

NAADAC, The Association for Addiction Professionals  
RESILIENT FAMILIES: COMMUNICATION CULTIVATES ADAPTABILITY WITHIN  
FAMILY SYSTEMS

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>> SAMSON TEKLEMARIAM: Hello, everyone, and welcome to today's webinar on Resilient Families: Communication Cultivates Adaptability Within Family Systems, presented by Karyl Sabbath.

It's great that you can join us today. My name is Samson Teklemariam, and I am the Director of Training and Professional Development for NAADAC – the Association for Addiction Professionals. I'll be the organizer for this training experience. Caption Access is providing closed captions for this webinar. You can access the link to closed captioning by going to the e-mail that was sent to you most recently, or by clicking on the questions box or chat box for a link to use live closed captioning.

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Any questions that we do not get to we will collect directly from the presenter and post the questions and answers on our website.

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Let me introduce you today's presenter, Dr. Karyl Elizabeth Sabbath. Interpersonal & Organizational Consultant.

holds her Doctorate degree in Interpersonal Communication from Ohio University. She taught for 21 years at Otterbein University, was promoted to Professor in 2002, and retired with emeritus status in 2010. Sabbath served as an outpatient and inpatient counselor for seven years, was a Trainer of Trainers for the Ohio Chemical Dependency Board and worked as an organizational consultant. Presently, she teaches for Colorado State University Communication Studies Department. Her 1999 chapter in Communication in Recovery: Perspectives on Twelve-Step Groups examines communication styles of adult children of alcoholics.

NAADAC is delighted to provide this webinar, presented to you by this accomplished trainer and close friend of NAADAC. So Karyl, if you're ready, I'll hand this over to you.

>> KARYL SABBATH: Thank you, Samson, and I am pleased to be here. Hello, everyone. I'm really looking forward to this opportunity to join with all of you. And work through the first webinar of 2020 for NAADAC.

So before we consider the objectives and my overarching purpose for this webinar, I'm wondering if we can just touch base with all of you and find out who you are.

So, Samson, may I turn the first polling question over to you now?

>> SAMSON TEKLEMARIAM: Yes. Everyone, you will see a polling question launch on your screen in just a moment. This is one of the first of many opportunities to connect with your presenter. The question asks please share what your primary role is in your agency. You'll see five answer options there. I'll give you about 30 seconds or so to answer. Looks like half of you have already answered. Awesome.

We'll give you about 10 or 15 more seconds.

Very exciting. 75% of our audience has answered the poll. I'm going to go ahead and close the poll and share the results and turn this back over to our presenter.

>> KARYL SABBATH: Wow. So this is really exciting to see that there are many of you that are active with clients and in the recovery process on a day to day and just constantly working with individuals. So I'm pleased to have you here, because I am thinking that you are going to contribute a lot, particularly in some of the polling questions, but also in our chance to do some Q&A at the end of the webinar.

Welcome, everyone. And again, I feel honored to be working with you today.

As promised, let's move on to looking quickly at the learning objectives.

So this focus is going to be today on family. But there is connection here with positively managing stress of both recovering individuals and family members.

So that is my first objective. And secondly, to identify how communication is directly linked to that adaptability of building resiliency in family systems.

I have a background extensively in communication. And also, hinged with my work in treatment and recovery and training. And so I really am excited to talk about the ways that we can link communication in building resiliency in family systems. Lastly, to create linkages with our own communities. I'm sure that all of you being part of various communities and seeing the things that have strength, but also need more development in terms of encouraging support for families in recovery, and overall, a sense of resilience. I remember, before we move onto the content, I want to share just a couple of things.

One is the way that I see that I have mapped out the sequencing of this webinar is to first look at the stressful issues in families. We're going to then link that with ideas of resilience. We'll then connect those issues with the importance of belongingness and then move forward into community collaboration.

And you'll be hearing near the end of this webinar, the terminology of social capital and recovery capital. And this is exciting to me, because of some of the work that you might be aware of by William White. William White has been an advocate of community connections and addiction counseling and recovery counseling ever since the '70s. And he inspires me. And one of the things that William White does is looks at recovery community-building. And so here we go in relationship to stimulating our thinking towards reconnecting perhaps treatment to enduring processes of recovery. To building relationships between treatment programming and our communities. And even enriching the power of communities for long-term recovery processes, particularly for families.

So let's look at family stress. How about it, right?

So these pictures that I have pulled together are definitely examples of. And I could have done a hundred, right? Of showing the natural phenomenon of stress in multiple scenarios, such as extended family members becoming involved in our nuclear families. Illness or ways of arguing or conflict resolution that occur. Are children mimicking our conflict resolution strategies or mimicking the management styles we have for dealing with stress.

So primary disruptions are known to cause family crisis for a lot of different reasons. And let's just look at all four of these in overall comparison.

So these are some highlights that are found through the research that cause lot of family crisis. Of course, the death of a member of a family or the loss of a family member to just not knowing where they are, et cetera, can be devastating to the family. Returning family members or a new baby. Fostering a child or adoption.

An individual coming back from treatment or even from military service is going to add certain disruptions in a family that may put them in crisis. We hear a lot about shame, and that is certainly an aspect that the we should not just be thinking about in terms of individually. A family holds shame. And the way in which they hide or deny aspects of substance abuse disorders, a lack of support from members, or even, you know... betrayal through infidelity, et cetera, can cause this walking around with a whole family system of shame. Not only just the individuals. And all of this comes to fruit into some very devastating outcomes as noted on the last bullet point. And of course, we don't

even want to speak about, as a family, when certain of these aspects do occur or factors or results.

Suicide and prison and mental health disorders are oftentimes just shielded and not talked about.

So let's look at the other side. A family's coping capacity is definitely related to four factors. How many stressors a member has faced in the recent years. All of you know this.

The degree of role change in an individual. Becoming a new mom or a father, or an individual coming back from treatment, and what are their roles now, since they have been perhaps taking on lots of the responsibility of the family. Then some individuals don't want to give that up.

And it again adds stress to the family. Whereas others want to jump right in from being gone and being a primary part of the family. All that change is going to affect how members of the family cope.

Social support and institutional support are huge, and we're going to be talking about these a lot, because these ideas of what might friend group, my neighborhood has to offer. But also my connections with 12-step programs, or my connection with after-care, et cetera, are going to be social support systems that maybe, move into institutional support, but also can be seen as on a daily basis or weekly basis. If there's some connectedness with others.

So what I'm thinking about here is the importance of the pictures of the family stress and disruptions lets us consider the importance of resilience. So resilience, let's think of it as a path for creating a capacity to cope in the face of stress.

So the next several slides are going to be focused on resilience. I think that it's important first to just consider it as a pathway for having these capacities to cope.

So if we think of resilience in families and being an outcome of adaptability, then perhaps we can be looking at this rhythm, as I have chosen this citation from a couple of different authors. Looking at that rhythm through routines and rituals.

Being able to manage change. So without predictability or stability or even reliability in both the family system. Adults as well as children just have a real difficulty being able to adapt. If you can't predict, if you can't rely on others, that adaptation to stress is not going to be predictable, and it's not going to allow you to that I have a reason to adapt to what's going to come next. You know that old analogy in our field that waiting for the other shoe to drop.

Science tells us that some children develop resilience, while others don't. And I thought that it would be really important for us to talk about how this takes place. There are many factors that are involved in the building of resilience.

So let's take a look at how resilience might be visualized. So I had said before that some children have a capacity to be more resilient than others.

So protective experiences and coping skills can be seen on one side of a seesaw, and the negative outcomes can be seen on the other. So in kind of encapsulating all this, resilience then is when a child develops this ability to have resilience or a sense of being able to adapt under the conditions of stress. Even when the factors are really stacked against them.

So that there is both a biological and an environmental relationship here. Learning to cope with manageable threats is critical for the development of resilience. But it's not a simple picture.

One of the things that is going to impact this seesaw effect of, you know, the fulcrum is perhaps -- doesn't look as if it's really balanced, because there's so much more negativity. Maybe fear and stress and anxiety in a child or an adult's life.

And they're faced with all of this, but there are still some individuals, some children, who within the face of that, are able to have this biological resistance to adversity.

In addition to this aspect of building resilience, it's been shown that the biological resistance to adversity can't stand alone to equal resilience.

There also needs to be an environmental relationship. A strong relationship with important adults in their family and community are going to make a huge difference in how children are going to be able to adapt and build a more resilient outcome in their life. So I've made this notation for us to continuously remember that neither the individual characteristics or the environmental effects can create resilience alone.

So as our focus on child development is important, I wanted to make this notation clear. Because of the work that has been done in brain mapping and being able to assess what's going on with genetic coding, we have learned that the experiences early on have major manifestations for a child's future temperament, as well as their ability to handle stress.

However, the capabilities that underlie resilience can be strengthened at any age. I know that years ago when I started getting into brain mapping, I came upon a lot of good information that showed that we can recreate and we can build and reconstruct synapses, right?

And so that's why some of us, as we get older, we're doing a lot of crossword puzzles; we're listening to a variety of music, so that our brains are healthy and we keep on energizing, just like we exercise our exterior muscles, we also can exercise our brains. And so the capability of actually building and affecting our genetic coding system is miraculously, also, can be changed during adulthood.

And that's what's really important here, and this is where, actually, community, is going to align with science.

But first, we're going to move into some of the genetic differences.

So I'm going to give you this visual. Overall, from Harvard University center for the developing child, there's been a lot of research in the last 15 years on how experiences can leave a chemical signature. And experiences have been shown to determine how genes are turned on and off, or even if those genes are expressed at all.

Think about that. We inherit approximately 23,000 genes from our parents. Now inside the nucleus of each of the cells of our bodies, we have chromosomes. Of course, that is a familiar term for all of us.

And chromosomes contain the code for characteristics like the tendency to behave with anxiety. Or a person being predisposed to fear. So if chromosomes contain these codes -- the codes are the genes, OK?

So if you refer to this slide with the visual, one is presenting this external experience connection. And so what falls within that is positive experiences, exposing us to rich learning opportunities. So for children, if they are given many, many early childhood opportunities to expand their brain and grow in a healthy way. High levels of nutrition,

high levels of stimulation. Then those external experiences are going to assist in coding our genes.

The negative experiences come in the form of, of course, like for this webinar, I chose to focus particularly on family stress.

So toxic stress or even malnutrition are going to impact the gene coding as well.

So these positive outside experiences can change the chemistry that encodes the genes in our brain cells.

Now the change can be temporary or permanent.

In the last two years at the national NAADAC conference, more and more presentations have been looking at this scientific perspective of how biology is impacting our genetic coding system, and therefore, affecting individuals and how they are predisposed to building a sustainable recovery program or not.

So on the visual, on number 4, that epigenetic markers. That is really important, because those epigenetic markers control where and how much protein is made by a gene. And they turn on or off whether or not the genes are going to be active.

So what's important here? Well, genes are vulnerable then, to modifications caused by toxin stress. I mean they are also vulnerable to modifications caused by positive stress from the external environment.

One is always, always -- you know, positive affirmation from a very young age. That is going to affect some genetic coding. Providing nurturing and healthy experiences in our children's lives and in the lives of those in recovery is underscored here.

So the question is then, where do we go from here? We've talked about family stress. I've mentioned coping strategies and conditions. I'm sorry. Conditions. Under where individuals may have more of a tendency to cope or not.

And now we have looked at perhaps both the environmental and the biological impacts. So this is where the link between resilience and belongingness going to be connected. So if we are going to be resilient, as mentioned earlier, children are seen as only being able to do this and have an adaptive kind of temperament and skills to adapt to their environments, no matter how ugly or tough.

If they do not have at least one positive mentor, role model, family member that can offset the toxicity in our relationships.

So I wanted to focus here for a bit on what we can be talking about with why is this connection to belongingness so important.

Well, we're wired to connect with others. Goleman in his book -- I'm sure many of you have read, picked up, read excerpts out of Goleman's "Social Intelligence."

Well, both in -- emotional intelligence book. That text as well as the "Social Intelligence" one looks at the social brain and how the biological system in our bodies continually attunes us to, and in turn, becomes influenced by, the internal states of people that we are with.

To me, this is like, incredibly cool. Yesterday when Samson and I got together on a trial run for this webinar, he was kind enough -- one of the first things he said to me is, it's good to hear your voice.

And I believe I reiterated something to the same effect. Our voices impact other people. For instance, right now, because I can't be standing up doing different facial non-verbals for you, and you're only hearing my voice, it's really important for me to interject some energy so that you feel a little more connected to this.

And that is even like the synergy that can occur with being face to face with individuals and skin to skin, really does impact social brains.

I've got a little bit of an analogy. Well, I've got a hopefully clear analogy of this.

So I've seen this demonstrated. So if you will, just visualize.

You know what a metronome is, right? So a metronome is a mechanism, when I was trying to play piano when I was younger. There was a metronome sitting on the piano to assist me in staying in rhythm or keeping a certain beat.

So these mechanisms. Imagine that there are three of them. And on a board plank.

And those metronomes are not in sequence. All right?

So what has been done and shown with this interlocking of rhythm is if two cylinders are put underneath that board plank... and what happens is because of the metronomes clicking back and forth at different paces, that this board is moving on these cylinders. And within a very short period of time, what happens is that larger movement leads to each metronome getting in sync with one another.

So it's like all these different rhythms and then all of a sudden you hear click, click, click, click, click, click. And all of those are in the same connection. That's the same thing that happens to our brains.

We interlock and connect socially with others, and we are wired for this. And therefore, it allows us -- that's why a sense of belongingness is so important biologically for us, as well as for emotional wellbeing.

So with that in consideration, the most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent or a caregiver or another adult.

Again, this is the connection between how environmental factors affect our genetic makeups and development. And how we are wired to connect with others.

So now we're going to move into consideration of connecting community with family, and family with community.

So if we're going to think about this, what can communities do to strengthen social connections or prevent failures of adaptation. That's why I'm so impressed and affected by William White's work from a very -- I mean he started doing a lot of this stuff because of his on the ground work. His writing started focusing on how can we build these recovery communities, because seeing the importance of that there is almost a responsibility to collaborate with individuals and families. You know, if recovery is going to be sustainable.

It's one thing if we just keep our treatment facilities or our counseling sessions in a bubble, and we do not integrate our services.

All of you know this. Vast majority of you are in some kind of, from peer counselors to on the ground counselors to social work, et cetera. And a few of you nurses and doctors are of course, definitely in the trenches constantly with individuals. And you have seen that there is a huge impact of whether or not the community is connected. Are there resources; are there ways in which our services can be supported by other services?

So what we're going to be looking at is a new term. And that is the idea of social capital.

So I'm arguing here that communities can change to promote family resilience and individual resilience through this concept of social capital. Social capital is definitely

modifiable through programs that expand opportunities for social interactions among community members. And there's definitely differences in the cultures that we are part of in terms of how much social capital is available.

So hang with me here, because I'm introducing to look at the connection with community. I'm looking at three different types of social capital that are performed in communities.

OK? And so this is where we need to consider how -- what roles our communities play within terms of the resilience in family members and being able to adapt.

So bonding. As it's written here, these are ways to develop and sustain close relationships. These are our primary networks. So in terms of social capital, these are there strongest social connections we have. Our neighbors, our friends, our family members. But actually, they are the least valuable for social capital building. They don't give us a lot of output in relationship to building capital.

In terms of our social connections.

Bridging. This is a little bit more the -- the breadth of this is wider. This is individual families in recovery, connecting closer to shared experiences, but they are outside their primary network.

So I think a great example of this is individuals beginning to become involved in 12-step programs or wellness programs within their community. And they begin to connect with others that have some kinds of attributes or characteristics or experiences that are in common.

But without this social situation, they would never have met. And those bridgings are important, and they are a little less strong, as you know, than the primary network. But they are a bit more valuable, of course, in terms of building social capital.

You get now ideas from individuals from separate social networks.

And lastly, linking. This is the weakest relationships in our lives. OK? These are the connections with institutions and individuals that have resources to offer, services to offer. But these are the biggest bang for social capital.

They are the ones that will give access to power, access to resources. And so can you see how, hopefully, that this consideration of bonding, bridging, and linking for individuals in recovery and their families, to be able to construct and have aspects of these different levels of social capital, is really super important.

So consider the meaning of each, as we move into the following polling question.

Samson, you want to take over?

>> SAMSON TEKLEMARIAM: I'm looking here. Oh, there it is. OK. So yes. There's your polling question. It should pop up on your screen for our audience in just a moment. The question is asking do any programs in your community promote a sense of belongingness for clients and their families. The question asks which type of social capital is easiest to identify in your community.

It will launch now and give you three answer options there. There it goes. Looks like you guys are voting already. Thank you for interacting with our presenter, and also as another opportunity to interact, towards the end of the webinar, we will host a live Q&A. We've already got a lot of great questions. Please keep them coming for Dr. Karyl. Any questions you do have, as you send them into the questions box on your GoToWebinar control panel, we will answer them in the order received. The questions we don't get to, we'll post the answers online in a Q&A document. Also as another

reminder, if you are wondering how to get your continuing education hours for this training, go ahead and click on the handouts in the GoToWebinar control panel, and there's steps how to achieve that.

We're going to go ahead and close the poll and share the results. About 70% of you responded. And I'll turn this back over to Karyl.

>> KARYL SABBATH: Oh my goodness! This is like, I can't wait for Q&A! Because I want to hear how maybe some feedback on the linking relationships providing access to resources.

And so it looks like you're right on in terms of these ideas of that the community itself is probably not offering a lot of bonding opportunities, but more so in terms of bridging experiences and linking. Wow. That's really cool to hear.

So let's take the practical side of building social capital. And as we're moving into this final segment of our webinar, I'm going to relate social capital with recovery capital. OK. So you're going to hear me using this interchangeably, because I want us to get revved up about this. I want us to be thinking more and more about how building recovery communities is all about providing capital for individuals and families.

And thinking more intently on not having silos of just various treatment, programming, and community outreach, but that there's an interchange and an integration of these different services.

So when thinking about the practical side, let's consider the skill sets that family members and community members need, in order to be able to build these bonding connections more effectively.

Stepping outside of themselves and not just going to meetings and leaving right after and then getting in their car or getting picked up by a family member and leaving and really not building connections.

And then lastly, the huge building of social capital with accessing different sources of resources and power and interchange with individuals who are different from themselves.

And so with that comes an importance of having the ability to do this. This doesn't just come naturally.

So I'm bringing in a component here of family communication and family therapy.

Communication can be seen as a facilitating agent. So that if we are going to construct and support families that are resilient, this idea of social interaction and a sense of belongingness is going to be really important. But it can't happen without some skill sets.

And so my focus here is how can we support families and individuals through this facilitating dimension. We're really looking at some specifics here.

And that's my list. So let's go through these to be thinking about building the skills for connection. So these may be the real detailed, practical pieces that perhaps don't get integrated into moving your clients or individuals in a family to reinvest in their relational connections through skills of communication.

So the idea of not just hearing someone speak, but to listen with empathy and attentiveness. There's a huge difference of being present, as you know. Many of you in your professions, if you were not an attentive listener, didn't have an air of sympathy, but actually having emotional intelligence in terms of having empathy, is super important in relationship to moving forward in a relational way.

Speaking skills. Now we're not talking about public speaking here. We're talking about owning your own voice and not stealing the voice of another.

To be able to -- and this takes a lot of confidence. And if we were right now, we could jump back to slide No. 4 or 5, and look at the definition of resilience. And one of the things that within family stress is that resilience, giving the ability to manage with confidence.

This really does have a lot to do with speaking for one's self and not looking through your lens to speak for someone else. Self-disclosure. OK. So this has lots of different levels.

Of course that learning of boundaries and how much do I share about my relationships and how much do I share about myself. But also that if I have been a part of the family dynamics that denies and keeps silent what's going on with our family or an individual in our family, or whatever going on with maybe -- maybe relapse has occurred. And that self-disclosure never is shared. And so then we all know that the ability to sustain in the future, a recovery program, is going to be difficult if I'm so shamed by my errors of judgment. Or my weakness or vulnerability to the stress in my life.

That you know, I'm not sharing. So this is another communication skill. Tracking. This is the one that I struggle with all the time, right?

Staying on topic. But this is super important if we're going to go through conflict resolution and work through our conflicts. And begin to learn styles of conflict. Staying on topic and listening attentively and speaking for only myself.

And lastly, of course, this really hugely important one of giving respect and regard to others as we problem solve through the conflicts and having that. And that's not a typo. The affective communication is about sharing feelings and showing affect in your communication. That genuineness of that, through my facial expressions, through my voice, intonation changes. These are huge and they don't happen overnight. And if one has not been in an environment that they have role models to mimic this, then they're much more difficult to translate into adapting to the hardships in their own lives and building, of course, then, social capital.

So there's a final polling question coming up. And I'd like to get your feedback on your work and possibly the work that takes place in your communities. That maybe allows for practice and development of these types of skills. Samson, can you help?

>> SAMSON TEKLEMARIAM: Hi, Karyl. Yes. Just go ahead and move your mouse on the screen, and click on the screen, and you'll have control of that back.

>> KARYL SABBATH: OK. There we are.

>> SAMSON TEKLEMARIAM: Oh, OK. You'd like to go to the poll. OK. So yes, everyone. You will see the poll pop up on your screen in just a minute. Just to read the question for you. This is our last polling question. Question 3. It asks which of the following does your community offer to support clients and their families, thereby promoting practice of communication skills that enhance their recovery capital. It will pop up on your screen, and you should see -- yes, there it is -- three answer options popping up there. Primary treatment facilities involving family support. Community programming, facilitating pro-recovery activities. Or programs elevating the visibility of local recovery role models, access to recovery coaches, sponsors, and indigenous healers.

We'll give you about 20 more seconds to answer that poll. Looks like about half of you have answered. Thank you for that.

And for those of you who have sent questions in already into the questions box, awesome. Yours will be asked first.

But if you forgot or didn't hear our instructions earlier on how to send in questions, just open up your GoToWebinar panel. You'll see a questions box, and in just a little while, we'll have a leave Q&A with our presenter. If you're wondering how to get access to your CE, there is a handout in the handouts box. If you open up the PDF file there, you'll see some steps on how to get your CE credit at the end of the webinar.

All right, we'll close the poll with about 70% of you participating. We'll share the results. And I'll turn this back over to Dr. Sabbath.

>> KARYL SABBATH: Hello, everyone. OK. So it looks like -- OK. So family involvement in treatment seems to be the winner here. But also, community programming for activities.

That's really interesting. And programs elevating various role models within your community. So those are all important, and it's nice to see that nothing came up blank and that there are various ways that your community is involved in the -- perhaps, building of communication skills under those different conditions.

So we're not at the end, but we're nearly there. And as we wrap up, I would like to propose how communication as a facilitating tool is related to family resilience.

So there's quite a bit packed into this statement. So I've attempted to pull together various variables that have been a part of what we have discussed today. So when we see the entire picture together, I'm arguing that communication skills assist family resilience by expanding their social capital. And particularly, the bridging and linking to the sources for access to support and resources and a positive sense of social belongingness.

Now you see here, again, this term "recovery capital." So I would like to stimulate our thinking in relationship to, again, the link between building communication skills for families being able to be more adaptable to their environments.

And the only way that lot of that is going to be taught and learned and developed is through the bridging and linking to sources.

Now we cannot downplay the ideas of bonding, right? But communication skills are going to be essential in relationship to the bonding mechanisms that happen with across family members. What's happening in the neighborhood.

You know. It can be as simple as I'm in a situation that I am going to need to go for a job interview. But I'm a single mother. Now how do you orchestrate that?

There might be bonds in the family and neighborhood that are going to assist in support, but after a while, if there is no bridging and linking, the sustainability of those support systems are going to be difficult to maintain.

And our communities must align with the interlocking of taking responsibility for our families to belong to our community enough to actually build this recovery capital, so that they have access, and then they are able to practice the communication that's going to link them to support and resources and individuals with new ideas and new perspectives.

So during our Q&A time period -- now, we have a lot of time. So I'm about ten minutes ahead of what I had planned. But that's just perfectly fine with me.

So during our time, along with any questions or thoughts you might have, I'd like you to share any notes that you might have made about the polling questions 2 or 3. Because as you remember, they were objective questions. You answered A, B, or C, but there was a lot more to those questions in relationship to, perhaps, how those different ideas were brought forward in your communities.

So what I've done in this slide here is to focus on the overriding two questions that were covered in polling questions 2 and 3.

So as a culmination of this webinar, in building resilience and adaptability to family stress, and taking focus on community, I'm really interested in your ability, your thoughts. I would like to see your thoughts and feedback on ways your community enhances recovery capital for families and individuals in recovery.

And then also, examples of how practices of communication skills or/and a sense of belongingness, are supported in your communities.

Also, just by your own work. I'm sure that you have multiple examples of ways in which you have been involved with both building resilience, creating recovery capital in your communities that you are a part of.

And I am just -- I wish that we could have an open dialogue. But the Q&A will be good. I've added some references. So as you know the webinars are a permanent -- I don't know how permanently. Like for 20 years, I doubt it.

But you have access to the webinars. So if you ever just want to take a glimpse at the references that I have used, primarily. But also, I would like to extend the offer to use my LinkedIn or my e-mail address if you'd like to have additional questions beyond what you have sent in for this particular webinar.

Sampson, are we going to now move to this?

>> SAMSON TEKLEMARIAM: Yeah. Thank you, Karyl.

>> KARYL SABBATH: And I know you have some things to say as well. But we are a little bit ahead of time, aren't we?

>> SAMSON TEKLEMARIAM: Yeah. Thank you so much, Karyl. Actually, this is great. Interaction and engagement is a big part, and especially since a lot of our attendees live and work in states where they can use this as a live CE, versus an archived CE. So we appreciate the expertise you shared with us, and everyone, please make note of Dr. Karyl Sabbath's contact information on this slide.

We have a good amount of time for a live Q&A. We already have a queue of questions that may actually take up the rest of our time.

But for everyone else, please make sure to use the questions box in your control panel to continue sending in questions and feedback on the polling questions as Dr. Karyl asked earlier. We will answer them in the order received. If we don't get to your question, no worries. Within two weeks or less, a Q&A document will show up on the same website you used to register.

And we will start our Q&A now. So Dr. Sabbath, the first question comes from Rita, and Rita asks, has the environment change to constant use of technology changed resiliency development and capacity?

>> KARYL SABBATH: That's a great question, Rita. So changed it? Well -- OK. I started going in one direction in my mind. So Samson, can you reread it? So I actually address --

>> SAMSON TEKLEMARIAM: Sure. Rita asks has the environmental change to constant use of technology changed resiliency development and capacity.

>> KARYL SABBATH: Thank you. There's a couple of different angles for this. Number one, I'm always trying to reinforce the idea that I do not dislike technology.

We see that the use of texting, for example, and the use of social media, actually enhances the bonding and the connectedness of many individuals across geographic locations or far and close. As you can imagine, technology is assisting us in signing up for appointments and having access to certain institutions. Because I'm going to Google them and then connect with them.

And thank goodness we do have an advantage of multiple ways that technology is informing individuals. It allows us to get blogs, information from various blog connections. So all of those things.

But even in the interpersonal relationships. Texting is shown as a negative in interpersonal relationships in terms of beginnings or closing out of a relationship.

But the day to day texting can help in terms of are you going to pick up the kids, or am I? I look forward to seeing you tonight; should I pick up pizza?

Those have been shown time and time again, over the last five to six years, that those are helping sustain relationships. So that's a great way that technology is assisting us in terms of building resilience and adaptability. But there's the downside, the dark side. And that is because of the disconnect in interpersonal face to face, skin to skin, and voice to voice.

And so without that capacity and that balance to adapt to individual human being to human being, technology has infiltrated individuals to the point that they think that they can multitask and not, when it comes to the communication skills, not actively listen.

I can do three things. I can remember one day I walked into the classroom and I had forgotten something on the podium, and another professor was in the classroom. And I saw the student way back to the back. He had his laptop open to one window, his telephone open, propped up to another window, and then he was also shopping. So there was a third window. He was doing nothing that had any relationship with class.

But there's this idea that I can do all of this and still be present. And so that's the dark side. Thank you for asking that. That's a good one.

>> SAMSON TEKLEMARIAM: Yeah. Thank you, Rita, and Karyl, thank you for that answer. The next question comes from Larry who is joining us in Oregon. Larry asks does there need to be an equal to or greater than number of positive exchanges to outweigh the negative impact of trauma or stress?

>> KARYL SABBATH: No. So this is the positive issue that's related to all of this. That because of the ability to interlock and interconnect with at least one individual. This is why mentoring is so important. This is why sponsorship -- this is why we see this huge movement, right? Of peer support counselors.

I mean, I am so thrilled with this movement and this advocacy for peer support counselors. Because they are going to make one of the biggest differences in advocacy for recovery and for actually, impact of recovery. Because in the face of multiple hardships, if one individual ask to come in and interconnect with another person and provide them with some kind of reliance. You know, a sense of predictability and support, and that sense of belongingness. The wires start shooting.

And so then -- but my argument is then, Larry, that overall, that one person can't sustain us, right?

But if one starts building a network through bridging and linking and connecting our communication skills to better and better perform, then there's going to be a growing network of individuals in our lives that are going to provide us with more support and more ways of adapting and proving to be resilient.

So that is -- I mean I don't think it comes down to numbers. I've never seen that it comes down to numbers. But I think what we're talking about is a building and a cascading of impacts, as we grow in our ability to connect with others and feeling that sense of belongingness. So thank you, Larry.

>> SAMSON TEKLEMARIAM: Yes, thank you, Larry. And Karyl, thank you for that answer. Pace yourselves. We have lot more.

[Laughter]

Susan asks... with adults in treatment, how important is it to include family in recovery when there is increased stress?

>> KARYL SABBATH: Oh, that is one of the fundamental recollections that I have when working with inpatient treatment. Sunday was family visit day.

And so, oh my goodness, right? The stress that occurred from the individuals that were residents in treatment. And then you're talking about after the fact, learning of all the family stress that was going on.

So the ideas of constructing quality -- high quality family support care. And that's why Al-Anon began in its existence because of that separation of individuals, not just combining all the treatment together or support systems together, like Al-Anon and AA or NA, et cetera.

So those ideas of -- a program can't do everything, right? But that's the idea of connecting these. The bridging and the linking to different programs.

But you hit on the nail. Right. It's the stress of working through the stress of the family dynamics and the individual needing to focus on their own recovery issues.

But it's a dynamic system. And so it can't be ignored. Thank you. I hope that addresses just a little bit of what you asked.

>> SAMSON TEKLEMARIAM: Yes. Thank you, Susan. And Karyl, thank you for answering that. Desireene asks what role culture plays in resilience. Also, did you consider different demographics and population in how resiliency can manifest?

>> KARYL SABBATH: Oh my goodness, yes. So the idea that resilience is a part of the environment and part of the culture.

So Native American cultures for centuries, right? Decades. Have been promoting healing communities and healing leaders that are part of their native beliefs and the belief systems of their whole family systems.

And so that really reinforces the idea of what does a culture teach and how does a culture build ways in which others can come together and support one another in terms of building aspects of resilience. But as we know, so many populations are experiencing poverty to an astronomically inequitable level to other populations.

And so not having access to resources. Being in neighborhoods that are falling apart and not providing a vibrant lifestyle, then actually not having the transportation, the funds, or just the -- even the bonds in these neighborhoods. Because as the

neighborhood poverty or neighborhood crime goes up, et cetera, we see more and more isolation.

And that's what this is all about, is that if I'm going to be compounded by all that stress, then how am I going to construct connections with positive experiences that are going to assist me in building genetic coding that has positive impact, both on my biology as well as on my emotional wellbeing.

Culture has a huge part, and we cannot ignore it. The family system is a culture, and the family system is part of several cultures. And we as communities must address culture in relationship to the impact. So thank you very much for bringing that. I just wish we could talk about that for an hour.

>> SAMSON TEKLEMARIAM: Yes, thank you so much Desireene and Karyl. Kevin asks a question about 12-step facilitation. The question is: Do you think that recovery capital is declining with the increasing movement away from traditional 12-step facilitation, which includes spirituality, social support, life meaning, et cetera.

And now it's more towards cognitive behavioral approaches that are, I guess self-managed.

>> KARYL SABBATH: Yep. Right. And if you think about it in terms of the self-manage behavioral stuff, most definitely. I just completely -- if you're saying that perhaps you believe this, I believe it as well. And that is one of the reasons of what insights me to construct to pull together some of this material because again, are we creating these silos of individuals?

It's like, OK, so you've done this, this, and that, and now you go to counseling for this particular issue for something, but count on yourself for the behavioral modification, et cetera.

Or maybe you have, you know, some support system, but without community and building a recovery community that we've seen in the past as 12-step recovery communities, it doesn't mean that we have to emulate all this exactly, right?

But we have got to start thinking about ways in which we can interlace other ways. Like my one prompt from the polling question related to having role models, spiritual healers, sponsors. All of this. But also another one of that was the community connections and activities and service. That's one of the things William White really recognizes is, how much more sustainable would recovery be if community service was built into the process so that spirituality, a sense of I am not my own higher power. That my community, my family, et cetera, are also extremely important as I sustain my recovery. So I completely agree with you. And it's not a simple kind of answer. So thank you, thank you for considering that.

>> SAMSON TEKLEMARIAM: And our next question comes from Kelly. Kelly asks... I'm curious your thoughts on building social capital via social media and highlighting that all of these skills are needed in the written and texted now, since so much of our communicating is without so many visual cues. -- texted words, since also, so much of our communicating now is without visual social cues.

>> KARYL SABBATH: Right. I think all of us, probably on today, it is no shocker that we're seeing more and more telecounseling and computer-based counseling going on. And being able to express. I myself have done coaching through computer. And the ability to communicate effectively is important.

Now in terms of the building social capital, I think so. I mean, right?

I think that our skills in how do I reread the text and take note of what you're saying, not from just my lens, but staying on track with your message and following it via social media is important.

It's just, you know, the idea that is not building social capital is all the distractions that are going on through social media. There are just like -- you know, I could go on and on, right? But being able to learn through positive role models. Being able to learn how to discern what on social media is a distraction to your life or a destruction to your sobriety. Or a distraction to being there for a child or a spouse or an elder in your family. it's important for access to institutions. The linking stuff. It's really important for the bridging.

[Destruction should have been distraction]

And it's really important for the bonding, but I think building social capital, I think it has some real advantages for access to resources, but again, we're going to have to be really careful constantly about learning -- you know, this all happens so fast over the last, what has it been? I don't know, 20-something years?

And just etiquette in terms of, but also an emotional balance to this, in what's going to be capital or helping us build recovery capital as well.

So, hope I didn't get too off-track on that. It just is, again, when we talk about media, mediated communication, that it is, it's like, you know, a bag of worms.

So I tried on that one, but you can follow up if you have...

[Laughter]

>> SAMSON TEKLEMARIAM: We're going to try to squeeze in two or three more questions here. Calista asks besides communication, is there any effective way to build resilience in families?

>> KARYL SABBATH: Besides communication is there any way to build --

>> SAMSON TEKLEMARIAM: Yep. Besides communication -- she may mean any other effective way to build resilience in families.

>> KARYL SABBATH: Hmm. OK. So I think that serving as role models is huge. But that's non-verbal communication. Both the ways in which I communicate, the ways in which I present myself, along with what I say. Altogether, that is what assists us in building resilience. The other side of it is the genetic coding rights?

So that stuff is about also in addition to learning communication skills, to be able to become more adaptable in my environment, because I have a sense of belongingness.

The ideas of watching how others portray themselves in healthy relationship is super important. But it is also giving opportunities.

So that would be my "other than" as I'm trying to brainstorm quickly here... outside of communication, both non-verbally and verbally, I would argue that the ideas of providing access.

So the ideas of opportunities to go to different places, see different situations. So the earlier -- I think it was Desireene asked about culture. So providing an understanding of how individuals cross culturally, interculturally, interact and believe in different religions. Belief systems.

You know, that may make a huge difference in how a family practices the rituals of togetherness and how recovery is practiced, by being influenced, or I guess being able to see various ways of doing. So I'm going to wrap that one up.

But I love this, because a lot has to do with communication, but it also has to do with experiencing through opportunities.

>> SAMSON TEKLEMARIAM: Thank you, Karyl. And I'll squeeze in one more. If you could answer this in one minute, that would be awesome. What are some additional resources you would recommend in working with our clients on improving their communication skills? Like what if they are nonresponsive to regular talk therapy?

>> KARYL SABBATH: Oh, yeah, yeah, yeah. Most definitely. There's going to be a lot of people that are resistant to talk therapy. And so connecting them to different opportunities like community service. Mentoring an elder or mentoring a high schooler or grade school individual. Assisting a neighborhood in terms of a clothes drive. Putting them into situations that that's what I'm talking about here with bridging and building. That's why the connectedness is so important with community if we're going to build recovery communities and recovery capital. I remember being in therapy one time and I said OK, I'm done. I'm tired of talking about this. I need to do such and such. So I needed my feet on the ground and move.

So that idea of there's lots of opportunities in terms of bridging and linking. So great question to end with.

>> SAMSON TEKLEMARIAM: Thank you so much Karyl and thank you everyone for your engagement and participation in our live Q&A with Dr. Karyl Sabbath. Here's the schedule for our upcoming webinars. Please tune in, because there's some great topics and interesting presenters.

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Everyone, thank you again for participating in this webinar and Karyl, thank you for your valuable expertise. I encourage you all to take some time to browse our website and learn how NAADAC helps others.

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