

NAME

Multiple Pathways MP3.mp3

DATE

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DURATION

19m 23s

2 SPEAKERS

Speaker1

Speaker2

START OF TRANSCRIPT

[00:00:00] Speaker1

The following is a message from WellSprings congregation. Morning, Kate. It's good to see you. I can always wonderful to see you.

[00:00:09] Speaker2

How are you doing today?

[00:00:10] Speaker1

I'm doing good. Thank you. It's nice, sunny day out there and not too cold.

[00:00:14] Speaker2

Yeah, at least it's bright, right? Yes. Yes. Well, I really want to thank you so much for joining us today and for lending your voice and your presence and your perspective to this message series we're doing on neighbors and helpers here at WellSprings. I thought I'd just kind of jump right in because this is about people in Chester County. I'd love to know a little bit about how did you come to live in Chester County? How did you come to live in this region?

[00:00:42] Speaker1

I grew up in Philadelphia, I was there for thirty one years, and my company, a pharmaceutical company in the city, offered me an opportunity to relocate to England, so I was there for five years. And when they relocated me back, they were moving me to the King of Prussia office and I was looking for places to live in Montgomery County and then came out to Chester County and fell absolutely in love with the beauty of Chester County and ended up purchasing a home here. And I loved it so much that they as soon as I bought my home, they relocated me back to the city and I did a commute for 20 years back and forth into the city. So that's how much I love Chester County.

[00:01:23] Speaker2

Hmm. So it's it's really home for you now. Like, there's really a sense that this is a place where you kind of find yourself and want to be.

[00:01:30] Speaker1

Yeah, open space is really important to me. I didn't know that I grew up growing to back to Ireland to work on my father's farm family farm and just loved it there and came to realize it was the open space that I love. And Chester County has a lot of that.

[00:01:46] Speaker2

As someone who is an Irish which traveled in the Republic a lot and has this red hair, I'm just going to ask you the next question. I always want to ask What what county is your family from?

[00:01:56] Speaker1

My father's mayo and my mom's Donegal.

[00:01:59] Speaker2

Oh, wow. I don't know Mayo so well, but I've been to Donegal and it's absolutely gorgeous.

[00:02:04] Speaker1

Yeah, Mayo is beautiful, beautiful as well. It's a rough rough. The west of Ireland there at Midwest is kind of rather cold and miserable. And but yeah, it's still a beautiful, beautiful area.

[00:02:17] Speaker2

Hmm. Wow. Well, you know, we could just we could just talk about Ireland the whole rest of the time, and I do have some other questions I want to ask you. So you and I got to know each other as villa people in long term recovery from substance use disorders and particularly through our work for like advocacy organizations. Can you tell me a little bit about how you came to that work and then how you got involved, perhaps in coaching as a result of that or connected with that work?

[00:02:49] Speaker1

Yeah, it's been. It's an interesting journey. I came. Well, I'm a person in long term recovery. For me, I haven't had any mind altering drugs substances since 1997. I was in corporate where I got sober there and I decided that I was not living authentically by being there, so I wanted to find what would be next for me. I was in my fifties and coming into my fifties and wanted to determine what was going to be next for me. What what would help me align my life more? And I was coaching as a leader, an executive at the pharmaceutical company. I was coaching people and I really loved it. And I thought, Oh, you know what? Let me get my hands at this, and I started coaching executives, spend all my spare time and professionals and turned out a lot of them were dealing with addiction and thought, Oh, OK, well, maybe this is. Maybe this is important. Maybe this is something that I need to look into, and I went to Villanova to get my certificate and alcohol and drug counseling and realized then as I was there, that counseling was not for me.

[00:03:58] Speaker1

I was much better of a coach. I'm a project manager by nature, so setting goals and accomplishing goals moving forward as opposed to I love you, always use an archeologist. I like to be the architect. I like to help people build things, take visions and put them into into play. So. So while I was there and realized that I was not made up to be a counselor, I found out about Pennsylvania certification for recovery specialist, which is very much so aligned to coaching a lot of similarities there. So as I was going through that training, I found Bill White. I found the anonymous people and it just turned me into this major advocate, advocate, activist, advocate by it and wanted to, you know, wanted to learn more. It made total sense to me that this was the right way to go in terms of implementing recovery oriented systems of care by the nature of what people need who are in in early recovery. So I know I might have answered more than we were asked.

[00:05:09] Speaker2

No, no, that's great. Actually, you just provided so many threads that I'm just going to now ask the follow up questions about so recovery oriented systems of care. What what does that mean to you? And you talked about Bill White or William White, you know, as someone who kind of introduced both of us into that way of thinking?

[00:05:29] Speaker1

Yeah. So for me and I'm not going to, you know, I'm not going to say that this completely aligns with what Bill was saying, but what I took from it. My interpretation of it was that. Each individual needs to find their own pathway to recovery. I was shocked when I watched the and honest people and saw the statistics that only 10 percent of people were getting recovery through AA when that's all that was ever given to me as part of my recovery journey. I never heard about any other avenue or pathway of accomplishing recovery and then came to find that the the highest percentage when I did the research, the highest percentage was natural recovery and like, what's natural recovery, right? So. So it really emphasized the importance of finding an individual's, you know, self defined pathway to recovery. And and it wasn't just about 30 day treatment. And then you're better. There's a whole lot that needs to happen post treatment that an individual needs, and it's beyond therapeutic clinical services. Some, some people just don't even have a place to live. How are they going to step stand up if they don't have the support needed in order to stay sober and beautiful?

[00:06:51] Speaker2

So yeah, that's a really important thing for me to always keep in mind. As someone who comes now, the majority of my professional time is directed towards clinical work, with a lot of people either considering recovery or in recovery, wanting to sustain the recovery that the clinical piece, the therapy piece, as much as I believe in it is just a piece. And so what I hear is you've got this really kind of broad, beautiful definition of what recovery looks like for a person that is about their individual kind, of course, through this life and through their life, and that it's not dependent upon one particular program, but helping you and I are both we call like multiple pathways of recovery people that there's a whole bunch of ways.

[00:07:39] Speaker1

So, so yeah. Yeah, and the four, sorry to cut you off there and the four dimensions Sam speaks about, right, which is the physical and and mental health. But then there's three others, which is purpose safe, place to live and community, you know, so you can't just treat the one dimension. There needs to be all four dimensions that need to be addressed.

[00:08:02] Speaker2

Awesome. So that's that's a lot of the work as a recovery coach that you're kind of focusing on with people in terms of, I think it's simple the Substance Abuse and Mental Health Services Administration, right?

[00:08:16] Speaker1

Something like that. Yeah, I

[00:08:18] Speaker2

Just wish they would take the substance abuse part out of it. And, you know, but it wouldn't be as good an acronym, but you know, calling something, you know, abusive. We know the research tells us, right, that it adds to that sense of stigma. So that naming piece notwithstanding their definition, that governmental organization's definition is really helpful when it comes to understanding right before the many dimensions of a person's recovery.

[00:08:44] Speaker1

Yeah. And you mentioned stigma, even the stigma that we use within the within the industry, the treatment teams, as well as the individuals right off our year. As I call myself an alcoholic, I don't call myself an alcohol anymore. I'm much more than just an alcoholic. You know, I'm a person in recovery from alcoholism and the word addict. You know, such derogatory terms of labeling somebody as something that is just a small part of who they are.

[00:09:08] Speaker2

Mm hmm. So you take this again, this really broad understanding of what matters to a person where they see the trajectory of their life heading and where they would like it to head. That's what I hear is at the heart of your coaching as someone who works with people in recovery. Correct. So in that I want to come back to one other thing you said, because so much of this language, even as a person in recovery at the time, kind of really became apparent to me through this, this movie that you mentioned a couple of times, the anonymous people I know for so many of us that introduce us as opposed to this idea that recovery is something kind of hidden away, you know, in certain meeting rooms or it's something that someone should have shame or stigma around that anonymous people. The Anonymous People documentary really kind of introduced me to the recovery movement and kind of opened up the field of recognizing that we can. I think the movie says we can recover out loud and how liberating and how contributing, how much that contributes to something you said, like helping people not carry around shame and stigma.

[00:10:21] Speaker1

Yeah, I mean, I I can ever remember, I've never sat down to do the math, but around 15 years in recovery and that that movie really broke through what little shame I had left. But shame still still this. This need to hide. And I think, you know, it was like, I'm. You know, to align it to, you know, being proud of, you know, who I am and what I'm dealing with and how I'm struggling and not allowing myself to feel I have to hide away anymore, like I love how you said that I don't need there's no need to hide. It's not a moral issue, right? I have a problem and I need to get help and I need and I need to. I need to represent that recovery works because everybody has this image of a person that is an alcoholic or a drug abuser as some lowlife in life. And that's not the case. There's lots of us of all walks of life out there.

[00:11:21] Speaker2

Yeah, there's a lot of stigma that people carry around this image. And and the truth is, all of us are so much more complex than being reduced to to an image or a kind of predetermined social construct. So actually, this then leads to this amazing thing that you did out of the anonymous people. You know, this is where I first started to hear words around recovery centered organizations, CEOs, and you're someone who has experience founding and leading in RCO recovery centered organization. Tell me what an Arco is and then tell me about your experience, if you would leading one, founding one and leading one for some time.

[00:12:06] Speaker1

Yeah. So remember, I'm coming at it as a coach, not as a clinician, so I don't quite understand all of what a recovery oriented system of care should offer. I mean, should, should, should be doing. But I certainly had a good understanding of what we talked about already, right? Many pathways, you know, lots of different service offerings, basic things like, well, big big big one community lecture nih around Chester County. There's not a lot of community when it comes to recovery. There's other, you know, celebrate recovery in those, but not, you know, large community efforts that are supporting people. So that's one of the things that I wanted to do is part of opening up and start to begin. It was it was not a true recovery organ systems of care because that should be much more kind of community led. It was private practice of coaches and therapists and massage therapists and vibrational therapists that came together to offer an enigma what we called an interdisciplinary interdisciplinary care. So what does that mean? What that means is that we each person that came into the center, they had the option to opt in to have all the clinicians, all of the coaches, all the other therapists be part of the team that oversaw the case understood what the individual was looking for, the client was looking for and then coming back with a recommendation of a pathway that they could utilize at the center or beyond because we weren't going to be everything to to that that person that they could utilize within the community to get well and be well.

[00:13:58] Speaker2

Yeah, you even you might remember a couple of times the brightening center of the organization you founded and led hosted our Mindful Recovery Group for for a couple of sessions. And you know, it was, you know, you mentioned some other pathways of recovery. I know that the center hosted 12-Step groups. It was the center that actually introduced me to my first experience of Dharma Recovery, a Buddhist and mindfulness based approach to recovery. So this idea of really multiple pathways, yes, there was absolutely the clinical therapeutic practice practice aspect, and there were also all these kind of pathways led by people in recovery themselves that were hosted by the center as well, too. So it really was this kind of hub.

[00:14:42] Speaker1

Yeah, yeah. So you're right. Refuge recovery at the time was the first one that seemed to be a lot of what we were hearing from the community of wanting a more non Christian based, more mindful led. And I had been doing that online for I think about two years. So it was just a natural introduction into the community and that really took off. I think there's three meetings in the area and now with that and then Lancaster Redding, so it really has spread out out on the side. It was really more popular down in the West Coast, but that is really helped many people get in and stay in recovery. We also had singing bowl meditations, we had mindfulness groups, we had yoga at the center as well. So lots of different ways that people could take advantage of and find their way to recovery.

[00:15:42] Speaker2

Yeah. And and again, in terms of that sense of it's not just about the individual, it's about, you know, communities that there were so many offerings there for family members as well,

[00:15:52] Speaker1

Too, right? Forgot about that. Yes. Yep.

[00:15:54] Speaker2

So so as someone, I think my last question today is as someone who founded and led this recovery centered organization, what are the takeaways you have for for anyone who is in search of an organization like this or might be interested in in saying, Hey, you know, we could use more of that in this community and in Chester County?

[00:16:18] Speaker1

Yeah. So my take away, if I had to to do it again, I was very naive coming into the industry. But now, after being in for 10 years and looking back, I would say that there needs to be a community effort among the people offering services in Chester County to come together to recognize that in order for us to truly serve our clients, we have to come together as a community and do that. We cannot be continue to work in isolation in our little pockets and so forth. We really need to come together to embrace this more self led recovery pathway for individuals that will require all of us. To offer what we do, but in a coordinated way. So I think that that that's the lesson learned for me. I would not have opened up the center until we had all that understanding because even at the center, a lot of a lot of the practitioners there struggled with the understanding of the concept. It takes work, takes a lot of effort. I'm not going to I'm not going to lie and say this will not take effort, but you got to move out of thinking in terms of billable hours and in terms of what does my client truly need.

[00:17:36] Speaker2

So, yeah, so what I hear is this what makes a recovery center organization really thrive is this sense of priority of the people you serve and a willingness to kind of change some of our systems. For those of us who are care providers to think in terms of kind of a sense of collaboration, cooperation, getting out of some of our silos.

[00:17:58] Speaker1

Yeah, that's exactly what I said. Yeah. Thank you. That's a good summary.

[00:18:05] Speaker2

Hey. So just in closing anything else you like to? Anything else you'd like to offer us? I just really am grateful for your for your time, for your experience. I know as someone who started something from scratch as well, too, that, you know, as as things change over time, the making sure we are handing over, you know, our pieces of wisdom that we've gleaned from the times that we've been involved. So that's really why I wanted to talk to you. So. Anything else you'd like to offer in closing?

[00:18:37] Speaker1

Yeah, no. Just hear if anyone you know, I'm in my sixties now. So I think that was my last run. But if anyone is interested in learning more about this or lessons learned from me or how to go about putting a plan together to accomplish it, it's still desperately needed here in this county, in every county. So I'm here. Reach out. Happy to help.

[00:18:57] Speaker2

Wow. And I'm so glad that you are still coaching individuals in our community as well, too, Kate. So I just really want to thank you for joining us today.

[00:19:06] Speaker1

Thank you for the opportunity, Ken. You're very welcome. Bye bye. If you enjoyed this message and would like to support the mission of WellSprings, go to our website WellSprings you.you. Org. That's WellSprings the letters you.you dawg.

END OF TRANSCRIPT



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