

September 2011

THE

NEWSLETTER

Fairbanks Native Association

FNA staff bring volunteer energy to community events



Jeanette Campbell, second from left, a child advocate at the Ralph Perdue Center, is a volunteer who makes a difference. In October, she helped friends and members of the Filipino-Am Society of Fairbanks organize its annual presentation as part of International Friendship Day. L-R, Malou Walter, assistant secretary, Piya Wienberger, treasurer, and Violeta Colbin, secretary.

Jeanette Campbell is Ralph Perdue Center's Office of Children's Services case manager. Her work entails advocating to the state for the return of children to parents who have completed, or are in the process of completing, treatment. Working within legal boundaries and in partnership with the State of Alaska, her mission is to reunite children, who were removed for safety issues, with their families.

In cases assigned to Jeanette, children are initially removed for immediate safety concerns, where the state has been alerted by family, community members or the police. This trips an imposed 15-18 month separation, with the child being cared for in a safe house. The time is best used by the mother for intensive treatment.

Depending on individual circumstances, Jeanette's consumers may find treatment at

RPC, or one of the other four programs FNA operates, including the Women and Children's Center for Inner Healing. In the latter stages of this program, children and parents are reunited in a monitored environment.

Jeanette has upwards of 50 mothers in her active files on a given day. Each is at a different stage in a progression to sobriety. Some have just arrived in the program, some are midway through the 60-day stay, others are on the verge of graduation.

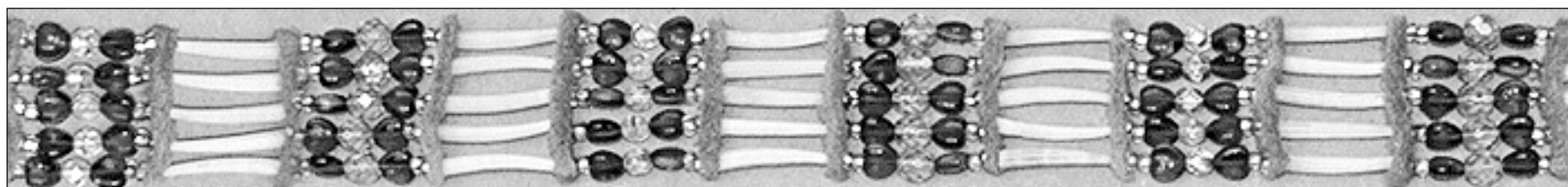
"When we first meet I tell each one, you're not alone and I'm not your enemy, Jeanette says. My efforts are focused on individual service. For instance, we provide active support. From helping get bus passes for transportation, and if that's not an option, we help get people to doctor's appointments and job interviews. I work with Alaska Housing and Finance to locate housing for families. Pregnant women are always a priority, including assuring that they have the right vitamins."

Once families are reunited, active monitoring continues for a period, though at reduced levels. Relapses threaten months of progress and further separation, however, people make choices about their destiny. A point Jeanette emphasizes when mentoring young mothers.

Jeanette Campbell is no stranger to advocacy. A petite woman with dark hair, she learned the skill competing in a large family and later as the wife of US Air Force officer working her way through school in upstate New York.

Born in the Philippines, Jeanette's multicultural interests include frequent visits to far off places. In recent years, she's traveled to Israel, Egypt and Nigeria. In Nigeria, a place

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Interviewing “Linda”: a resident of RPC’s treatment program speaks about yesterday, tomorrow and the present moment

Editor’s Note: In order to provide readers with the fullest understanding of FNA programs, a consumer of FNA services spoke about her experience at the Ralph Perdue Center (RPC). In the interest of confidentiality, “Linda” is an assumed name.

Each individual’s personal circumstances and choices are unique. However, the details of Linda’s life are familiar to the staff at RPC. A pleasant-looking woman, she is 35 years old, has twin children at home, and is not married. She recently suffered a miscarriage. Her mother is an alcoholic; she doesn’t know her father. She was raised in foster homes and has 20-year history of drug and alcohol abuse. She is highly verbal and well-spoken; nothing in her appearance indicates the turmoil in her life.

Asked how she came to be a resident at the Ralph Perdue Center (RPC), Linda said, “I got sick of being numbed out.”

Linda says the RPC staff is understanding, that from the beginning they listened and considered objections from consumers. “They don’t use big words. They explain everything. They don’t duck questions,” she says.

“We follow a schedule that sets out everything from 6:30 in the morning to 9:30 at night. We get three meals a day, a hot lunch and a hot dinner. The meals are pretty good. We have kitchen and cleanup duties. Everybody works,” she says.

Linda has been through other intervention programs without long-lasting success. Most recently, after 38 days of sobriety, she relapsed. She says such failures are a blow to self esteem, but the staff tell her they expect relapses. Then they explain how to start again. At the time of this interview, Linda has been living at RPC for 64 days.

“It took three weeks for me to see that it

was working,” she says.

Linda says residential aides are a big help, saying they provide useful tips when a consumer is having a rough day.

Linda credits RPC for standing by her. She says were it not for RPC she would be in jail for a probation violation for an earlier court judgment. In some cases, the courts see RPC as an option to jail. Linda has degenerative disk disease in spine, a painful condition that requires drug therapy. The local jail will not allow it, however, in RPC’s highly monitored environment, Linda can get pain medication.

Part of the RPC’s program utilizes existing community resources. RPC consumers are

required to attend 12-step programs. Fairbanks has many to chose from; in Linda’s case she attends 12-15 12-step meetings a week. The experiences put her face-to-face with many other people who are also struggling to regain sobriety and independence.

Linda expects to complete RPC’s program soon. She says it’s changed her life for the better.

To help her after she leaves RPC, Linda has three sponsors who will support her efforts to stay sober. As she considers her future, she’s proud of the life skills she learned at RPC. Hidden grief and trauma that characterize

her past is being openly discussed, bringing healing with exposure. A greater awareness of her sensitivity to alcohol and drugs provides boundaries for safe conduct. She’s looking forward to being reunited with her children.

Linda is likely a success story. She has the skills, temperament and resources to live independently, to parent her children and share her story with others who face a similar crisis. However, the road to recovery is not a sure thing. The staff at Ralph Perdue Center urge their consumers to live one day at a time.

[...with excitement in her voice,]
Linda says,

“It took three weeks for me to see that it was working.”

Fairbanks Native Association

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FNA’s Mission

We provide our membership and the greater Fairbanks community quality services in a professional manner. These services are provided through special and innovative programs, which preserve the membership’s unique lifestyle and culture, while improving the quality of life for the community.

Steve Ginnis, Executive Director
Doreen Deaton, Administrative Director
Duane Hoskins, Director of Finance
Rhonda Howard, Director of Human Resources
Angela Foster-Snow, Dir. of Planning & Development
Perry Ahsogeak, Behavioral Health Services Dir.
Siobahn Lynch, BHS Clinical Director
Ben Ramos-Nieves, GRAF Program Director
Suzanne Price, WCCIH Program Director
Wanda Kularski, Enhanced Detox Program Director
Mary Willey, Head Start Program Director
Cyndalea Pett, Acting Early Head Start Program Dir.
Shirley Williams, PAT Program Director
Freda Williams, Community Services Program Dir.
Louise Glynn, FASAP Program Director
Linda Woods, Johnson O’Malley Program Director

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she’s visited many times, Jeanette, worked as a volunteer social worker for two-week stints.

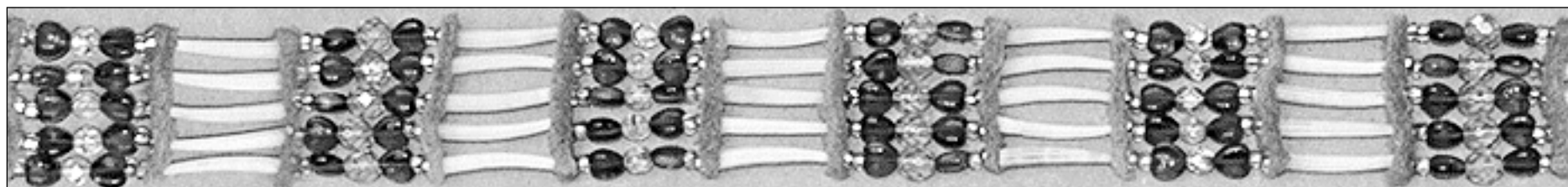
Even in a brief look at Jeanette’s volunteer work in Fairbanks, it’s easy to see that she’s invested in the community. In its early years, she helped guide Habitat For Humanity. She’s been the state chair of the National Federation of Filipino American Associations and has helped organize International Friendship Day each October.

Education remains a hallmark of her life. After several years at UAF, she’s within six credits of completing a master degree in community psychology.

She maintains a close relationship with her mother and family in the Philippines. She calls her mother “a feisty old woman”. She lives in the family home in a town about the size of Fairbanks. Though she’s nearing 100 years old, she often “escapes” the house in Luzon, 250 miles north of Manilla, for shopping sprees in local stores.

Jeanette, who is 59, has four children, es-

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RPC welcomes new director Siobahn Lynch

Siobahn Lynch is the clinical director of Behavioral Health Services. (Siobahn is an Irish form of Joan and is pronounced “Shi-vaun”.) The Ralph Perdue Center’s 10-bed resident substance abuse program is one of her responsibilities.

Widely known in Fairbanks for its facilities, RPC’s residential program is 45-days-long, co/ed, and has a rolling admission. The program is always full. Presently, there’s 30 people on the wait list.

In addition, Siobahn manages RPC counselors and intake specialists, provides clinical oversight the Graf center and Women and Children for Inner Healing, as well as clinical review of the detox unit. She also brings to the position skills in budgeting, grant writing, education and public awareness.

Siobahn is new to FNA but well acquainted with the problems connected with alcohol abuse in Alaska. In 1991, fresh out of Gonzaga University in Spokane, WA, with a degree in accounting, she intended to use the skill as a Peace Corps volunteer. A paperwork delay caused her to reconsider her options. Within weeks she was in Nome, Alaska working as a Jesuit volunteer accountant/bookkeeper for KNOM, the region’s radio station.

“I lived with other volunteers; there was a stipend and room and board,” she says.

Captivated by Alaska’s vast distances, living indigenous cultures and the social problems that arise in connection with Western influences, Siobahn began looking for other ways to become involved. This led to a second tour as a Jesuit volunteer, this time in the Nome women’s shelter. The experience introduced her to the field of alcohol and drug treatment.

More education led to a masters in social work and graduation from the University of Alaska Anchorage in 1999. In Fairbanks, she accepted an intern position at Graf. Moving to Tanana Chiefs, Siobahn worked as a child and

adolescent therapist in its mental health clinic from 1999-2010. She joined FNA May of this year.

She is married to Conrad and has two children, Sophia 6, and Sebastian 3. The couple is building a home in Two Rivers, making improvements and finishing as they go. They were drawn to put down roots in Two Rivers, in part, because of the area’s trail system. The family has eight sled dogs who love to run. Country food, moose and salmon, is often on the table. Dipnetting at Chitina is part of the family’s seasonal routine.

Turning to the programs she manages, Siobahn says, “We treat addiction by discovering the underlying grief and trauma that creates the behavior. We provide lessons in life

skills that lead to recovery. Mental health and relationship problems may exist and, if appropriate, we make referrals to other providers.”

She says disappointment comes with the territory. Success is provisional. For some people, recovery will be a lifetime effort. “We look at time in treatment as harm reduction, for

that period their addiction was not effecting their family or the community.”

Treatment professionals are aware of the inevitable cycles between sobriety and drinking or using; success, they say, is tentative. Each has stories of people who’ve lost years of productive activity, along with the kids, wife and the job.

Take the story of a chronic inebriate, a male between the ages of 35-65, who lives rough, a street person. He volunteers for detox and goes through the residential program. He stays clean for 150 days, then relapses back to detox and is now sober.

Alaska Natives remain over represented in jail and prisons, the result in many cases of alcohol-fueled behavior. “We need more resources, definitely,” says Siobahn. Observers point to the wait list as a strong indicator of need.

According to entry data, RPC’s services are used by all members of the community. The

CAMPBELL Continued, From Page 2

essentially raising them on her own while she went to school, graduating with a B.A. degree in human services. Then, more than 20 years ago and with a one-year commitment and five return tickets, she took a job as a nurse at the family health clinic at Eielson Air Force Base. At the end of the first year, the kids voted to stay in Fairbanks. Now, they’re all adults with degrees, good jobs and are living independently.

When it comes to mentoring young mothers this is the sort of credibility that makes people pay attention. Jeanette applies this experience in one-on-one parenting classes and extends its range to include anger management and sharing community resources.

Jeanette’s goal is to integrate in struggling new mothers the core concept of responsibility and a child’s emotional and physical requirements. With a case load that includes as many as 49 children at a given time, she juggles competing demands for her time with practiced control, planning two and three steps ahead.

demographics are roughly even between Natives and non-Native consumers.

In the case of women, especially mothers, Siobahn points out, treatment specialists have an advantage. “When children are removed from dangerous situations, we offer mothers treatment. If they progress toward sobriety, the children are brought in for visits. It’s both an incentive for the mothers and gives us the opportunity to observe behavior. If things go well, mothers are given provisional custody.”

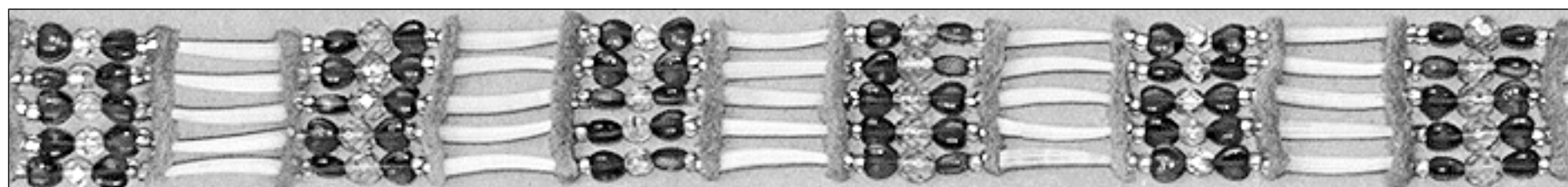
Motivational interviewing is the counseling approach adopted by RPC. It involves collaborative conversations that lead to engaging motivation to change behavior by developing discrepancy while exploring and resolving ambivalence in the consumer. Motivational interviewing is so effective in creating change that corporations sometimes use it in sales and marketing campaigns.

According to Siobahn, treatment is less confrontational. “There’s active listening; we use open-ended questions and we support the autonomy of the consumer. We work with mind, body and spirit. The approach leads to long-term effects and positive regard in consumers,” she says.

Despite success rates, FNA is compelled to offer treatment. “It’s an honor that people share their trauma, pain and suffering with us, says Siobahn. Helping people is a rewarding gift.”



Siobahn Lynch at her desk in RPC’s office. Her alma mater, Gonzaga University, was started in 1887 as a Catholic school for Native Americans.



Personal experience informs RPC counselor's treatment approach; trust builds rapport

John Yates is FNA's outpatient counselor. In his sparsely decorated office, family photos are prominently displayed. A slim man with short blonde hair turning gray, John is 53 but looks younger.

John says staying active is important to his work and family life. He favors running to maintain his weight. But experience tells him that physical activity also promotes well being. Brain chemistry science validates what he's discovered at a personal level. A runner's exertion pushes blood to the brain's far reaches and creates "feel good" chemicals that lift spirits and renews commitment.

John's also in favor of doing things out of the normal routine. Earlier this year, John and his family headed to the hills near Healy for some camping and a needed change of perspective.

Raised in Rochester, NY, John became a state resident in 1999. Before landing in Fairbanks, he worked in McGrath, Galena, Dillingham and Seward as a counselor. John joined FNA in August 2010.

With a degree in human services, he's attending UAF where he's pursuing a degree in social work. He's married, lives with his wife, Pattie, in North Pole and is a stepfather to three children and seven grand kids. "Three dogs and two cats," round out his immediate household, he says. When he's away from FNA, family life occupies his attention.

As a recovering alcoholic, John's sensitivities are effective assets when working with FNA consumers. He says "radar" helps him key in on active abusers, an inner knowing that decodes denial and excuses. Those who come to him for help soon appreciate his "BS" detector.

Some of John's earliest memories are of 12-step meetings he attended with his mother. Though she had stopped drinking five years before his birth, she found support in the continuing care offered in a 12-step program. Despite those early lessons, John was lost to alcohol by

the time he was 12 years old. He drank almost daily for the next 20 years.

"We know now that alcoholism is a brain illness, cognitive processes are affected. People are not thinking clearly. I think that leads to defensiveness, excuses and making alibis. It affects people's logic," he says.

RPC's program requires assessments of consumers to determine how to most effectively assist recovery. The information John gains in initial interviews about the quantity and frequency of the habit, family and life history, education and employment, as well as the extent of damage indicate the best course of action.

In group and individual contacts, John uses this familiarity to help people connect thoughts and develop alternative perspectives.

Working with as many as 20 people in his case files, John leads multiple group counseling sessions each week. There's a standard session and another that's geared toward intensive discussions that encourage explorations of grief, loss and rage.

The treatment of alcohol and drug abuse disorders finds its greatest success when consumers are assured of compassionate and respectful care. John's approach to these imperatives is to leave the mistakes and regrets in the past, where they belong.

Continuing care under John's guidance is available for those who need it. There's a wait list, however. Demand exceeds resources on a regular basis but the wait list is prioritized, with pregnant women at the top.

Aware of the power differential in counselor/consumer interactions, John says he works to develop relationships where autonomy is not challenged. His personal and family history is a special tool used to forge the connections his consumers need. Revealed in one-on-one conversation, John's transparency helps smooth the way for the sort of therapy that leads to sobriety.

"People's thinking gets so twisted up," he says, "that it takes commitment and effort to stop. There's so much fear and ignorance to be overcome as each individual progresses toward the goal. We're here to facilitate recovery."



John Yates uses personal experience to guide people toward sobriety.

Motivation Interviewing, RPC's treatment model

Motivational interviewing is considered to be both consumer-centered and semi-directive. It departs from traditional consumer-centered therapy through this use of direction, in which therapists attempt to influence consumers to consider making changes, rather than non-directively explore themselves.

Motivational interviewing is based upon four general principles:

1. Express empathy, guides therapists to share with consumers their understanding of the clients' perspective.

2. Develop discrepancy, guides therapists to help consumers appreciate the value of change by exploring the discrepancy between how consumers want their lives to be vs. how they currently are (or between their deeply-held values and their day-to-day behavior).

3. Roll with resistance, guides therapists to accept consumers reluctance to change as natural rather than pathological.

4. Support self-efficacy, guides therapists to explicitly embrace consumer autonomy (even when consumers choose to not change) and help consumers move toward change successfully and with confidence.

Motivational interviewing is non-judgmental, non-confrontational and non-adversarial. The approach attempts to increase the consumer's awareness of the potential problems caused, consequences experienced, and risks faced as a result of the behavior in question. Alternately, therapists help consumers envisage a better future, and become increasingly motivated to achieve it. Either way, the strategy seeks to help consumers think differently about their behavior and ultimately to consider what might be gained through change.

The main goals of motivational interviewing are to establish rapport, elicit change talk, and establish commitment language from the consumer.

If you take responsibility for what you are doing to yourself, how you produce your symptoms, how you produce your illness, how you produce your existence — the very moment you get in touch with yourself — growth begins, integration begins.

-- Fritz Perls

