

The Peer Report

Our Mission

Dedicated to quality and accessible prevention and intervention services in workplaces and communities, focusing on substance abuse and related issues



Inside this issue:

Team Awareness Highlights	2
Introducing SHARE	3
TASC: Preventing a return to drugs and crime	4
PAS Supports Veterinarians	5
Drug Wars On My Mind	6
Board Members and Staff	7
Recovery Ambassadors Workshop	8



SO VERY MANY REASONS TO CELEBRATE!

1984-2004

What were you doing in April of 1984? Were you working where you are today? Have you moved at all in twenty years? Is your passion the same now as then?

In April of 1984, the founders of today's Peer Assistance Services embarked on a steep learning curve about the hoops and requirements of providing assistance services to RNs and LPNs with substance use disorders. Elizabeth Pace and Jackie Westhoven reviewed a videotape at the Technical Assistance Center about the finer points of incorporating a non-profit business. Over 25 nurses volunteered to be part of the founding board of directors. They began their work with a modest grant from the Alcohol and Drug Abuse Division, and maintained an office in a shared space at the Colorado Nurses' Association. Their initial focus was on peer assistance, by and for nurses, and the original agency name reflected that mission, N.U.R.S.E.S of Colorado Corporation . . . Nurses United for Recovery, Support and Education Successfully!

In the intervening years, they partnered with the pharmacist community and the Colorado Pharmacist Recovery Network to offer services, then the dental community and Concerned Colorado Dentists. To reflect the broader service targets, the Board of Directors changed the agency's

name to Peer Assistance Services, Inc. in 1994. Seeking funding, looking for opportunities to speak to others about helping health care professionals, and providing direct services to clients—those activities haven't changed much in twenty years. Nor has the advocacy for colleagues in need.

Yet on the other hand, a lot has changed. Science has identified many biological foundations for addiction. Services have expanded to include health care workers, new funding has enabled Peer Assistance to provide EAP services to small businesses in Colorado. And today the four Colorado adult TASC programs are administered by Peer Assistance Services. TASC is a program

(Continued on page 2)

Peer Assistance Services, Inc.
20 year Gala Celebration

Thursday, April 29, 2004
Seawell Ballroom
Denver Center
for the Performing Arts
1245 Champa St.
6:30 pm

For tickets and information, call
Metro Denver 303-369-0039
Toll-free 866-369-0039

(Continued from page 1)

that works with parolees to help them successfully re-enter their homes and communities, and stay drug-free.

Today Peer Assistance Services encompasses a strong prevention component—securing funding to provide parent and family education, and working with families in high risk areas and situations. So, there's much to celebrate.

This year's awareness and fund-raising event, titled "In Pursuit of Hope...One Life at a Time" recognizes that



big accomplishments happen one step and one day at a time, just like recovery. Six recipients of the annual Founders' Award will be honored for their ongoing and dedicated contributions to the fields of prevention, intervention and treat-

ment. Some memory-jogging fun is planned as we reflect on many of the significant events of the past two decades.

Lola Fehr, the Executive Director of the New York State Nurses' Association, returns to Colorado for a brief visit and to emcee this event. Lola has been involved with Peer Assistance Services from the very beginning, supporting our evolution in a variety of roles.

And to top the evening in a unique and meaningful way, we are delighted to introduce our special presentation, music and stories from the artists and songs of **SHARE; Songs of Hope, Awareness and Recovery for Everyone**. We know this is a not-to-be missed evening, and we hope you can join us for this fun, special, and very powerful occasion. For more details about SHARE, see page 3.

This Team is Going Places!

During the week of March 1st-5th, 2004, 16 individuals from various professions attended the Team Awareness Training of Trainers, a certifying educational event. Participants came from Colorado, Texas, Mississippi, North Carolina and Maryland. The session was hosted by Peer Assistance Services, Inc. and was partially funded by a grant from HealthONE Alliance. HealthONE Alliance is a non-profit community organization, improving health care through research, education and philanthropy.

At the conclusion of the training, Dr. Joel Bennett, presenter, stated that "It is exciting to see so many people prepared to begin implementing the Team Awareness program in their states and workplaces. The concept has so many applications. With their newly learned skills, trainers will create a significant return on investment for the employers they serve."



One of the participants remarked "I really feel prepared to approach businesses with the information we learned and tools we were given. The training was highly interactive and quite enjoyable. I look forward to developing Team Awareness within my own community."

How can a company benefit from the Team Awareness training? Team Awareness is a workplace prevention program that helps to identify risks before they become problems, and address problems before they become losses. Research on Team Awareness has shown that it can

- Increase employee help-seeking behaviors, productivity, teamwork, communication, and organizational wellness.
- Decrease absenteeism, problem drinking/substance abuse, turnover, and on the job accidents.

So if your business is looking to improve its bottom line and maximize the contributions of its most important asset, your human capital, give us a call today! (303-369-0039) We can help you locate a Certified Team Awareness Trainer.

SHARE

Songs of Hope Awareness and Recovery for Everyone



I N T R O D U C I N G

The Story of SHARE

What began as a casual, lunchtime conversation between friends about an essay by William Moyers, the vice president of external affairs at Hazelden, grew into a successful collaboration of professionals from the addiction field and the music industry. Their product? SHARE, a new country music CD containing a collection of 17 songs about addiction and recovery. They figured that since Nashville was a center of songs about “the bottle”, Nashville could also be a place of focus on recovery, and HOPE.

The Presentation

Features artists and writers from the album performing and telling the personal stories behind their songs - what it was like, what happened, and what it’s like to be recovering.

The Artists

Many famous musicians, including Martina McBride, Travis Tritt, and Kathy Matea, collaborated to produce this CD. The following artists will appear on April 29th:

- **Ashley Cleveland** is a contemporary Christian artist with albums on Atlantic and 204 Records. She has won Grammys and Dove awards, and travels all over the country playing in clubs and churches.
- **Marshall Chapman** is a blues rock singer from Spartanburg, SC. Her songs have been recorded by Jimmy Buffett and Sawyer Brown. Marshall has released many albums for Epic Records and her own Tall Girl Records. St. Martyn Press recently released a book of her essays called Goodbye Little Rock and Roller.
- **Billy Yates**, from Doniphan Missouri, is an acclaimed songwriter and performer. He had one hit Flowers from his own Almo Sounds album in 1997, and also wrote the classic Choices, a 1999 George Jones hit.
- **Blair Daley** has written three top 5 hits for John Michael Montgomery Angel in My Eyes, How Was I To Know and Hold On To Me. He is one of the writers of When Love Rules The World.
- **Kent Blazy** has written many #1 songs for Garth Brooks including Ain’t Going Down ‘Til the Sun Comes Up, If Tomorrow Never Comes, She’s Gonna Make It, It’s Midnight Cinderella, and Beer Run, a George Jones duet with Garth Brooks. He is one of the writers of When Love Rules The World.

The SHARE Mission:

To use Nashville’s music power to bring attention to the pervasive problem of alcohol & drug abuse; to raise awareness and funds through an album project; to use the funds from the album sales to benefit alcohol & drug prevention and treatment programs. All proceeds from the sale of the CD are used to offer grants to non-profit organizations that provide alcohol & drug treatment, innovative alcohol & drug prevention programs, alcohol & drug halfway houses & transitional living programs, programs providing services to family members affected by addiction.

TASC: Preventing a return to drugs and crime

The four TASC (Treatment Accountability for Safer Communities) programs in Colorado are initiating an effort to provide outreach and education to communities, especially parole boards, officers and managers, community treatment providers, community-based resources, case managers inside prison facilities, and other groups interested in the issue of incarceration and its relationship to substance abuse. TASC programs serve communities by working with released felons who have a substance abuse history, providing case management and monitoring services to prevent a return to substance use, and re-offense.

Substance abuse and incarceration is a critical issue for Colorado. Consider the following points.

- There are currently over 19,000 people under correctional supervision in Colorado (**includes** people in prison and in halfway houses; **excludes** people in county jails, on parole or on probation.) This is a **528%** increase in prison population over the last 24 years. During the same period, the state population increased **59%**. (Sources: CO Dept. of Corrections “Monthly Population Report,” as of November 30, 2003; CO DOC *Statistical Reports*; Census Data.)
- As of June 30, 2002, there were 3691 people in prison for a drug offense. This cost taxpayers over \$101 million annually. Approximately 50% were convicted of simple possession. (Sources: Colorado Dept. of Corrections. 2002, *Statistical Report for FY 2002* by Kristi Rosten (2003), 70. Colorado Dept. of Corrections, 2001, “Profile of Drug Offenders in Colorado Department of Corrections.”)
- In 1999, there were 16,761 adult drug arrests in Colorado. 88% were for possession (50% marijuana, 22% cocaine, 11% heroin). Only 11.5% were for drug distribution. (Source: Colorado Bureau of Investigation, 1999 State Adult Drug Arrests.)
- Over the past decade, the number of people sent to prison in Colorado for a drug offense has increased **476%**, making drug offenders the fastest growing and largest category of felons in prison. Between FY 1987 and 2001, the percentage of prisoners whose most serious offense is a non-violent drug charge quadrupled from 5% to 20%. (Sources: Colorado Legislative Council. An Overview of the Adult

At least eight out of ten men and women in prison need substance abuse treatment.

Criminal Justice System. Research Pub No. 452. 9-10. Colorado Dept. of Corrections, 2002. Colorado Dept. of Corrections, *Statistical Reports* (FY 1989 through FY 2002).

- According to the DOC, 82% of women and 82.4% of men in prison are in need of substance abuse treatment. (Source: Colorado Dept. of Corrections, *Statistical Report for Fiscal Year 2002*, by Kristi Rosten (2003), 46.)
- Substance abuse treatment is effective. In 1998, the Colorado Alcohol and Drug Abuse Division (ADAD) surveys people who had completed community-based substance abuse treatment programs. The findings showed:
 1. Within one year of completing treatment, 78% reported no abuse.
 2. Of those who had been arrested prior to treatment, 80% had no re-arrest after treatment.
 3. Unemployment dropped 41% after treatment.(Source: Colorado Department of Human Services, Alcohol and Drug Abuse Division, *Problems in Colorado: Characteristics & Trends*.)
- Substance abuse treatment is cost-effective. A 2001 report on Colorado substance abuse treatment found that community-based treatment ranges from \$400 (for education-based programs) to \$20,075 (residential therapeutic community) per patient per year—contrasted with \$28,828 to incarcerate someone. (Source: Interagency Advisory Committee on Adult and Juvenile Correctional Treatment, “Statewide Bulletin: Analysis of Offender Substance Abuse Treatment Needs and the Availability of Treatment Services” December 2001.)

TASC is a model of independent case management and system intervention, established in the United States in the 1970s. Since then programs have evolved differently in each state. Each of Colorado’s four adult programs offers screening and assessment of released offenders, treatment matching and service planning, treatment referral and placement, ongoing case management, and monitoring and reporting. TASC staff work in partnership with Parole staff to present a united front and comprehensive services for their clients.

PEER SUPPORT GROUPS

Call 303-369-0039 or 1-866-369-0039 for more information and location
Sponsored by Peer Assistance Services, Inc.
a Statewide Peer EAP



GREELEY

Every Tues 6:00-7:00 p.m.

BOULDER

2nd & 4th Tuesdays 6:00-7:00 p.m.

GRAND JUNCTION

Every Tues 5:30-6:30 p.m.

DENVER

Every Tues 6:30-7:30 p.m.
Every Fri 11:00 a.m.-12:00 noon

COLORADO SPRINGS

Every Wed 5:30-6:30 p.m.

DURANGO

PUEBLO

Every Mon 11:00 am-12:00 noon



VIRTUAL GROUP

2nd & 4th Weds
7:30-8:30 p.m.

THESE ARE FREE, CONFIDENTIAL, FACILITATED PEER SUPPORT GROUPS
for health care personnel and others recovering from chemical addictions and emotional problems
Partially funded by the Colorado Alcohol and Drug Abuse Division

ADDITIONAL RESOURCES: www.alcoholics-anonymous.org
A.A. Clubhouse Chat Room: www.billh.org/chatnow.html

12/03

Peer Assistance Supports Concerned Colorado Veterinarians

*P*eer Assistance Services is delighted to be able to support another health profession in its efforts to reach out to colleagues in need of help and support. Members of the Colorado Veterinary Medical Association have formed Concerned Colorado Veterinarians (CCV) to assist members of the veterinary health-care team deal with substance use disorders and mental health issues. CCV is composed of recovering and concerned members of the veterinary community who wish to help others in a return to wellness— before harm has occurred to the individual or to the patient, and before practice and license issues arise.



The purpose of CCV is to confidentially assist and provide resources to members of the community who are concerned about physical, mental or emotional problems in themselves and in their colleagues. While CCV members are not professional counselors they can provide intervention services and help in identifying the type of professional assistance needed. CCV will encourage members of the veterinary community, about whom caring others have expressed verifiable concerns of impairment, to voluntarily seek professional assessment.

Peer Assistance Services will provide support to CCV, offering assessment and referral, short term problem resolution, case management and monitoring, compliance reports, facilitated peer support groups, and 24 hour phone assistance. To contact Peer Assistance Services, call 303-369-0039 (Metro Denver) or 866-369-0039 (toll-free). To contact CCV, phone 303-318-0447.

DRUG WARS ON MY MIND

By Jackie Westhoven, RN, CARN, CEAP

Consider these victims of our current “war on drugs”.

- ▶ **Mary**, who hung herself in the bathroom because she was afraid to tell her parents she had a drug relapse.
- ▶ **Sue**, a nurse who died in a single car accident, leaving three young children. Her blood alcohol level was .10.
- ▶ **Kellar**, a pharmacist who drowned in his bathtub after an overdose of prescription drugs. He was found by his wife and daughter.
- ▶ **Mick**, a dentist, who died of a heart attack following cocaine use. Mick was dearly loved by his family and his patients.
- ▶ **Katie**, who died a slow and horrible death from emphysema at the age of 52. Katie was addicted to nicotine.
- ▶ **Jenny**, 15, who died after taking Ecstasy at a high school dance party. Jenny’s first use of the drug killed her.

By its very nature, war implies there will be killing. But it is not drugs that are killing our children, our parents and friends, our brothers, sisters, wives and husbands. What kills is stigma, anonymity and hopelessness. These things kill because they cause shame and embarrassment, keep people from seeking help or believing they even *have* the right to get help, and keeping prevention and treatment research and resources at the very bottom of the list. For those of us in the trenches of the so called war on drugs, not a week goes by that we don’t see the look of futility in the faces across from us— the lifeless eyes, the missing smiles, words without hope.

If our government must be in a war on drugs, let it be a war to end stigma, ignorance, anonymity and hopelessness. If our government is looking for terrorists or weapons of mass destruction (WMD), they need look no further. They are here, *within* our borders. Terrorists killed nearly 3000 Americans on September 11, 2001; alcohol and other drugs, including tobacco, took

the lives of over 500,000 Americans in 2003. Why aren’t we as outraged at that statistic as we are about the former? The United States consumes 70% of all the illegal drugs produced in the world. If we are really concerned about WMD, we have already found alcohol, tobacco, cocaine, oxycontin, vicodin, methamphetamine and ecstasy. We wouldn’t need a war if we devoted the same resources toward a cure.

Our doctors and nurses and pharmacists and dentists need education about the number one health problem in America. Helpers send our loved ones off to AA or NA to be “anonymous”. Is addiction a disease so bad it must be kept a secret? So bad you and your health care providers are powerless over it? Where is Diabetics Anonymous, Hypertensives Anonymous, Asthmatics Anonymous? Where is the addicts “race for a cure”, the telethons?

If you saw your child lying on the side of the road, badly injured, would you drive by because it looked too bad to save him? Or if breast cancer recurred, would you say to the victim and family, “there’s no more chemotherapy because you relapsed?” No one wants to become an addict or an alcoholic. It’s a disease like any other.

I hope for a time where I could go to a 12-step meeting and hear “Hi, I’m Bill Smith. I’m here for support, and hope, and to help others. I am powerful and with your help and my health care team, we will find recovery. I’m proud to be a member of Alcoholics United. I’m not going to be ashamed because I have an illness. I commend my fellows members for their courage and commitment to finding a cure.”

How could a war on drugs be compatible with a future like that?



Colorado Lead No Reason for Pride

Colorado continues to lead the nation in sobering statistics related to substance use and treatment. Treatment centers licensed by the state served approximately 54,000 citizens in 1992. In 2001, only 43,000 people were served. Over the same period, the state's population grew by 1 million, and substance use indicators continued an upward trend. Referrals to treatment centers, and access to services and programs have reduced dramatically, mainly due to the effect of severely reduced budgets. The Colorado Legislature did pass a law that reduced prison sentences for possession of drugs in small amounts. The money saved on prison is directed to drug treatment, estimated to generate \$2 million annually. Senator Ken Gordon, D-Denver, the bill's sponsor, acknowledged it was a start, but "we need tens of millions of dollars."

Colorado rankings

- #1 in marijuana use
- #2 in alcohol abuse
- #15 in overall drug abuse
- Methamphetamine deaths doubled in the last 5 years
- Treatment spending: 6 cents for every 100 dollars spent on substance abuse problems



Who Smokes More?

Nursing students, much more than medical students, according to a study published in the October issue of *Chest*, the Journal of the American College of Chest Physicians. 13.5% of nursing students are smokers, compared with 3.3% of medical students. And about 17% of nursing students and 10% of medical students considered themselves former smokers.

Staff and Board Members extend their sincere sympathies to Joann Adkins, Peer Assistance Services Founder and former Board member, on the death of her husband, Dewitt, in December.

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PEER
ASSISTANCE
SERVICES

Celebrating 20 Years

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We're on the web!
www.peerassist.org
www.codrugfreeworkplace.org



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DON'T LET OUR SILENCE DEFINE US

RECOVERY AMBASSADORS WORKSHOP ON MARCH 27

Introducing the First Recovery Ambassadors Workshop, hosted by Advocates for Recovery and the Johnson Institute and featuring Johnny Allem, President of the Johnson Institute. The Institute has been an innovator in the campaign against addiction to alcohol and other drugs for over 40 years; Mr. Allem is the author of *Speaking Out...For Addiction Recovery*. This national education program will help you become a force for change. Help remove the stigma and discrimination of recovery. Learn the power that comes from combining efforts with others. Gain the courage to apply your strength for good. Meet others who have similar concerns and experiences.

Sheraton Four Points Hotel-Cherry Creek

600 S. Colorado Blvd. Denver. CO

March 27, 2004 9am to 4pm

\$50 if you pre-register and \$60 at the door

Fee includes continental breakfast, buffet lunch, a copy of *Speaking Out For Addiction Recovery* and a one-year membership in Advocates for Recovery.

To pre-register: send a check of \$50 to Advocates for Recovery at PO Box 460176 Denver, CO 80246.

Additional information about Advocates for Recovery, the Johnson Institute, and the national Faces and Voices of Recovery campaign can be found at www.advocatesforrecovery.org, www.johnsoninstitute.org, and www.facesandvoicesofrecovery.org/