Jessie O'Brien, NAADAC: Hi, everybody and happy Friday to you. Welcome to today's Webinar, incorporating the family into Treatment and recovery. Part 2 collateral damage. What families need presented by Maureen Kavanaugh.

My name is Jessie O'brien. I am the director of training and professional development here at the Association for addiction professionals

Jessie O'Brien, NAADAC: with me today behind the scenes is our training in customer care specialists, Allison White, who will be addressing any issues or questions that you may have that are not specifically for our presenter. So you have a lot of support here today.

Jessie O'Brien, NAADAC: Just a reminder we're using Zoom Webinar for today's live events. Most of you are familiar with Zoom by now. I just want to

Jessie O'Brien, NAADAC: point out a few key items. The first is the chat box which I see most of you are using, feel free to chat with each other, make comments

Jessie O'Brien, NAADAC: in the chat box. If you have questions, we ask that you put those in the Q. A. Box, which is also in your zoom menu.

If we see questions in the chat box and we catch them, we'll try to ask you to put those in the Q. A. Box, so we don't miss them. If we see comments in the Q. A. Max, we'll try it

Jessie O'Brien, NAADAC: to redirect you to the chat box. Just so we keep it organized, for when we get to the Q. A. That will happen towards the end of the Webinar today. Lastly, if you would like subtitles. Live transcript is enabled. You just have to click on the little carrot up arrow and then hit show subtitles.

Jessie O'Brien, NAADAC: and you can have close captioning along with today is a Webinar. I see Allison put a link to the Powerpoint slides in the chat box as well, so you can download those if you need them.

Jessie O'Brien, NAADAC: Just a reminder that every Webinar has its own web page that contains everything you need to know about that particular Webinar. So today is a Webinar. You can see the web address at the top of the screen.

Jessie O'Brien, NAADAC: The homepage for Needx educational content is the Needac education center, and all of our educational content is housed there, including all live and on demand webinars. So this includes the C quizzes and certificates that you are now and going forward. So, Don't, worry your old certificates. Aren't going anywhere. They are still there. You can be found in your account.

but each Webinar will still continue to have its own web page on our website. That will give you a link to all of the content that exists, and then needac educational center as well.

Jessie O'Brien, NAADAC: So after this live event

Jessie O'Brien, NAADAC: you can navigate to the sequence by clicking on the link in the Thank you, Box. That will appear once this Webinar ends or you will receive an email after this Webinar about
Once you click on the link to the sequence. You complete the questions, submit your answers and pass sequence. The score of 80% or higher. The system will then walk you through completing the Survey evaluation and accessing your Ce certificates.

Jessie O'Brien, NAADAC: Okay. So let's introduce today's presenter, Maureen Kavanaugh is a national public speaker


Jessie O'Brien, NAADAC: Maureen is the creator of the family. Focused addiction, support, training, fast program which provides a curriculum, driven family support meeting and con, and consults to various health care organizations, sorry consults to various health care organizations.

Maureen Kavanaugh: She is the Director of family support services at New England Medical group in Hingham, Massachusetts, and the President of Magnolia Recovery and Consulting Services and Magnolia and new beginnings. So, Maureen, I'm going to pass this over to you, i'll turn my camera off and stop sharing my slides, and you can take it from here.

Maureen Kavanaugh: and then i'm going to do the thing that I always do, no matter how many times I do this, I'm going to look really confused like I never use zoom before.

Oh.

Maureen Kavanaugh: I want to make sure I have

Maureen Kavanaugh: the sound on.

Maureen Kavanaugh: because I want to show you all a little video to on as part of this.

Maureen Kavanaugh: Alright.

Maureen Kavanaugh: there we go. That should be it.

Maureen Kavanaugh: Alright. Well, thank you very much for attending today. because I appreciate it personally, but I also appreciate the fact that there's so much interest in us. It's it makes. Does my heart good to know that people are really interested in in creating change around how families are traded

Maureen Kavanaugh: in this situation.
Maureen Cavanagh: So I mean, it was my experience, and it is many people's experiences, and that we're disregarded kind of in treatment, and I know some of you may work for programs that are specifically geared towards families. But in general, in the in the when our children go to treatment.

Maureen Cavanagh: we are, or our loved ones, so I will say, children, but i'm. I know that this applies to many other relationships.

Maureen Cavanagh: When you're the support person to somebody who is going into treatment very often You're You're an afterthought at best, right? So I want to look at the impact of substance. Use disorder on the family. I'm going to use a lot of personal experience

Maureen Cavanagh: and my my own personal lived experience. And i'm gonna talk about what I learned as I was going through it, and what I've learned since then, and and as far as you know, and a lot of education has been involved in that as well.

Maureen Cavanagh: the learning objectives for today, My objective for you today are many, but Nutshell would like to understand what the family goes through. My, that's my primary objective, I think, in order to be empathetic rather than just sympathetic. You have to feel it. So i'm going to use my my own experience in an effort to make that happen

Maureen Cavanagh: next. I want you to be aware of what I and many families need, and for the most part do not get

Maureen Cavanagh: when going through the worst experience of our lives.

Maureen Cavanagh: There are many. There are things that we need to know to be a healthy support, but instead, we mostly get a lot of opinion and a lot of Roma. Finally, I want to show you what the science behind

Maureen Cavanagh: the science behind Why, educating and supporting families actually makes a difference in the recovery process. We can, we can be more than a nuisance we can actually help.

Maureen Cavanagh: So thank you for being like, I said, willing to learn about integrating the family into the treatment process and for attending today. Usually, you know, people avoid doing the hard thing, and most of if you're if you're in this Webinar, most of what you do is the hard thing right?

Maureen Cavanagh: I was a middle school special education teacher. People would say to me, Are you insane? Because it seemed like a special LED is hard, and then middle school is hard, and you put them together, and it was tough, but it's also, as we all know, super rewarding as well.

Maureen Cavanagh: Many people in this field tend to find their passion for this work because of their own personal experience, and they may have unresolved family issues which makes it even more difficult to work with the family.

Maureen Cavanagh: especially if they Haven't, had very specific training on working with families who are supporting a loved one, and there's not a lot of that out there
Maureen Cavanagh: for most of you, and i'm not technically your client right? The family is not the client.

Maureen Cavanagh: There's open no way to fill the family care, which, despite the emotional cost, leaves the family left to seek out information that may or may not be correct, and that's our biggest problem.

Maureen Cavanagh: So i'd like to know a little bit about you.

Maureen Cavanagh: I had never intended to get into this field ever, and of course that change in plan finally due to my daughter's addiction resulted in many good things happening. I've spent the better part of the last decade trying to educate myself into being the person I needed. When I was going through this.

Maureen Cavanagh: I believe that I've done that, and I continue to try to improve. Every day I pass on all that I've learned, because I understand on a very personal level the need, but also on a professional level, how it changes the family system.

Maureen Cavanagh: it ultimately helps the person who's struggling or in recovery.

Maureen Cavanagh: I'll try to show you that here today, to the best of an hour and a half will allow us, and

Maureen Cavanagh: and, you know, talk a little bit about both the science behind what I believe, and the personal experience that also along those opinions.

Maureen Cavanagh: and, like I said it was a special education teacher. It was a second career. So I have a bunch of trainings related to addiction now that I didn't have them.

Maureen Cavanagh: I have a bunch of intervention trainings. I think I've done every intervention training in there, plus a bunch of letters after my name, which is supposed to mean that I'm really smart, and I know things.

Maureen Cavanagh: But unfortunately this all came together eventually and made Sense makes sense now. But when I was going through it. I felt very little quick to deal with my daughter's addiction.

Maureen Cavanagh: I created a nonprofit focused on family support, because mostly because there was no place to go. I I couldn't find a place for me to go to find really good Fact-based science-based information.

Maureen Cavanagh: I would take many trainings to fill that gap.

Maureen Cavanagh: I tried to find. I I wound up going to trainings for people that were becoming an alcohol and drug counselor or alcohol and drug counselors just to get good information, because I was being fed information by treatment centers that wanted

Maureen Cavanagh: didn't always have a good intentions, you know, so not all of them, but some of them did not have good intentions. so learning, so much, so long after I needed it was very painful.
Maureen Cavanagh: I wouldn't wish that really on anyone, and that's what I try to avoid.

Maureen Cavanagh: I think we can all agree that in a family system the relationship between a parent and a child is unique. We can all use some of the techniques.

Maureen Cavanagh: some of the techniques, same techniques when supporting other members of families. But that bond between a parent and child creates opportunities and difficulties that are specific to the relationship.

Maureen Cavanagh: Children are our children, even when they're 80. So when I refer to a child, i'm, referring to anyone we raise as our children. No matter the age or the actual relationship.

Maureen Cavanagh: The need applies to anyone who is the support system, or has a loved one struggling with addiction. But i'll mostly be talking about parents and children just because that's my own personal experience.

Maureen Cavanagh: So I would love to.

Maureen Cavanagh: How do you answer a couple of of these poll questions? Because i'd like to know who you are. and since we can't talk to each other, I think this is the best way to do it.

Maureen Cavanagh: So i'm. Curious as to whether you work directly with the family support system of a child with a substance use disorder.

Maureen Cavanagh: And

okay.

Maureen Cavanagh: All right. That's interesting. Okay, actually, more than I thought that it's part of the job

Maureen Cavanagh: that that's an actual job requirement. That's really good to say.

Maureen Cavanagh: My next question is, do you work directly with the family support system? Do you have lived experience as a parent of a child with a substance use disorder.

Maureen Cavanagh: Okay, so about about 22%

Maureen Cavanagh: of you have our parent type of person with that alcohol substance use this one.

Maureen Cavanagh: My next question is.

Maureen Cavanagh: Have you had training or education that has equipped you to educate and guide a parent supporting a child with substance? Use disorder?

Maureen Cavanagh: Excellent!
Maureen Cavanagh: Excellent. 60% of you i’d love to know. Maybe, you know, we can put some in the chat some where you've gotten that training I craft trained on invitation to change. Trained, done a bunch of intervention trainings which I don't do interventions.

Maureen Cavanagh: I I I work with families and try to get to them healthy, so that there's no need for the intervention.

Maureen Cavanagh: So it's kind of an intervention in and of itself. So, using those those skills from the from invitation to change and from craft, and also lots of motivational interviewing, and I don't just use it on on the people that i’m working with. I like to teach them how to use it themselves

Maureen Cavanagh: right? Because if we can teach some of this, some of the things that we do as counselors, we can teach to family members, they can have better communication and better conversations with their families, which is what we want.

Maureen Cavanagh: So i’m going to share a bit of my own story, because if you don't have this experience and the you know most of you, Don't. and I hope you haven't i’d like you to understand what it feels like to go through this struggle with the most precious person in your life.

Maureen Cavanagh: I always say that you know your children are your heart walking around outside your body, and I think that's the best description of of what it feels like to have a child.

Maureen Cavanagh: When I talk about my children.

Maureen Cavanagh: They were made about 2 in my head forever. You know my oldest is almost 40, and still she you know she, I I think of her as as a child.

Maureen Cavanagh: If you have kids, you know what I mean, and if not, and you have a mother that forgets

Maureen Cavanagh: we at 40 years old that you can actually butter your own toast, you will. You'll know what I mean. We often get stock hopefully, not all the time, and seeing our children as anything other than children, and sometimes that's a good, loving thing.

Maureen Cavanagh: and sometimes that's crippling to everyone.

Maureen Cavanagh: It's a fine line. Somebody once said to me that you're only as happy as your least happy child.

Maureen Cavanagh: And I thought at the time when I was going through this with my daughter, that's true.

Maureen Cavanagh: Yeah, that's and now I look back, and I think, oh, my God! I was so sick

Maureen Cavanagh: that I would actually think that my happiness was dependent upon somebody else's happiness.
Maureen Cavanagh: So you know, live and learn, but in the middle of supporting somebody it's. It's very difficult to to draw that line

Maureen Cavanagh: between us, and then

Maureen Cavanagh: so this is my baby. She's the third of 4. Her name is Katie. She was the sweetest child in the whole world.

Maureen Cavanagh: and just a really good kid, an easy kid, always, and kind, and loving and and happy.

Maureen Cavanagh: and

Maureen Cavanagh: you know, and I have 4, so they weren't all like that. I'm not going to tell you which ones weren't, but they weren't all like that. But she and she actually was in was an easy kid always.

Maureen Cavanagh: I always ask people when I work with them, to tell me who they're with. Their loved one is who their child is.

Maureen Cavanagh: and sometimes they start by telling all the you know, all the bad things that happened lately.

Maureen Cavanagh: and I try to get them to, to to go back and tell me

Maureen Cavanagh: a story that represents who they are at their core.

Maureen Cavanagh: because I think it's important that we remember who people were before they started using drugs. because there's still those people. It's just sometimes we we can't. It's not so easy to see them anymore.

Maureen Cavanagh: So I ask them to tell me a story of who they want their their child is. and everyone has that picture in their mind of that story. You want to ask that question.

Maureen Cavanagh: A large part of what I do every day is that his family coaching? And when I ask them to tell me this story. We write it down, and

Maureen Cavanagh: and we remember it when it's necessary to remember it. When things are bad.

Maureen Cavanagh: My story with my daughter is a story of when she was probably a little bit older than she was in this picture. probably about maybe 6 or so years old.

Maureen Cavanagh: and my mother had been sick for a while, and they weren't that close to my mother, because I, because of my own reasons, needed to distance myself and my family, but they knew her, and

Maureen Cavanagh: she was had been sick for a while. We knew wasn't going to be too much longer, so I had to prepare myself and I I you know, for what I would do. and I told my older kids, who were much more. They knew what was going on, and then, when it came time to tell my younger 2 children, I got this
book by Maria Shriver, because, remember, i'm an adult child of an alcoholic, and I've got to do everything perfectly, so I've got. You know. I had it all planned out exactly what I was going to do.

Maureen Cavanagh: and I got this book by Maurice Driver about how people go to heaven when they pass away

Maureen Cavanagh: and read the book, and sat down with him and said, You know, when I You know that Nanny's been sick for a while, and she's gone to heaven, and my son was too young, but went right over said I could have said she went to, you know

Maureen Cavanagh: and wouldn't have known the difference.

Maureen Cavanagh: And but my my daughter understood, and she looked at me with those big brown eyes, and she said, oh, my God, if I feel this bad, imagine how you must feel

Maureen Cavanagh: that's my daughter.

Maureen Cavanagh: and that's the that's the person that I held on to. As things got progressively worse with her addiction, and she did more and more things that would totally add a character with her.

Maureen Cavanagh: and I would remind myself, No.

Maureen Cavanagh: that's not her. This is her, that's who she is, and that's who she'll be again

Maureen Cavanagh: that

Maureen Cavanagh: What I needed to learn was, I had to have boundary strong boundaries, and I needed to understand how the drugs were affecting her, which took a

Maureen Cavanagh: probably until after. You know, years and years later, that I understood

Maureen Cavanagh: all the ins and outs of that. But I in I was able to hold on to that picture of her when I needed to remind myself who she it was.

Maureen Cavanagh: and I and I needed to remember who she was. Later, I did. I really needed that, and so many of the families that are going through this.

Maureen Cavanagh: So she grew up in this perfect little town that I moved of 22,000 people in on Massachusetts. I was a special education teacher and worked in the same town. I lived.

Maureen Cavanagh: I would often beat my kids home from school at the end of the day, or they would stop in in my classroom as they walked home.

Maureen Cavanagh: It was literally across the street from my house. The school that I taught in. I was determined to get parenting right after growing up in such tumultuous unhappy and drug-filled home that I did.
Maureen Cavanagh: She worked through high school to pay for the car and have spending money, and I decided and decided she wanted to be special education teacher like a mother

Maureen Cavanagh: when she graduated. So she volunteered in the school with the kids that stayed on until they were 21 not an easy job that was city or the kids with severe needs.

Maureen Cavanagh: and she graduated with honors and started at a in mass at a public college. She was enrolled in the in the education program.

Maureen Cavanagh: She was never a kid to spend a lot of time away from home. So she struggled a little bit, and that was to be expected.

Maureen Cavanagh: We had no problems with drugs or alcohol in high school.

Maureen Cavanagh: She struggled a little bit. She was always a kid that, like even if she went to a a sleepover. She would come home in the, you know, at 70'clock in the morning I would get up, and she would be eating cereal at the at the kitchen table like what happened, and she nothing but just wanted to come home. So when she started to struggle in college it seemed like.

Maureen Cavanagh: well, I had a feeling that was gonna happen, and this was 3, the third she's the third of 4. So i'd seen this happen before, and I had seen them get through it and and go on to be, you know, adults that were able to live on their own. So I think it that it would be okay. And then

Maureen Cavanagh: probably about mid first year around the Christmas break, she came home, and she seemed like she was doing a little bit better, and when she went back we weren't, hearing from her as much, and we thought she was adjusting.

Maureen Cavanagh: we were wrong.

Maureen Cavanagh: so like I said, I grew up in a family full of substance, use disorder. I was the only person I knew in my in my life as a young person that brought grandma to that Methadone clinic. That was one of my jobs when I first got my car. So I I you know I grew up in the middle of this.

Maureen Cavanagh: and My answer was to stay as far away as possible from anything to do with addiction.

Maureen Cavanagh: It meant moving, and having little to do with my family of origin. I spoke to my kids about family history. They had family dinners, and they had parents that loved and cared for them. We liked each other. We later got divorced, but we liked each other, and I still like him, and he Still, one thing likes me.

Maureen Cavanagh: We were solidly middle class. I am well educated and worked as a special education teacher in the school district I live in, so that I could be home when they were home there. We know drugs and out in my home.

Maureen Cavanagh: I am very similar to the majority of people I know, impacted by substance use
disorder.

Maureen Cavanagh: I know a lot of people. There is nothing I would have done

Maureen Cavanagh: makes it wouldn't have done to make sure that my kids didn't grow up like I did, or become involved in drugs and alcohol themselves.

Maureen Cavanagh: Unfortunately, it wasn't completely up to me.

Maureen Cavanagh: so i'm watching. Now keep in mind i'm a teacher, too, so you know it's I'm watching

Maureen Cavanagh: and i'm looking. What I was looking at was typical adolescent behavior. having 4 kids, some of them. Some of my kids have gone through much more difficult times than she did

Maureen Cavanagh: everything in that list. Did she have a little bit? Yeah. but it was a little bit.

Maureen Cavanagh: and I had already seen other my out of my other 2 that were older had seen them go through this much harder. So when I was looking at it, I oh, gosh! I'll be glad when she gets through this. That was my thinking, Not I'm in big trouble. What's going on?

Maureen Cavanagh: The problem with these less are and typical adolescent behavior is that if you look at early drug use and you look at indicators of suicidality.

Maureen Cavanagh: They're similar. Of course it's all a matter of severity, but not always. We can't always know what's going on with somebody.

Maureen Cavanagh: So if I had to look back, I think I would have

Maureen Cavanagh: maybe looked harder, and and instead of

Maureen Cavanagh: looking at. That's

Maureen Cavanagh: I would have realized that sometimes drug drugs and alcohol and mental health issues are, you know, catch people by surprise, and they hide them.

Maureen Cavanagh: especially from their families.

Maureen Cavanagh: It's it's hard to say.

Maureen Cavanagh: because, no matter how old they are, we're always looking at them through this lens, and when it changed. It changed so fast, I would ask myself that question. Why didn't I say what was coming for years?

Maureen Cavanagh: Well, I I tortured myself with what if there was something I could have done to prevent her from answering any of her issues with drug
Maureen Cavanagh: I'm. Still not sure what I would have done differently to be honest with you. But what did I torture myself

Maureen Cavanagh: So anytime anything happens. I want to know why I imagine most of you do, too. But honestly. No one thinks it's going to happen.

Maureen Cavanagh: and what it does. Most of us blame ourselves making it all that much more difficult to reach out for help or believe it can change.

Maureen Cavanagh: I knew, you know I was aware that there will be a certain amount of of

Maureen Cavanagh: even a personality that we hand down genetically. That might make my kids susceptible to to all over using this using drugs or alcohol. And we talked about it a lot because they knew what I went through, and and I, and knew how careful it was.

Maureen Cavanagh: But something we you know we're not the answer to everything.

Maureen Cavanagh: So how did this happen. How did I get from a place of thoughts about a future filled with possibilities for her to writing a book.

Maureen Cavanagh: and having helping and and having helping families through this experience be so central in my life? The answer, like, I said very slowly. And then, in a blink of an eye.

Maureen Cavanagh: she went off to college. She did that first year. She struggled

Maureen Cavanagh: the end of her junior year. She came home after

Maureen Cavanagh: after the first year, and said that she had been drinking too much, and I was a little worried about that because she seemed to have gained a little weight. But we said, oh, chalk it up to that freshman. 15, not Jimmy, your freshman year. I'm sorry, and

Maureen Cavanagh: you know I thought maybe you know there might be have been some alcohol involved. But keep in mind. This is number 3, and I had seen that, and I had never turned into a problem. So, and I had a little bit of not my daughter. Kind of thing, not my kid, because we had talked about those things.

Maureen Cavanagh: So she was. She said, Yes, she goes, i'm. You know I actually was drinking too much.

Maureen Cavanagh: and I've tried some drugs, and I tried heroin, and i'm scared.

Maureen Cavanagh: We'll talk about the bottom falling out of your world.

Maureen Cavanagh: It was not even on the radar.

Maureen Cavanagh: I took her to the er because I didn't know what else to do with her.
Maureen Cavanagh: Here we here I am, somebody with lots of education. Well, who I can. I consider myself a very intelligent person, a a person who had lived experience in a family full of alcohol and drugs.

Maureen Cavanagh: and I have no idea what to do at this point, because it's my daughter. Now

Maureen Cavanagh: I take it to the er and they evaluator, and sent it to an outpatient program. She wildly under reported her drug.

Maureen Cavanagh: but they said she didn't need detox. She later told me she was hallucinating in the couple of days right after getting into the iop when she stopped drinking.

Maureen Cavanagh: So most likely she did need. He talks.

Maureen Cavanagh: I was calm. I was helpful. I was non-judgmental. mostly because she came to me. I thought she would always come to me. but I was wrong. I didn't underestimate my daughter or our relationship.

Maureen Cavanagh: I underestimated the power of addiction, the power of drugs, because again i'm looking at my child and not looking at

Maureen Cavanagh: the drug and the power of drugs.

Maureen Cavanagh: So I am, of course, now not telling anybody this right

Maureen Cavanagh: it. I I didn't want to. I didn't I didn't want to share it with anybody. I really didn't want to talk about it. It was so upsetting to me, but I also didn't want to share it with anybody, because I

Maureen Cavanagh: it could be just this brief phase in her life, and I didn't want her to be known as the kid that did her own at this point. I don't know anybody else that's doing heroin.

Maureen Cavanagh: She completed the ioping. She went to school close at home and moved back in. She started to spend a lot of time now at the house.

Maureen Cavanagh: and finally moved in with friends. I knew something was wrong. I'm scared, but i'm sure what to do. I didn't know what I could do. She felt her classes the first semester she dropped out of the community college.

Maureen Cavanagh: We talked a lot. She denied everything.

Maureen Cavanagh: but I knew.

Maureen Cavanagh: but I didn't know what to do, and I didn't want to expose her, and I didn't know where to go for help. At first

Maureen Cavanagh: I was afraid of gossip, as most people are. I mean, this is like I always like to back.
It's just that personal experience. This is

Maureen Cavanagh: you know, evidence-based that this is what most

Maureen Cavanagh: families our feeling in our met with is that fear of gossip feel, if you are being exposed.

Maureen Cavanagh: such stigma out there, and not only stigma towards their child. But of course, as we know stigma as the parent. Well, what did you do?

Maureen Cavanagh: And hey, listen! I get that right.

Maureen Cavanagh: If I can figure out what somebody else did that I didn't do then I can protect myself from it happening to me. That's just ridiculous, but that's kind of. I think a lot of people's thinking. Oh, well, they did that. Oh, what they were, you know

Maureen Cavanagh: they they she she was never! She was always out herself. She drinks herself where this is a myriad of of reasons that separate me from the person that this happens to. So now I don't have to worry about that happening, but that just increases the stigma and the shame, and helps people and keeps people from that need help from getting help.

Maureen Cavanagh: I hoped it would pass

Maureen Cavanagh: it. Didn't it got worse. Got a lot worse.

Maureen Cavanagh: I Google things

which is a dangerous.

Maureen Cavanagh: dangerous thing for a family member to do. I scared the hell out of myself and got lots of bad information.

Maureen Cavanagh: You Google, anything, you if i'm sure you will know this. But if you go on online and you Google help for parents help to parents of addicted child.

Maureen Cavanagh: There'll be, I don't know. 50 treatment centers will come up, and then all those treatment centers sponsored pages will come up.

Maureen Cavanagh: and maybe you make it nih, and in there you might. But you may not even know that those are the reputable ones that though that's where you should be looking.

I reached out to an addiction medicine psychiatrist. She wouldn't see she apparent

Maureen Cavanagh: I had a therapist, but addiction wasn't her specialty.

Maureen Cavanagh: I went to a license alcohol and drug counselor. They could help her if she was
willing, which she wasn't. but they couldn't work with me.

Maureen Cavanagh: I finally went to a local family meeting, and I was told by other parents.

Maureen Cavanagh: but I needed to cut her off.

Maureen Cavanagh: I need it to let her hit rock bottom. I was told this without any facts, to back it up by people that look just as terrified as I did

plainly. Family, we ignore and exclude the family, and then release people striving for recovery right back to their family.

Maureen Cavanagh: Many who have been listening to the loudest voice in the room in a meeting instead of the facts. Don't, get me wrong.

I met some of the most amazing people I've ever known in my life.

Maureen Cavanagh: in in family meetings, my closest friends.

Maureen Cavanagh: but they were just as confused as I was, and they were hearing the same thing. So when someone is telling you your everything you do, even loving them, is enabling.

Maureen Cavanagh: And then the loudest voice in the room. You start to feel like you're doing something wrong. If you don't listen to them.

Maureen Cavanagh: It's it's a it for a vulnerable person. It's a dangerous place to be sometimes depending on the meeting

and hitting bottom.

Maureen Cavanagh: That was not an option for me. I wasn't going to wait around for her to hit bottom

Maureen Cavanagh: whatever that is.

Maureen Cavanagh: So as a family coach. Now most of my clients come to me have to be being told a variety of these things right that they're codependent that they're enabling they need to cut people off, and that they can help. That's the big right. You can't help.

Maureen Cavanagh: Please don't say these things to people especially that they can come. Many people will listen to anything you say after that that was me.

I had to stop going to meetings because I couldn't listen to that anymore.

Maureen Cavanagh: Others will listen to that advice, and it will be the last thing they say to their loved ones. And I know too many people that that was the last thing they say. Go back and come back when you're sober.
Maureen Cavanagh: No one wants that, especially none of them, because none of those things are true.

Maureen Cavanagh: more helpful.

Maureen Cavanagh: So if you, if you do an Internet search for mit codependent.

Maureen Cavanagh: There's 1.3 million entries. And I did that search a long a while ago, so I would imagine that there's even more now. It's the worst thing you can make. It's just you you it's! I mean it's the the equivalent of calling calling someone in it.

Maureen Cavanagh: I was out of control, literally out of my mind, but I still resent the term codependent.

Maureen Cavanagh: I was parenting right at the time when I should have been able to let go and allow my child to be the adult that she was. She started to use drugs.

Maureen Cavanagh: How do you let go when your baby is overdosing. Once or twice a week I was parenting and hanging on for dear life.

Maureen Cavanagh: and I was parenting, and effectively, because I wasn't educated on substance use disorder. I wasn't supported or connected to enough people that understood the disorder or practicing self care.

Maureen Cavanagh: Had I been, I would have understood what my daughter was going through. and we're more likely to support her in ways that worked, and were helpful for both her and me.

Maureen Cavanagh: because she needed me. and I wasn't available because I was literally out of my head.

Maureen Cavanagh: I was never approached with the idea of holding space or finding a middle ground ever.

Maureen Cavanagh: That's true top love to walk along, sign another person you love more than anything.

Maureen Cavanagh: and and with hope and love as they battle this that's tough love.

Maureen Cavanagh: Many years later I visited many family meetings, telling my story. After my book came out. It was my way of paying it forward

Maureen Cavanagh: again. I would hear the loudest voice in the room, saying all of the things that I did
that didn't seem to be working for him or her.

Maureen Cavanagh: and I look around and see a few newcomers vulnerable and willing to listen to anything just as long as someone seems to have an idea of what to do.

Maureen Cavanagh: I got to be able to tell those people that I disagreed. and that there is a science. There's science behind what I believe.

Maureen Cavanagh: So this is how families are feeling.

Maureen Cavanagh: How do we get families educated and professional, or put, and professionals aware of the need? It's not by maintaining the status quo

Maureen Cavanagh: don't? Forget the people you are working with the going to go back to these families. If you're working with people that are struggling.

Maureen Cavanagh: family influence is commonly cited as the number. One reason why people go to treatment.

Maureen Cavanagh: We have to. We have to take a hold of that and use that.

Maureen Cavanagh: And the only way we can do that is by educating families.

Maureen Cavanagh: So, instead of cutting people off, we need to teach families how to create boundaries for themselves and stay within the sphere of influence, so that they can be a positive and loving rock that is needed.

Maureen Cavanagh: I love that that that

Maureen Cavanagh: brace a sphere of influence. You cannot encourage somebody, or you cannot make somebody feel like this a reason to go through the torture of getting, of, of getting into recovery, going through detox, going through treatment, doing their whole lives differently if they don't have anybody to come back to.

Maureen Cavanagh: So, as we cut people off.

Maureen Cavanagh: I I mean that's that's the the the core of Why, I believe that that's a bad idea.

Maureen Cavanagh: and that to stay within that sphere of influence I love you very much. But you know I I can't be a part of whatever you're doing when you're using. I'm here when you're when you're ready to come back to us.

Maureen Cavanagh: and you know at the very least right. So there's ways of doing it

Maureen Cavanagh: without being manipulative and without being punishing.
Maureen Cavanagh: Of the over 40 entries into treatment, and 13 overdoses that brought her to the hospital, and many more with someone had in our camp. I was offered 3 family meetings.

Maureen Cavanagh: isn't that shocking

Maureen Cavanagh: all which centered around her imminent, discharging her discharge, planning, and I say planning sarcastically, because there was very little plan, and I was not involved. The most part. I was offered 11 h long Education session with other family members, which was incredibly overwhelming, and only made me realize how much I didn't know.

Maureen Cavanagh: I spent years searching for information, and learned, probably that 85, 90%. What I needed to know after I needed this needs to change

Maureen Cavanagh: needs to change, and there's change happening, but not enough.

Maureen Cavanagh: So what a family is needed.

Maureen Cavanagh: and the traditional family of meeting allowed us to know. We weren't alone.

That's great. But we know we're not alone. Now, right.

Maureen Cavanagh: we can provide this. That is our responsibility. That loudest voice in the room telling us needs to be corrected.

Maureen Cavanagh: So I knew I wasn't alone when I went into the family meetings. Yeah, we're all still going into those rooms and getting information from that loudest voice.

Maureen Cavanagh: When I first started speaking, when, after the book had come out, I you would talk, and I would use Gillette stating. and that kind of

Maureen Cavanagh: show showed people with 72,000 deaths. Now keep in mind. This is just the people that have passed. We're not talking about all of the people that are struggling.

Maureen Cavanagh: which is, you know I don't know how many times more, when nobody will really knows how many more times 72,000 it is!

Then I moved up to the Rose Bowl in 2,020,

Maureen Cavanagh: but I had to move to Michigan, saving in 2,021, with a 107,000 overdose deaths.

Maureen Cavanagh: Now we're just looking at the people that have passed.

Maureen Cavanagh: and they say, you know frankly, i'm running out of stadiums, and we need to. I, You know I need desperately for this number to to reverse. I can't. I can't take it anymore, and i'm sure you feel the same way.
Maureen Cavanagh: So I had to upgrade to Michigan stadium, and I wondered why we're not doing more for the families.

Maureen Cavanagh: That's an unbelievable amount of people, especially when you take into consideration that for every one person with a substance use disorder, at least one and as many as 5 loved ones are negatively impacted. I think that's grossly underestimated.

Maureen Cavanagh: because I know that I have. I carry the mass cards of all my people. I considered friends.

Maureen Cavanagh: their children, and with me all the time. But there are people that I've never met. There are people that I've helped get into treatment numerous times. There are people that I loved and cared for, that are no longer here, and i’m not within their fine.

Maureen Cavanagh: So I think it's much more than that.

Maureen Cavanagh: Well, someone struggles. The only thing any one of these people have been doing is holding their breath. The family members, the financial, emotional, and psychological toll of supporting a loved one who eventually passes is monumental and ongoing. It's a lifetime of waking up every morning without that person.

Maureen Cavanagh: every year there is. This is about how many people experience the impact of a death related to substances, not including alcohol and all of the other tragic consequences of drug use.

Maureen Cavanagh: This is a fraction. The number of people whose lives are changed, supporting a person that continues to struggle is in calculus in calculus we will never really know. But we do know that people tend to get one more frequently when they're left and supported.

Maureen Cavanagh: that's not to say we still don't have losses, but educating families on best practices and supporting their loved ones, can make a difference in the outcome. I believe that with all my heart.

Maureen Cavanagh: families will take suggestions from other family members, or those in recovery that are not fact based and implement them because we feel like we must do something.

Maureen Cavanagh: loving someone where they are. where they at feels like doing nothing and doing nothing does not feel like love.

Maureen Cavanagh: So often family members will choose to do what maybe the wrong thing just to be acting instead of waiting.

Maureen Cavanagh: It's it's a horrible place to be in.

Maureen Cavanagh: So, as I said earlier, this went slowly and painfully in the beginning, and then came to and me like an ambush, or it felt like it did one thing worse than another, just when I thought it couldn't
get any worse. It did. Rock Bottom always had a basement. We found

Maureen Cavanagh: i'm going to read a little bit from the prologue of the book, because I feel like it gives you a really good idea of of i'm just going to poke the questions in case

Maureen Cavanagh: I feel like it

Maureen Cavanagh: helps give you an idea in case you don't know what it feels like. If I haven't already to be a family

Maureen Cavanagh: that's going through this. I'm going to curse. So if anybody has a problem.

Maureen Cavanagh: I apologize ahead of time.

Maureen Cavanagh: I'm not sure how I get into the car, but I know i'm on my way to kill Bob.

Maureen Cavanagh: winter 2,017.

I'm not sure how I get into the car, but I know i'm on my way to kill Bob.

Maureen Cavanagh: I don't want to take my eyes off the road because i'm feeling unsteady and it's important. I get there.

I don't want to miss him

Maureen Cavanagh: a few minutes to make all the difference

Maureen Cavanagh: I can see in my mind's eye the back cracking across this call

I won't. Stop there!

Maureen Cavanagh: I will beat him, man, twice my size in front of whoever is there. despite his cries for mercy, over and over until he stops moving. stops crying out.

stops destroying my beautiful Katie.

Maureen Cavanagh: I won't quit until he isn't breathing. and I will spit on him something I've never even considered doing to anyone in my 54 years of life.

I will do all of this, and I will never have a moment's guilt over it.

Maureen Cavanagh: I reach over and touch the top of the bat. This is long overdue. The common exterior that the world sees is about to shadow.

This last chain of events has broken something.
Maureen Cavanagh: I know what I need to do, and I can't remember the last time during this horror show of the past 2 years, when I was so clear about anything.

Maureen Cavanagh: so many unanswered questions. so many late night. Please to God.

so many theories about what I did wrong.

Maureen Cavanagh: It's a relief to finally have an answer. Even this one.

Maureen Cavanagh: It's been so very long since I felt anything other than heartbroken that I'm pretty convinced it's never been any other way. I look down at my body £20 heavier. The doctor had warned me about that 2 years ago, when I started to take a deal a daily 50 milligrams of Zoloft for the paralyzing anxiety that looked a lot like sadness.

Maureen Cavanagh: But somehow the wait still snuck up on me.

It's not the small pill causing the gains. I know that it's my secret relationship with Ben and Jerry. Nothing other than Peanut Butter Cup will do, and I've hunted through store up to store until I find it.

Maureen Cavanagh: Then I go home climbing to bed, watch a sitcom with a laugh track, and comfort myself with on demand, mindlessness and empty calories.

Maureen Cavanagh: It could be worse. I tell myself

Maureen Cavanagh: I know this is true, because I've seen much, much worse.

I've seen so much pain in the last few years. I hadn't known just how much pain the world could contain. It crushes me sometimes.

Maureen Cavanagh: not just my own.

The pain of so many others also trying to hang on to whatever shred of their loved ones they can. I don't know how I got here. There is never a day that goes by that this does not feel surreal.

I can't save my daughter Katie, and sometimes that feels like the only certainty in my life.

Maureen Cavanagh: I can't make her stop using drugs any more than I could keep her.

I'm leaving any of the over 40 treatment centers she has left. Oh, safeguard her with a double digit number of overdoses. I finally come to the realization that there is nothing I can say or do that will make a real difference.

Maureen Cavanagh: She is going to leave the facility she's in now.

and I know that because she called and told me so.
Maureen Cavanagh: I tried to talk her out of it, saying all of the things I said a 1,000 times before the things that have helped a 100 people before her.

I could hear the minimum, but

Maureen Cavanagh: but I could hear the venom in her voice. Some switches flipped, and she's ready to run. not the first time, but I know it could be the last.

Maureen Cavanagh: This will be one of several treatment centers where she's been doing well, and suddenly she decides to leave

Maureen Cavanagh: courtesy of a 56 year old piece of shit named Bob I'm, drifting to one side of the road when the phone runs and snaps me back to attention.

Maureen Cavanagh: I hope for a brief second that it will be the call. The one that I've dreamed about will tell me this is all mistake. Nothing to worry about the home and eat your ice cream.

Maureen Cavanagh: And when I realized that isn't happening, I wonder briefly if people on the way to kill someone answer the phone there. Really, isn't a rule book a protocol for this. So I reach for it and study the name of the caller.

Maureen Cavanagh: I cannot tell you

Maureen Cavanagh: how calm I was when I was on my way to do that, and I

Maureen Cavanagh: i'm I'm a you know

Maureen Cavanagh: special education, teacher. I don't normally not like professional assassin or anything. This is not my my usual

Maureen Cavanagh: where that I am.

Maureen Cavanagh: I was just

Maureen Cavanagh: at the end of being able to handle it anymore. And I really felt like, if I did not get rid of him, that this was going to be her going back and back and back again because he would pick her up from. He picked her up from 4 or 5 different States.

Maureen Cavanagh: and he was not a person who used drugs. He was a person who did this. There were other young women that he had also trafficked and and picked up and up, provided drugs for, and

Maureen Cavanagh: he was just a very sick man, and hit really from us and from the place.

Maureen Cavanagh: So I I felt like, even though that was not the answer. Obviously.

Maureen Cavanagh: Bob is no longer with us. Most people always ask, and I didn't count him.
Maureen Cavanagh: But I think I might have had. I didn't have the opportunity, and that's the the of of this, and that's what happens to people.

Maureen Cavanagh: The name of the book is, if you love me as you can see.

Maureen Cavanagh: The reason it's called, if you love me is because most people, you know, as

Maureen Cavanagh: children all say that right to their parents, or if you love me, you'd find me this. So you let me stay up, Lady, you let me out late, and parents say, Well, if you love me, you'd stop aggravating me.

Maureen Cavanagh: and I think that that's not uncommon that conversation. But one night, after she had had

Maureen Cavanagh: probably oh, 3 or 4 months, the long as she had ever had of sobriety. She had gone to this treatment center and

Maureen Cavanagh: just kind of fell in with this great group of people, and they had all gone off to sober houses that were affiliated with the treatment center.

Maureen Cavanagh: and continued to work together on their sobriety and encourage each other, and it was just an amazing group of people.

Maureen Cavanagh: and she had gotten a job, a Dunk and doughnuts, and one night she didn't come home for curfew

Maureen Cavanagh: and the the

Maureen Cavanagh: they called me, probably at 110'clock, and said that she didn't come back, and we all knew what that was.

Maureen Cavanagh: and they went out looking for her, everybody's calling and calling her. It's going right to voicemail, and probably about 30'clock in the morning they had found her brought home, and she is

Maureen Cavanagh: getting sick and dirty and crying, and just kind of a mouse, because she knows she can't go back

Maureen Cavanagh: with her friends, and she was really optimistic, and she was really starting to believe she could do this.

Maureen Cavanagh: she said, on my kitchen floor. And I said, Katie, honey, I love you so much, and you're gonna die. And she looked up at me and she said, If you love me and let me die. and that's where the title of the book

Maureen Cavanagh: in from It's also the day I really realized that I didn't get it. What it did.
Maureen Cavanagh: I thought I, we were so close, and we were gonna do this, and you know, every time she went into treatment I was all about.

Maureen Cavanagh: Oh, i'm here for you. We can do this. We and I I realized that this was something she was going to have to do on her own.

Maureen Cavanagh: and something that I needed to have a whole different recovery plan for

Maureen Cavanagh: for myself.

Maureen Cavanagh: She had been arrested at 1 point. Her name is in the local paper, and after teaching many years in the school district where she went to school and where we lived.

Maureen Cavanagh: I wonder what people would say to me after this article, because now it's gone on long enough that people are starting to know. And now with this newspaper article. and I I just think that this is awesome

Maureen Cavanagh: is all the casserole I got. Not one people person called me when they found out not one.

Maureen Cavanagh: At this point I decided that i'm not going to be quiet anymore.

Maureen Cavanagh: and that I needed to do something and one of the things that I felt like I needed to do was to wear my t-shirt. That, said Marvel had massachusetts, and show up in every

Maureen Cavanagh: recovery event out there, and getting every picture possible to let people know that this happened in Marblehead as well.

Maureen Cavanagh: Yeah, no. So the statement was real. There was a time when I would walk past the young person, you know clearly under the influence, maybe asking for money, and I would think, my God, doesn't that person have a family?

Maureen Cavanagh: Now I think about the pain that family must be in, and the pain of the person who is asking for change. I know the other side of that image, and it was brutal.

Maureen Cavanagh: So we know right knowledge is power.

Maureen Cavanagh: There is a group of the most amazing people in at the University of Texas that are doing research on the brains of family members, which i'm so grateful for.

Maureen Cavanagh: And I came across this research and have done some work with them since then

Maureen Cavanagh: on on what happens to the family members brain. And i'm going to play a short video because I can. This sums it up much better than I can.

Maureen Cavanagh: and they relate the the same feelings that a family member has to to cravings.
Maureen Cavanagh: How many times have you heard of parents or a loved one say, Why, Don't, they just stop haven't they had enough.

Maureen Cavanagh: or how many times have you thought that about a family member who is, keeps doing the the same thing, the same unhelpful thing to keep giving them money, or picking them up or doing whatever it is that they shouldn't be doing, and thought to yourself, Why, don't they just stop Haven't. They had enough. Can't they see what they're doing?

Maureen Cavanagh: We play this brief video.

This is an fmri machine or functional magnetic resonance imaging machine. It measures brain activity and is used for many different reasons. In this case addiction, recovery, research. This is the next step in our neuroscience research that we've been doing to look at family members and their brain after dealing and coping with a family member who has been struggling with addiction for a long period of time. Sterling Shumway is chair of the Department of Community Family and Addiction sciences. He, along with Spencer Bradshaw, are leading the charge to focus on family members of those struggling with a substance use disorder, trying to figure out whether their brains are equally impaired after years of collecting data on the front part of the brain. Using an F near device, they are turning to the fmri machine to dig deeper into the mid brain, looking at the structure as connections with each other. And then

Maureen Cavanagh: are they being used? Are they functioning the way that we think they're supposed to be functioning. They'll scan the brains of the addicted persons. They're family members and a control group providing plenty of information for comparison with family members. What we believe happens is particularly those that have been involved in the fight, the longest trying to keep their loved one alive.

We believe that their mid brain begins to scream at them, and they begin to make less rational choices and decisions at the level of the frontal cortex. In other words, they're reacting to keep their loved one alive. They may not do any good. They may know it's not going to do any good, but they're going to do it, anyway.

just like the addict and alcoholic is going to do the drugs anyway, because the midbrain is pushing them to do it. About a dozen students, both undergraduate and graduate, will work with Shumway and Bradshaw on the project, one that wouldn't be possible without the technology available here at Texas. Tech a lot of universities don't have this resource. We're lucky to have the Texas tech Neuroimaging Institute here. Reporter. After the scans are reviewed, the team hopes to learn more about a disease that's affected. So many research shows that when family members are impacted by the stress of addiction, they go to the doctor. More often they have higher medical claims and services, they get diagnosed with higher rates of depression. So when family members can find health and wellness.

then I think what it does is it enhances the chance of the person who is struggling, finding health and wellness, and then they can be helpful to each other for Texas tech today. I'm Allison hearth.
Maureen Cavanagh: Hi

Maureen Cavanagh: love this research, I mean, this is Bradshaw Shamway and Kimball out of University of Texas Tech.

Maureen Cavanagh: and they're finding and they've now doing doing that research on the midbrain. But they're finding that the part of the brain that lights up

Maureen Cavanagh: with a family member that's completely en mesh like I was is the same part of the brain that lights up during the craving. And when I tell people that

Maureen Cavanagh: they can understand

Maureen Cavanagh: that they can understand that. Yes, I feel the same. I this is how I feel. I don't know why I did it, but I did it, and they can relate to their loved one who, maybe having a craving. When understand why Johnny used on the way to probation, even though he was going to be drug tested

Maureen Cavanagh: because some of these things are just to find a understanding. But you can also say I promised myself I wasn't going to do whatever that was, and I did it too. I get how it feels. Totally different parts of the brain are lighting up.

Maureen Cavanagh: or when someone is not.

Maureen Cavanagh: consider it, it's not consider themselves only matched.

Maureen Cavanagh: It's really interesting research

Maureen Cavanagh: and helps helps families. I I mean, I have had families actually cry when they heard this, because they know that there's something wrong with them. They know they shouldn't be doing what they're doing, but they just don't seem to be able to control it.

Maureen Cavanagh: Yeah, that's that's a craving for you.

Maureen Cavanagh: So families are in a dark place. We know this right? So that while the family is asking why Don't, they just stop? They really realize that their behaviors are often motivated by the same parts of the brain. Why they need the education, what they need.

Maureen Cavanagh: we know there's always a why in addiction now, families can relate and understand what the craving feels like. They can see their why. I was terrified. I was going to Lewisar. That was the answer to my Why, every single time, every poor choice I made, and let me tell you, there's a whole book of them right there.

Maureen Cavanagh: I just did one like unbelievable thing after another.

Maureen Cavanagh: So let's fast forward if you use
Maureen Cavanagh: by this point. My daughter was very, very sick. and she wasn't the only one that was sick.

Maureen Cavanagh: My brain was not functioning correctly. I was spiraling downward the business that I had started a few years earlier, and and had done so well in the beginning was nearly gone, read it right into the ground.

Maureen Cavanagh: I was consumed with helping my daughter.

Maureen Cavanagh: and I say, helping right use the term lightly. I was not making good decisions, and it showed I was making mistakes at work, not following up and slowly driving my business into the ground.

Maureen Cavanagh: The one thing that I I will tell you that I consistently did

Maureen Cavanagh: is tell her I loved her.

Maureen Cavanagh: She would call me the deal was, I will give you a phone. I will provide your phone

Maureen Cavanagh: this up. You know the when you hear all the go. Don't give me anything

Maureen Cavanagh: I wanted. I knew why I was getting her phone. I wanted to hear from her. The phone was for me. It wasn't necessarily for her. I will provide a phone for you if you promise to call me, or get in touch with me somehow every day.

Maureen Cavanagh: So at 1 point it during almost every day, she pretty much stuck to this, no matter how bad things were. I would hear from her, and she would tell me she loved me, and I would tell her I loved her, too.

Maureen Cavanagh: That was an anchor for both of us. We both needed to know that the other person was still there.

Maureen Cavanagh: so I felt like, while I was going for this. Oh, God, it couldn't just be paying right.

Maureen Cavanagh: So drug use and addiction in general, we know, changes the structure and function of the brain. It's a mental condition, medical condition, not a moral failing. We still haven't gotten that through it. A lot of people

Maureen Cavanagh: try to convince a parent that's uneducated on addiction about that. I still have to do that on a regular basis.

Maureen Cavanagh: If we can change the family system, we can have a greater impact. You're not going to be able to reach every family I have helped people that didn't have any family. I have kids people that call, you know. Call me Mom, that are not my children. Some of their families have been gone for a very long time, and some of them just didn't understand this and didn't want anything to deal with them.

Maureen Cavanagh: But what we're, what are we doing to reach anybody Really, in general. only 2% of
the families of the 10% of the people that receive help are given the help they need.

Maureen Cavanagh: We leave them to themselves and ask them to reach out to other families and meetings, and at best most likely don't know any more than they do.

Maureen Cavanagh: and they marinate in their trauma, passing around often bad information and terrifying stories. And Waiting

Maureen Cavanagh: Family spent a lot of time waiting.

Maureen Cavanagh: waiting for the pain to end, waiting for some kind of end

Maureen Cavanagh: without support, without education, without self-

Maureen Cavanagh: So I saw that educating families with real science and evidence-based information changed. Then

Maureen Cavanagh: I'm a teacher. So I of course have to make everything a curriculum, and I saw that connecting them with support in their area made them stronger. It made me stronger. I saw that encouraging self care so that they could become a rock instead of loose can, and enable them to sue those

Maureen Cavanagh: cravings like it does for all loved ones. Passing on this information in the Magnolia Facebook, groups

Maureen Cavanagh: which now reach over 25,000 people across the country, actually in Canada and other countries as well

Maureen Cavanagh: through this through the book we're speaking. That's what I felt I could. That could be done to make a real change. When I began the online support group and nonprofit called Magnol. In the beginning I tried to connect myself to people that knew more than I did.

Maureen Cavanagh: and tried sharing the information that I was learning.

Maureen Cavanagh: Our financial mission was to raise money for so for living after treatment, for those who didn't have the family support that my daughter had, and that was the biggest thing that I could see is, if you didn't have family that was willing to help you out with

Maureen Cavanagh: with silver living, or that extend that treatment. You were in big trouble because I saw a lot of these people going out

Maureen Cavanagh: mowing the lawn and out of my window so hopefully you can hear that

Maureen Cavanagh: it was that I saw people going for treatment, and really being motivated, and then and then not having the resources to continue that which was painful for everybody.

Maureen Cavanagh: I I mean. Luckily my daughter didn't have that. We were always there to try to
extend her care and let and provide for a living or an extended treatment, if she was able to, if she was in a position to want to be able to do that.

Maureen Cavanagh: I think back on it now. And Magnolia absolutely was born out of a trauma response. I couldn't stop moving. I couldn't sleep. I either spent my time trying to find Katie fix Katie, or reach out for information.

Maureen Cavanagh: I started a no feeling response. Team in my town all this time while she is using, because I could realized I couldn't help my daughter, but I could help other people.

Maureen Cavanagh: and went out on every call with this police department. I helped many people, but I couldn't seem to.

Maureen Cavanagh: Everybody should have a wise old all in their family. I feel you know my my grandfather was that person in my family.

Maureen Cavanagh: He didn't like winding.

Maureen Cavanagh: so he used to say, Don't come to me with a problem unless you're thinking of the solution. And for me that answer comes in 2 ways. First, in changing the way we conduct families for meetings, and, secondly, with access to coaching for the support system.

Maureen Cavanagh: I repeatedly here, and have often said, if I know, if I knew then what I know now.

Maureen Cavanagh: It shouldn't be a mystery.

Maureen Cavanagh: Families shouldn't have to rely solely on the advice of someone else who had a similar experience.

Maureen Cavanagh: We wouldn't do that with any other disease. When I was creating this curriculum I researched what was available at data Far and Children's Hospital in Boston.

Maureen Cavanagh: and when a child has cancer. Families are taught and supported with evidence-based practices. If that same child recovers and then goes back with a substance use disorder, the family is often told to walk away from their loved one in the same, in the very same meetings that they go to for support.

Maureen Cavanagh: There's something wrong with this.

Maureen Cavanagh: and because I've never been a person that would approach a problem without trying to find a solution. I'm going to offer you mine I created a curriculum-based 26 module family meeting and training.

Maureen Cavanagh: as well as a family recovery, coach training, and I hope to create avenues for families to never have to say, If only I knew that then

Maureen Cavanagh: the meeting is structured like this. There's an introduction.
Maureen Cavanagh: It's, and it's just for families that are supporting and family. I mean anybody. I don't just mean parents. So first there's an introduction to the meeting

Maureen Cavanagh: is an educational module.

Maureen Cavanagh: and i'll talk a little bit about a specific on this just an over your age.

Maureen Cavanagh: It's it's every part of the meeting, and a little more depth than that

Maureen Cavanagh: is the educational module which leads into people asking questions. After that module is

Maureen Cavanagh: the presented, and then that usually leads into the open meeting with Cross to

Maureen Cavanagh: after the open meeting and support part of the meeting.

Maureen Cavanagh: I asked. I asked people what they're doing for self care, and I do that so that people can share what's working for them.

Maureen Cavanagh: and also realize that usually, after you have a meeting going for a little while, people have learned what real self care is, and they are practicing it and and feeling some kind of a a change in the way they feel because of that.

Maureen Cavanagh: Then there's a self-care module a 10 to 15 min module where people learn how to how to practice self care that that changes the neural pathways.

Maureen Cavanagh: Then there's a wrap up, and all of the resources, both the educational module, all of the resources that were used for that module as well as the self-care, the self care, portion, are given to the participants, so that they can go home and do more research on their own if they want

Maureen Cavanagh: or and or practice the self-care, which is what I hope happens and it usually does.

Maureen Cavanagh: So here is some of the some of the modules. As an educator. I was trained to create curriculum, that is, scaffold and and built on each lesson, and that happens here, but it's also one of these things where you can jump in at any point.

Maureen Cavanagh: So think of it like an IP for families. Short burst of information on topics. The support system most likely would not know about a quick introduction to the stages of change. For example, at the beginning of the meeting and then resources on the topic available. If the participant wants more information.

Maureen Cavanagh: 10 or 15 min of education questions, if any, and then a transition into the open meeting with cross talk.

Maureen Cavanagh: And now we're not just listening to the only only the loudest voice in the room we're listening to facts and information, and the meeting is lightly facilitated.
Maureen Cavanagh: so that if there's somebody that is saying something that's not true, there's somebody there that actually understands addiction that can go back and say, Well, actually, science does not support that that theory.

Maureen Cavanagh: We're not doing edit meetings.

Maureen Cavanagh: bringing everything together in it in 26 weeks these meetings can be held over and over again to do the 26, and they're flipped again. And they can. People can jump in at any time

Maureen Cavanagh: it doesn't have to be my curriculum. This is something that should be happening anywhere, and with every family meeting we have this active audience, anyhow, that want to meet and talk to each other.

Maureen Cavanagh: So you know, we're talking about maybe, you know.

Maureen Cavanagh: navigating treatment and insurance poster care withdrawal center. Most families, if you mentioned post-account withdrawal syndrome. They have absolutely no idea what you're talking about.

Maureen Cavanagh: If I I wish I had known this when I looked at my daughter when she was in recovery, because I often thought she was using it because she was just so miserable.

Maureen Cavanagh: But I didn't understand that it took time for her brain to come back to to the way it was before we do Narcan trainings. We talk about resiliency and positive interventions.

Maureen Cavanagh: the self care. The then there's an open meeting with cross talk.

Maureen Cavanagh: so that you know anything is corrected that it's not, and people are trained in the in the training with bits and pieces of craft, and I have an invitation to change and motivational interviewing. And I do this a lot at treatment centers where people are already trained in in a lot of these skills, anyhow.

Maureen Cavanagh: and then the self care. I always ask people what they're doing to self-care because they can learn from each other.

Maureen Cavanagh: A lot of people think a glass of wine at the end of the night is is self care, and you know, explain to them. You know that's a dopamine spike, and it's not self care, and it's not helping you at all. Really, you need to find something that you can jump back into when you're when you're feeling stressed or concerned that you're going to make a decision. That's not helping in order to get back into that prefrontal cortex. Right? And so the logic and reasoning part of your brain.

Maureen Cavanagh: Unhealthy, family dynamics develop, and families where addiction is present and negatively impact the individual and family health overall.

Maureen Cavanagh: So I was famous for saying, i'll take care of myself when she as well. Oh. it almost feels like you retrain them by caring for yourself, and people need to know that that's not true.
Maureen Cavanagh: So we encourage and introduce self-care techniques. That are easy they're free. They're fairly quick.

Maureen Cavanagh: and it to open up to the group to experience various methods with the intention that offering and up options will help participants find a method of self care that they enjoy

Maureen Cavanagh: self-care is defined as an activity that helps create new neural pathways.

Maureen Cavanagh: and the understanding is that it must be practiced regularly, but that the family never can con a combat, the craving that, or that to respond to their loved one in ways that are not affecting.

Maureen Cavanagh: Some examples are meditation eft, tapping little chair, yoga sound healing. They just nerve exercises all quick, and then the information is given to them, so that if they want to try it again, if it resonated. They can.

Maureen Cavanagh: and I do a family coaching specialty training which encompasses all of this in in training that helps people to create family coaching for their for their organization it just with the State of Vermont

Maureen Cavanagh: and part of their training, and so that they can offer these same coaching experiences like we're learning that ha is so beneficial in recovery.

Maureen Cavanagh: So I will tell you that this is, you know this is not a pipe dream. Imagine that no, no pun intended to imagine you meet a family member, and they say I've been working on boundaries, and Johnny knows he'll need to go from hospital to treatment

Maureen Cavanagh: and be. Ha! So for at least 6 months before he can come home. We've already discussed this, and he knows it's not a punishment or manipulation, and we will support and love him, no matter what he chooses to do.

Maureen Cavanagh: We have learned how to hold space until he is writing, and we hope he is ready. Now

Maureen Cavanagh: I mean, that can happen

Maureen Cavanagh: when I became educated on substance use disorder, and I started to practice self-care and gather with other people that understood that we needed facts and science. Behind the advice I found that I can hold space, and that's the key to being the family member to be that loving

Maureen Cavanagh: source of support that's within the sphere of influence that they can come to. For for an educated opinion or for actual facts, because we research these things, and

Maureen Cavanagh: we don't have to stay out and expect that somebody will know what to do when the time comes. If they've been in the situation in a terrible situation for a long time.

Maureen Cavanagh: Can't do it for them right still Can't do it for them. But we can be of assistance. and we can be that logical, reasonable person that everybody needs when they're in in trial.
Maureen Cavanagh: So I know I need to change, and I love this quote this week to crankle quote.

Maureen Cavanagh: I didn't really know how to change. It took quite a while before I really understood how to change.

Maureen Cavanagh: But

Maureen Cavanagh: you can. You can help people get there. You can help people by educating them and showing them how to take care of themselves.

Maureen Cavanagh: So I used to like to call these treatment opportunities. I know that sounds kind of Pollyanna, but everyone I knew people long and recovery.

Maureen Cavanagh: We've seen it all

Maureen Cavanagh: would all tell me that I needed to get ready for the worst

Maureen Cavanagh: to brace myself, because it wasn't going to end Well, they had never seen anybody go in and out of treatment that many times overdose that many times, and really, as one person told me, I that she had never seen anybody with

Maureen Cavanagh: less

Maureen Cavanagh: will to to to get well. Then my daughter

Maureen Cavanagh: and these were people that were not trying to hurt me. They were trying to be honest with me because they saw what I was doing to myself I mean totally concerned with us at this point

Maureen Cavanagh: she would go to this is treatment opportunity number 37, and she would go to a treatment. A few more times after this photo was taken.

Maureen Cavanagh: and then something happened that no one expected. except maybe for me.

Maureen Cavanagh: She stopped. This was the birthday that no one saw coming 2 months over.

Maureen Cavanagh: She had done. She tried method on. She had tried to box, and she had tried meetings and not, and just not using. She had

Maureen Cavanagh: tried Vivitro once, and never went back for the second shot. This time she tried by the troll, and she went back.

Maureen Cavanagh: and we found her a therapist that specialized in Ptsd and Trauma, which is what she needed for her. This is what worked, because every time she started to do the steps. She got further into the All. The trauma would come back up. She'd be so her long enough to feel how she was feeling, and she needed help for being through that.
Maureen Cavanagh: because she had all of that

Maureen Cavanagh: she would call me, and I always

Maureen Cavanagh: in the even in the middle of this she still had some crimes, and she would call me, and I always pictured her head spitting around like the excess, and tell me that as soon as the shot wore off. She was going to get high.

Maureen Cavanagh: and the next day she'd call me again, and be so glad that she didn't do it. It wasn't easy.

Maureen Cavanagh: The book was finished and handed in days after what would be her last treatment center. I had no idea that that was going to be the case, and the story is story of lots of other people that I had interacted with at the same time.

Maureen Cavanagh: and I had helped to get into treatment and stuff by, because they didn't have anybody, and provided sober living squid, provided hundreds of self for living scholarships. My biggest fear when the book, when the box of books would delive it. A year after I wrote on this, wrote: the book was that no one would be alive.

Maureen Cavanagh: and when the box of books was delivered. I was kind of terrified. but

Maureen Cavanagh: because these stories were stories about people everybody gave up on.

Maureen Cavanagh: But I will tell you that every person in that book is in recovery and thriving today. which is a little bit of a miracle.

Maureen Cavanagh: It was picked up by Henry Hope, which is part of Macmillan, publishing in a crazy way.

Maureen Cavanagh: and released a year after I wrote it.

Maureen Cavanagh: and coming from an Irish Catholic family who believe nothing, leaves this house and earning the nickname in that house of this close to.

Maureen Cavanagh: because I was really good at not talking very unhealthy, I can tell you that, seeing that box of books was terrifying.

Maureen Cavanagh: and and I didn't realize how much of the story of hope that that book was going to be of telling that story.

Maureen Cavanagh: And here's a picture of us one year on her one year sobriety date, speaking in front of nearly 8,000 people at recovery fast, which was an all day, music sober for a sober music festival which I was the executive director in Providence, Rhode Island.

Maureen Cavanagh: I can't begin to tell you all the wonderful things that have happened as she
approaches her 6 year in recovery. But certainly her daughter, that came almost 5 years to the day of her sober date, was the absolute best.

Maureen Cavanagh: She's got almost 6 years now. and my best advice is never to give up hope. Never even allow anybody to give up hope. We have to always remember that

Maureen Cavanagh: if anybody can do it, that whoever we're dealing with can do it to. We got to remind families of that.

Maureen Cavanagh: Anything is possible. If I had to help that I needed, it would have been so much less painful.

Maureen Cavanagh: And if somebody others I know and help the help they needed, they might still have their loved ones by their signs. Thank you for all you do. Thank you for being here.

Maureen Cavanagh: There are other things, you know that we can do that. You're probably all well aware of

Maureen Cavanagh: the families need you. And most importantly for all of you, if you work with families. Now, if you don't work with families. Now, please find training on the specific skill sets the families. Need you to have and let's try to change that we need you.

Jessie O'Brien, NAADAC: Wow! Thank you, Maureen. That was so powerful. I was definitely captivated, and throughout that whole presentation I think our audience

Jessie O'Brien, NAADAC: was to I see some agreement

Jessie O'Brien, NAADAC: in the chat box. There are some questions, so i'll just start off with the ones and feel free to put some more in if you have them. Audience.

Ourvid said. I refer families to allies in recovery and craft. Connect. Do you have any other resources we could guide families to in the beginning of the addiction process.

Maureen Cavanagh: I have the meetings that I created. I do every other Tuesday.

Maureen Cavanagh: and that's right. It's open to the public, and it's on. Zoom.

Maureen Cavanagh: and then spectrum health systems here in Massachusetts also does one every Wednesday.

Maureen Cavanagh: So those but I think those are excellent meetings to the the Allies and recovery meetings are excellent meetings. It's a different structure. So the middle of my meeting is really heavily influenced by invitation to change, which is is allies and recovery, but and said, this center for motivation and change, but

Maureen Cavanagh: the the beginning of the end, or a little bit different, and I think that an educational
Maureen Cavanagh: and I looked over at her one day, and I thought to myself, My God! Is that going left with Because she was not herself anymore?

Maureen Cavanagh: I will tell you she's a 100 times better than anything I could have ever imagined, and she at the core. She's herself because she knows what it's like to go through this, and to come out the other side. She's a magnificent person, and I, when looking at that person at 3 months over 6 months silver.

Maureen Cavanagh: I would have never imagined things would be this good, I hoped, but I would have never imagined. So. Families need to know that there's a a biological chemical process that's going on in a person's brain, for, you know, up to 2 years, maybe even longer.

Maureen Cavanagh: So I think that those meetings are really important. The the educational portion of the meeting.

Jessie O'Brien, NAADAC: Thank you. Someone asked. If you can just put the link to your meeting, or for more information

Maureen Cavanagh: to the Facebook Magnolia in the beginnings. I can do that. I don't have an actual link

Maureen Cavanagh: like No in new beginnings on Facebook. It's every other Tuesday, so it won't be this Tuesday. I know that's a little confusing the meeting. Id is 8 2 9,

Maureen Cavanagh: 3 2 6 7, 1265, it's from 6 to 7, 30, Eastern time.

Maureen Cavanagh: and it would be not this coming Tuesday, but the following Tuesday, probably in September. There will be every Tuesday. But that's what we're doing right now.

Maureen Cavanagh: and the other one is is spectrum, which, and they do those meetings. And those are free, too. here every Wednesday.

Jessie O'Brien, NAADAC: Okay.

Jessie O'Brien, NAADAC: Okay. Next question from Sonia. I've had clients who attended Alan on, and I had to ask them to stop because the message they were giving was in direct conflict with what I was trying to accomplish with the family or couple.

Jessie O'Brien, NAADAC: I've always second guessed myself on that request. Do you feel there is a most appropriate time for family members or partners to participate in Alan on in the addiction recovery, therapy process for families and couples.
Maureen Cavanagh: I think if they think they're alone, if they have no one else to talk to. I think that that Eleanor can be very helpful, and for me I don't. I didn't like the format of that one where everybody just, you know, share stories. That was too much for me. But if that format works for them, I

Maureen Cavanagh: I think it's really important to educate them and and make let them know that just because somebody saying something doesn't mean it's true that you're gonna have to. You know. I I sear everybody to the book beyond addiction.

Maureen Cavanagh: which I think is one of the best books out there for families beyond addiction. How science and kindness help people change! Does that say it all, or what I mean? Because there's this part where we need to be loving and kind with the correct that's like kind of the craft model, and that we also need to know to have skills and and the words for how to how to interact with our loved ones.

Maureen Cavanagh: So as long as they're willing to be open to. Not everything they're going to hear is going to be true that we're dealing with peers and peers may mean well, but they may not always have the facts

Jessie O'Brien, NAADAC: super helpful. Thank you.

Jessie O'Brien, NAADAC: Someone wanted a link to the brain research on family brains.

Maureen Cavanagh: I don't it's in the presentation. But yeah, it's definitely in the presentation. But if you look up University of Texas Tech, the 3 researchers are Bradshaw.

Maureen Cavanagh: Spencer, Brooke, Kimball, and shamway.

Maureen Cavanagh: If you look that research up you'll see it. They just released, I think, Just released their information on on the midbrain. The work they've done in the midbrain. They're just awesome, I mean, you know

Maureen Cavanagh: there's not a whole lot of

Maureen Cavanagh: whole lot of money in in trying to help parents of those that are right, and they're doing it anyhow. So I just they're just awesome.

Jessie O'Brien, NAADAC: So someone asked, You have any suggestions on how to engage the family and many family members I speak to You are not interested in using the resources provided even after I provide education.

Maureen Cavanagh: Well, I mean, I think a lot of times that families are burnt out

Maureen Cavanagh: and there, and a lot of people deal with fear by running away from it. Right? So I think the message out there is, you can't do anything anyhow.

Maureen Cavanagh: you know you can't help. The best thing that I can tell you is to cut them off, and and you know, like, stay away from it.
Maureen Cavanagh: which is ridiculous. And but I like that whole idea of you can make a difference.

Maureen Cavanagh: and not too many people say that we, you know you. You can be part of this if you, if you learn that you know it's not manipulation. It's not punishment. It's it's being a loving source of support.

Maureen Cavanagh: and if you can get that information across, you have a a better chance.

Maureen Cavanagh: But you know you're not going to get to everyone.

That's just the way it is, I mean. I wish it was possible

Maureen Cavanagh: that we can make a difference for everybody. But we're not going to. But I would say, the great majority of people are begging for this. They're looking everywhere for this, and it just doesn't it just doesn't exist.

Maureen Cavanagh: Thank you, someone said. By the way, they found the article, and they printed it out, and they're very excited

Maureen Cavanagh: definitely. Look into that

Jessie O'Brien, NAADAC: wonderful Patricia as do you find insurance will reimburse fast program the fast program

Maureen Cavanagh: I haven't found

Maureen Cavanagh: that I mean, I think we have to start pushing for that that and and sober 11 an insurance reimbursement for over living. I mean it's so much less than than treatment. Right? Why are we not doing that? But we're not. And and this educating parents

Maureen Cavanagh: we can. We can actually save the insurance companies. Money

Maureen Cavanagh: There are states that do, and it reimburse for family coaching. but I think Lucille Shields is doing it in a couple of states. But I I don't it's not the state i'm in, so I don't know about that

Maureen Cavanagh: in continuing with fast laurel asks is the fast program available outside of your area area? And are there opportunities for others to learn how to lead this or facilitate

Maureen Cavanagh: to train people to lead the meetings

Jessie O'Brien, NAADAC: awesome.

Maureen Cavanagh: and that comes the whole curriculum and the Powerpoints and everything else, so that they can just kind of plug and play

Jessie O'Brien, NAADAC: perfect. I think we time for one more. How do families get connected with
your family program, and how much does it cost?

Maureen Cavanagh: I mean, I'm a therapist. So I'm a alcohol and drug counselor, and I do. My family Coaching is just like any other, you know. Therapist charges typical, but and they can get through. They can get in touch with me

Maureen Cavanagh: through my email or my phone number is everywhere. I always say it's gonna bathroom walls, but it's easy enough, and I answer the phone, and people are like I can't let you answer the phone. I was like it's my phone. Why wouldn't I answer it? But I always tell people to. If you have a family that's fallen apart, and they just just tell them to call me, and if they can, if they can afford counseling. Then then, you know, I usually charge for what? Tell them they have to commit to 4 sessions, because we have to make some changes.

Maureen Cavanagh: and if they can't, I'll give them the magnolia. New beginnings.org is where the the Facebook pages live, where the the and then they can find out about the Facebook pages which are free support, and they're very mo. They're heavily monitored. We don't allow people to say things that aren't true. There.

Maureen Cavanagh: you know we we? Yeah, thank you. We we but I can always be reached, and i'm not gonna. I was up on. I was there.

Maureen Cavanagh: you know. I'm a mother before i'm anything, and I was there. So if somebody needs 1520 min of my time, and they can, if they they don't have the money for anything else. I can lead them to free resources, and i'm more than happy to talk to them

Maureen Cavanagh: awesome. Thank you so much, and lots of thank you, is in the chat box.

Jessie O'Brien, NAADAC: Wonderful! And this is such a valuable presentation. Thank you so much.

Jessie O'Brien, NAADAC: Feel like I want to just send this out to people just a reminder, Everybody that am I sharing my screen? I feel like, maybe i'm not. Okay.

Jessie O'Brien, NAADAC: You can see the see instructions. Okay. So just reminder that after this ends you can access the see quiz by just clicking on the ceiling in the in the Thank you box, or you will also get an email that

Jessie O'Brien, NAADAC: has the link as well. For this we have some upcoming Webinars May Tenth

Jessie O'Brien, NAADAC: diagnosis and treatment of gaming use disorder with Jeremy Eberley and Janet Johnson May twelfth, we have the third part in the family series. This is integrating black, indigenous, and people of color, communities and families into recovery, ecosystems, and then the fourth part is on May nineteenth.

So, hopefully, you guys will continue to join us for this series. We love having all these active participants
and learners

Jessie O'Brien, NAADAC: a reminder of all the benefits of joining Nadak for me it's the cease that are available for free through our free webinar series.

Jessie O'Brien, NAADAC: and as a

Jessie O'Brien, NAADAC: prudential and license professional. I have a requirement to get a lot of cease, and that the membership kind of pays for itself. So if you're not a native member. I we hope you will continue join there's lots of other benefits to check out. Thank you so much, Maureen, and congratulations also on being the grandmother.

Maureen Cavanagh: It is so sweet, and we hope everyone will stay connected with us on Linkedin, Facebook and Twitter that you have a wonderful weekend rest of your week, and take care. Thank you so much.