field is renowned.”

Let’s open the next chapter of this unfolding book! △

The Substance Abuse Foundation Partners with the Barbados Literacy Foundation


Addiction is a disease that affects the brain and sometimes it affects individuals' ability to learn even the basic skills. Part of our treatment and integration programme at Verdun House and Marina House has been focused on providing clients with low literacy and numeracy competencies with the opportunities to acquire them. We know and understand how the absence of these skills can lend itself to shame and low esteem which can compromise healing and long term sobriety.

Recently, members of the Barbados Literacy Foundation (BLF) and their partners visited Verdun House and installed a micro-library

...Members of the Barbados Literacy Foundation (BLF) and their partners visited Verdun House and installed a micro-library at our premises.

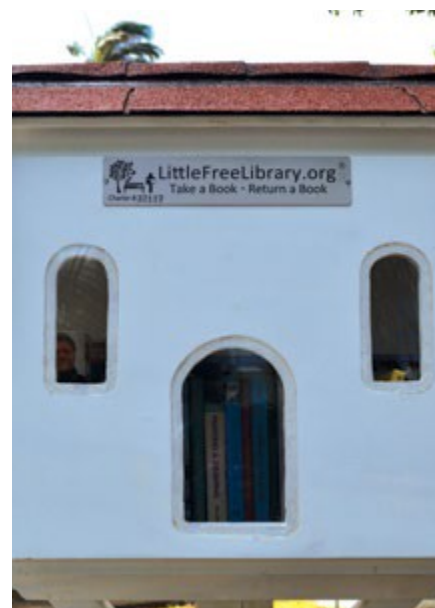
at our premises. This initiative is based on their mission of making books and reading accessible on a 24-hour basis.

On hand to witness the presentation were representatives from Chattle House Books who donated books and a representative from the Challenor School whose students were responsible for building the library.

Another example of making reading and learning accessible for our clients! 

◀ *Rev. Amrela stocking the Little Library*

▼ *Mobile Library*



The Foundation receives Drug Testing Kits

During a recent graduation ceremony of the first cohort of Drug Treatment Court (DTC) clients, a donation of computer hardware and software, multimedia equipment and urine testing kits were made to the National Council on Substance Abuse (NCSA). Some of the testing kits were distributed to other agencies and The Substance Abuse Foundation Inc. was one of the recipients. In this file photo Mr. Drew Blakeney, Director of International Narcotics and Law Enforcement affairs (INL) at the Embassy of the United States of America to Barbados and the Eastern Caribbean and colleague Mr. Robert McDonald made the presentation of some of the testing kits to Mrs. Ruth Parris, Admissions & Support Co-ordinator who accepted on behalf of The Foundation. ▲



▲ *Testing Kits Donation*



Meet a Volunteer

Dr. Lynne Forde

Why Volunteer?

My reason for volunteering came from a personal decision that, as a Christian doctor, I can interact with the clients and help them in their steps towards being healthy, not only as they go through their stages in Verdun House, but also after they leave. This includes a spiritual component as well as their physical, mental and social well-being.

Time Volunteering

I am currently there one day per week for approximately 3-4 hours.

What I did?

At Verdun House, I am a volunteer on the medical team. I have assisted the nurse when he needs help admitting the clients but more often I assist with the medical education answering questions from the clients or presenting on health matters that are topical. This is done in a group setting.

What was the impact on clients?

Meeting the clients in a group setting and answering their questions have given me a chance to know them and allowed them the opportunity to get to know me. This makes it easier to interact with them on an individual basis when we pass each other in the courtyard and in more social activities.

What I learnt?


There are training sessions by the staff to help guide the interactions with clients ensuring that we all work together and nothing is done inadvertently that may retard the progress of the clients.

Additionally, although volunteering is optional, it's still a commitment as the clients expect you when you say you will come. You need to be a person of your word.

Advice to others interested in volunteering?

The best advice I can give is to come and talk with the Counsellors in charge of the volunteer program, together you will see where you fit. Give it a chance, in addition to helping others, you will likely also learn more about yourself. Sometimes we can't always answer the "why am I volunteering" question at the beginning but by the end you will have a clearer, more honest answer. ▲

Verdun House volunteers are given the opportunity to give back to their community and contribute to the mission of helping addicted persons heal and return to leading healthy and productive lives. As a Verdun Volunteer persons are given the opportunity to enrich lives and achieve deep personal satisfaction, personal growth, and continued learning.



Please visit
thesafinc.com/volunteer
to lend a hand today!

DIAMONDS INTERNATIONAL

18th Annual Charity Golf Tournament, 2016



1) Bachellor Hall Team - Richard Thibaud, Ciara Cornic & Fabrice Cornic.

2) Cidel Bank & Trust Team

3) John & Joan Hargreaves with Dee & Bill Alexander

4) Peter Barette & Desmond Haynes

5) TD Reinsurance, Jason Holder and Charles Edey

6) BGA Junior Team with Richie Alleyne

7) Dee Alexander & Joan Hargreaves

8) Massy Barbados, Trevor Tasker & David Smith

9) Vicky Smith, Crohan O'Shea, Imelda Gleeson & Des Smyth

10) Russ Abott, Ricky Simpson, Rachel Ross & Les Hutchison

11) Williams Group, Tom Hall, Terry Hanton, Mark Linehan & Mark Young

12) Peter Boos - Chairman & CEO of The SAF

13) Runners Up, Donald Jackson & Guy Beauvais with Adline Lister of Diamonds International, Bill Longmuir of RWM and Pauline Tully SAF

14) The Winners, Richie Alleyne, Emily Odwin, Iz Hustler & Joshua Jones



11
12



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10





13
14





DIAMONDS INTERNATIONAL
CHARITY GOLF TOURNAMENT
SPONSORS 2016
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The Williams Group

Mr. & Mrs. Eddie Healey

Cidel Bank & Trust

Sir Martyn & Lady Arbib

Mr. Crohan O'Shea

Mr. & Mrs. Derrick Smith

Mr. & Mrs. Derek Crowson

Massy Barbados

Sagicor Financial Corporation

Mr. Charles Lewis



EVERY Gift Counts and EVERY Life Matters

Please support Verdun House and give others a chance for Hope and Recovery
Yes! I want to help addicted persons heal and live productive lives.

Enclosed is my contribution of:

- \$50
- \$100
- \$200
- \$500
- \$1000
- Surprise us!

\$.....

I would like to direct this gift to:

- Area of greatest need
- Educational Fund
- Medical Fund

Please make cheques payable to: The Substance Abuse Foundation Inc.



EVERY Gift, Big or Small, Counts and EVERY Life Matters

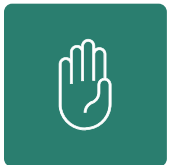
Please support Verdun House and give others a chance for Hope and Recovery
Yes! I want to help addicted persons heal and live productive lives.

I want to contribute:

- Professional Services
 - Stationery Supplies
 - Food supplies
 - Volunteer my Time
- Surprise us!

.....

Please make cheques payable to: The Substance Abuse Foundation Inc.



EVERY Gift, Big or Small, Counts and EVERY Life Matters

Please support Verdun House and give others a chance for Hope and Recovery
Yes! I want to help addicted persons heal and live productive lives.

I want to contribute:

- \$500.00 (Five for Life)
 - Covenant
 - Dollar-a-Week
- Surprise us!

.....

Please make cheques payable to: The Substance Abuse Foundation Inc.



Return Address

.....
.....



The Substance Abuse Foundation Inc.
Verdun House,
Pool, St. John
Barbados



Return Address

.....
.....



The Substance Abuse Foundation Inc.
Verdun House,
Pool, St. John
Barbados



Return Address

.....
.....



The Substance Abuse Foundation Inc.
Verdun House,
Pool, St. John
Barbados





HOW TO HELP

Every Gift Counts! Every Life Matters!

Annual Golf Tournament

Sponsored by Royal Westmorland and Diamonds International this is held around February each year and is a major fundraiser.

Covenants

Corporate and individual covenants are for a three-year period and both are tax deductible.

Dollar a Week

Employees, by signing the appropriate authorization ask their employer to deduct one dollar a week from their pay and the accumulated amount is paid over to Verdun House.

Cash Donations

Cash donations are always welcome.

Non-cash donations

Companies and individuals donate various services and supplies which are extremely useful to help us keep our costs to an absolute minimum. ▲




Marina

A place of healing from addiction,

Telephone: 246 433-3488 Fax: 246 433-0113

Email: info@marinahousecare.com

A project of
The Substance Abuse Foundation Inc.
a gift from

The Maria Holder  Memorial Trust





The Substance Abuse Foundation Inc.

Verdun House

Verdun, St. John

Barbados

Tel: (246) 433-3488 | **Fax:** (246) 433-5499

Email: info@thesafinc.com

Website: www.thesafinc.com



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