

INTRODUCTION BY FRANK BIDEN

# SMASHED:

## Sober (with a twist)



NOËL NICOLE RIHM

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**Sober (with a twist)**

**Noël Nicole Rihm**  
Introduction by Frank Biden

## Introduction

We've spent the last 75 years pretending we understand alcoholism. We've spent billions on treatment and research, invented whole new diagnostic categories, and built an entire industry around slogans like "relapse is part of recovery." But what do we really have to show for it? An 85% failure rate. Shame dressed up as support.

I know this firsthand. My drinking nearly killed me, more than once. It tore through my life and left a trail of destruction. I've been to countless rehabs. I've sat in church basements. I've looked my family in the eye, and I've looked over the edge of a bottle and wanted not to live.

But here's what saved me: not a pill. Not a diagnosis. Not a script. What saved me was Love. The kind that never gave up on me and eventually the kind I learned to give myself.

See, I come from a family that believes in second chances. When I was at my worst—truly hopeless, unable to stop drinking, praying not to wake up—my siblings threw me in the back of the family station wagon and drove me straight to rehab. My brothers Joe and Jim never let go of me, never! Neither did my sister Val, even when she didn't know where I was for weeks and feared the next call would be the one that confirmed her worst fears.

That's the power of love. Of connection. And it's what this book is really about.

When I first spoke publicly about my alcoholism, I didn't do it to get applause—I did it because I want to change the story. In America, we treat cancer patients with compassion. I know first-hand, I have prostate cancer. We have massive research efforts underway.

The Biden Cancer ‘Moonshot’ is one such effort. But we treat alcoholism like a character flaw. We whisper it. We judge it. And then we wonder why people don’t get better.

The truth is, I’ve been in the rooms. I’ve been on the edge. I’ve met too many men and women who believed they were broken beyond repair because a treatment model told them so. We deserve better. And this book? It’s better.

Noël Rihm doesn’t pull punches. She knows this landscape from both sides—healthcare executive and desperate patient. Her story is raw and real and, most importantly, useful. She’s not trying to coddle you. She’s trying to wake you up. Because here’s the secret: the problem isn’t the alcohol. The problem is the pain underneath it.

When I met Noël, we connected instantly. Two survivors. Two seekers. We first crossed paths at an ayahuasca retreat—both individual survivors looking to ignite worldwide healing... That retreat wasn’t the only magic. But it was part of the process. The real medicine is what happens when you find your pain, name it, and walk through it with help. The spiritual part? That matters. This isn’t about a higher power you have to define. It’s about reclaiming your soul. As I’ve said before: addiction is a spiritual disorder. A disconnection from ourselves, from God, from love.

And now, blessed with the understanding of all that is possible, I’m committed to more than my own recovery. I’ve spent years advocating for real reform—from the mental health parity act in insurance coverage to increased access to meaningful addiction care. But that expanded access won’t save us unless the solutions actually work.

If your path to liberation is paved with prison doors, you don’t need another trip to rehab—you need a

map out of Hell. And let's be honest: no one is coming to save you. Not the rehab industry. Not the court-ordered counselor. Not a new prescription for something that isn't a disease. If any of that worked for you, you wouldn't be here. You're not the failure. The system is. It's been running the same playbook for decades and even if it found something that worked, it takes 17 years for the standard of care to change anything. But they aren't changing. They have no incentive to change. Rehab pushes the same shame-soaked scripts, hoping you'll blame yourself when it doesn't work. You were told relapse is part of recovery so many times, you started to believe it. But what if that's not true? What if the cure *they* sold you was never meant to heal you at all?

The problem is - rehab wins when you stay sick. That's the part they don't print in the glossy brochures. The whole machine needs you broken, labeled, relapsing—because every setback keeps the lights on. And the worst part? They think they're helping. There's no reasoning with someone who believes their own lie. So here's the truth: you need your own wake-up call. Not another promise, not another step, not another peptalk from someone who's never stood on a balcony thinking today might be the day. You need a new system—one built to heal you; not hold you hostage.

That's why I'm writing this. Because if you're holding this book, you've got a chance. And if you're ready—truly ready—it might be the most honest thing you've ever read.

You are not powerless. You are not incurable. You are not alone.

Let's change the whole damn story.

—Frank Biden



## Acknowledgments and Dedication

Some books seem to pour effortlessly out of the author; others must be coaxed and seduced. I could not have written these pages alone. Though the story belongs to my own lived experience, it has been shaped, supported, and carried forward by countless people whose love, patience, and encouragement steadied me when the words felt too heavy to put down. To all those who walked beside me—sometimes quietly, sometimes insistently—I offer my deepest gratitude.

Darren, you were my partner in every way in bringing this to life and were at the genesis of *The Little Book*. Billy, you tirelessly read and edited every character as your own story began to take crisp relief, now forever intertwined with mine. Charlie, you brought the mirror and the polish. Joanie and Kym, your sisterhood and early (generous, but pointed, as I've come to rely on for decades) editorials shaped so much of the direction. Maria and Nicole and Brock, you helped me find my initial footing and the courage to persist. Mom, you read for syntax (of course!) and emotional resonance and helped me find my voice without fear. Archelle, you may never know how much you ignited when we reconnected. Molly and Trey, without your support and guidance, this would all have been just a dream, and I'd be bunking in your shed. My dearest friends in – and out – of all kinds of programs, you were gracious enough not to be too triggered; and to

those still struggling who bravely shared your own stories...may you each rise from the ashes like the phoenix you are. Frank, the intersection of our journeys was Divinely orchestrated, and your guidance and love of the work propels me. To Puerto Vallarta, where I found my own soul, and to San Miguel de Allende, where I rediscovered the girl I'd lost.

I dedicate this story to my extraordinary children, Max and Zoë, and to Emma and Ben; you've bravely endured too many of the twists and turns. Each of you has found your own blissful way forward. As connected and inimitable as earth, air, fire and water, you four are my inspiration. You are the proof that *we will change everything.*

## Noël

# **Passages:**

**Apologies**

**Coddiwomple towards Bastante**

**The Little Book**

**Alcoholism is Not a Disease**

**If It's a Spectrum...Aren't We *All* on It?**

**I'm Sorry It's Come to This**

**Work, Work, Work**

**Client Zero: Life is an n=1**

**If It's Not One Thing, It's Your Mother**

**Life is A Co-Occurring Disorder**

**There's No I in Ayahuasca**

**Rehab and Other Gap Years**

**Without Warning: An Epilogue (of sorts)**

“Those who were seen dancing  
were thought to be insane  
by those who could not hear the music.”  
~ Friedrich Nietzsche

**Coddiwomple:** /kɒd.i.wɒm.p(ə)l/verb  
to travel purposefully towards a vague destination

**Kaleidoscope:** / kə-ˈlī-də-,skōp/ noun / 1. a  
tube of mirrors reflecting infinite possibilities from  
chards of colored bits 2. a group of butterflies

You cannot awaken a person  
who is pretending to be asleep.

~Navajo proverb

## Apologies:

This is one-part memoir, one-part cautionary tale, one-part love letter.

I have no secret decoder ring; instead, I'm offering a short cut. My partnership with alcohol was long and storied; it cost me nearly everything. Yours doesn't have to.

Recently, a would-be editor suggested that it's a rookie mistake to begin by waving you off this book. That it would be better to just let the story unfold for you (and let the books fly off the shelf!), fueling your hope. But there is enough doubletalk, noise, and subliminal seduction surrounding alcoholism, and too much nonsense about how to rid it from your life. This book is about success, for those who want it. I'm not particularly focused on this being a New York Times best seller – I'm focused on *eliminating* alcoholism. So, I decided not to baby you – I'll be blunt from the very start.

Here's the Black Box warning label: If you aren't yet ready to quit drinking: don't read this. I suggest you keep this from your loved ones, your employer, your friends. The most important lesson I have learned, is that there

is nothing external that will accelerate your willingness to save yourself from suicidal drinking. No threat or promise will be enough – your readiness must come from within. Once you stare at the naked truth on these pages, it will be very hard on you, and those you love, until you are ready. You won't be able to unread, unknow, unsee. So, perhaps bookmark this and set it aside. You're living with enough torture. Don't add to it.

If you are ready to quit drinking, may you find hope in my journey. Understand, there is no foolproof recipe, no one program or therapy, no prescription that will forge your perfect path. I offer you no gimmick. You will probably not be healed at the end of this book. But portions of it may haunt you, nag you, until they force you to prove me wrong, incompetent, even reckless. I welcome the debate. Let those wispy revelations start to penetrate deeper until you *have to* look for yourself, draw your conclusions, and carve out your own path to peace. I dare you.

## Coddiwompling Towards Bastante:

Life “after” alcohol is a game of constant adjustment – I call it “failing *fast*” – and it never ends. My recovery is entirely dependent on knowing that no technique or therapist, meditation or motivation, song or solution is guaranteed to work for me today. I cannot rely on yesterday’s answers – as Lewis Carroll’s Alice reminds us, “it’s no use going back to yesterday, because I was a different person then.”

Some people seem to find recovery in a singular approach or method. I envy them, this tiny fraction who can find **one** way to recover and permanently maintain their bliss. I am different; I need a bottomless suggestion box, teeming with creativity and variety, and I must be ready for every single suggestion to mostly fail. But, unlike my doctors or therapists or treatment centers, I fail *fast*. What works for me is fluid, constantly changing, trial and error, just like me. When yesterday’s solution fails me today, I reach for another, another, another. I’m not afraid of discovering a ‘chink in the armor’ in any suggestions or strategies – I expect it. And, when everything I reach for falls short, *today*, I hit my knees – which is as far down as I ever need to go, and I find my

own footing again.

This story focuses mainly on the alcoholic. I expose the “ick” in ‘alcoholic’ – the flaws in the premise, the deficits in the diagnosis, the hopelessness, deceit and laziness in the “evidence-based” treatment. Whatever conclusion you reach about the foundational underpinnings of alcoholism, there are 30 million of us in the US alone, so it seems a safe place to start.

Each year, 6 million Americans will attempt to quit drinking through one or more of the recommended “standards of care”— rehab, 12-step meetings, therapists, physicians, even comically-inspired prescription drugs. The recovery industry is littered with carnival barkers of every variety, each promising that *their* program, prescription, premise will get you sober. While they each share the certainty that their way is ***the*** way, they also universally share abysmal results.

Of those who try to get sober, 85% ***will fail*** within twelve months. Nearly ALL of them, using ANY accepted method, will fail. The other 24 million won’t even attempt to quit. Which means roughly 3% of alcoholics will end their suffering in any given year. Hardly a cause for celebration, let alone smugness,

from the treatment community. It also causes wonder that they think the problem lies in education, financing and access to care. Very little “care” is being delivered to those who have the resources – access is little more than a politically popular level to pull. It doesn’t have to be this way.

This is for the 85%-ers – those of you who have an intimate knowledge of that insidious fallacy, ‘Relapse is part of recovery’. You are part of the staggeringly high number of people who live in a state of intolerable agony – a pain so great that the consequences of your drinking pale in comparison to living without alcohol. Until you discover something else that is equal to that task – eliminating the pain that is causing your downward spirals -- the drinking will likely, eventually, continue. Far from the ‘insanity’ label it’s often tagged with, it’s a very logical, unconscious calculus for the alcoholic. The pain is extinguished by the alcohol. Alcohol does its job, predictably, reliably, where nothing else seems to. Period.

I know that your pain, outsized and constant, is the most real thing in your life. I know that because alcohol is providing the only dependable relief for your pain, it has become the most important relationship in your life. Though the consequences of your drinking

are piling up, I also know that drinking is not the core of the problem. So, if you are still suffering, then this is for you. I won't try to empathize, sympathize or even understand *why* you drink the way you do. I don't need to -- I'll go you one better. I **believe** you.

I have also found enough peace and perspective to have something of value to offer to your friends and family – to all of us who love someone that is 'still alcoholic'. Like me, every alcoholic is someone's friend, daughter, mother, lover, boss, aunt, employee or wife. Often *really* bright, otherwise loving and motivated, the alcoholic in your life is silently telling you that even the direst consequences *from* their drinking – arrests, violence, loss of income, loss of family, loss of life -- the incalculably high toll of human wreckage *is better* than the intolerable pain they feel without it. Lacking the understanding, they likely don't have the vocabulary to describe their pain. They may not even acknowledge it or understand its genesis. But they are screaming on the inside, frustrated, confused, giving up and slipping into the powerlessness that the drinking cycle dictates.

There's little debate about the mess we're causing with our drinking problems. The

evidence of societal decay is all around us – divorce, poverty, imprisonment, death. The various institutes which study the total cost of alcoholism cite figures from \$75-\$150 Billion in indirect costs **after the \$53 Billion in** direct medical spend, which only relieves about 13% of the alcoholics who seek traditional care. So, let's spotlight the real insanity and get curious about why the contemporary system seems addicted to getting the treatment of addiction *all wrong*.

You must let go of trying to empathize, understand, justify the actions of the alcoholic in your life – the math will never pencil. You, too, have a straightforward choice to make. You can leave, or, as unimaginable as it seems, you can *believe*. The first step in helping the alcoholic in your life is simply believing the simple juxtaposition – the alcohol is their solution to a very real problem. Once you believe, you will feel compelled to do something different.

The alcohol is almost entirely *beside the point*. That's tough to swallow. Society, medicine and science are all pointing exclusively at the alcohol – they seem to *want* the alcohol to seem spooky, cunning and baffling. But it's the **pain** that must be extinguished. While everyone is staring intently at the drinking,

they're ignoring the source problem altogether. If all you do is remove the alcohol, you may have solved *your* problem with the drinker in your life, but you've stolen *their only viable solution*. You've disarmed them while inadvertently weaponizing their pain. If all you do is remove the alcohol, you may have just trained the gun squarely back at them.

Instead, if you decide to *believe* your loved one, things must change. You must insist on real *relief from their suffering*. Be vigilant, diligent, indefatigable – just as you would be if they had debilitating, crippling, physical pain. Be present, patient, persistent. You must reject the systemic falsehoods and insist on personal, individual success.

It was nearly ten years ago that Johann Hari gave the pivotal Ted Talk, entitled, “Everything We Think We Know About Addiction is Wrong”. His entire talk is brilliant and well worth the investment of fourteen minutes on YouTube-- his observations were vanguard and irrefutable. Yet, in the ensuing decade, little has changed in the treatment of alcohol or the societal conditioning that supports it. He closed simply, profoundly, with this: “the opposite of addiction is *not* sobriety. The opposite of addiction is connection.”

People who are not in the grip of karmic agony rarely drown themselves in vodka. They just don't. They tend to lead healthy, connected lives. They thrive. Johann methodically challenged the 2015 status quo – the institutions *and* the attitudes. He calls out our completely ass-backward approach to addiction, quoting Dr. Gabor Maté in his research, who remarked, **“if you wanted to design a system that would make addiction worse, you would design this system.”** Sadly, this ‘system’ swallows and belches up millions on millions of sufferers every year.

It's tempting to demonize the liquor industry, who market their wares as sexy, sophisticated, fun. Unless you acknowledge that, for some people, alcohol does seem to have some harmless social appeal. Even the edges of normal social drinking are fraying a bit: I was recently in a popular housewares store in New England and was dismayed to see that most of the tea towels and tacky home plaques were imprinted with snarky (but admittedly clever) quips, all seeming to glorify a new breed of “Mommies Who Drink When the Kindergarten Bus Pulls Away”. But the fact remains, lots of people do drink socially, moderately, “normally”. I have scores of friends who can extol the virtues of a fine

cabernet with the kind of reverence I reserve for romance. The fact of alcohol doesn't *create* alcoholic drinking, nor does its prohibition seem to limit its production or consumption. The liquor industry isn't the culprit in the shadows, we are. Move on.

It's even more tempting to demonize the so-called mental health 'system' for its often manipulative, deceptive, hope-hocking, incalculable greed. At times, their unchecked inscrutable behavior makes them a worthy target of our frustration. But I have arrived at a different conclusion.

Over 32 years, I was an influential executive at several major players in the healthcare industry, I also spent some 30 years (and well in excess of \$1M) as their reluctant-at-first, then increasingly desperate, guest. From my VIP seats as both an insider and a patient, I have learned that the results we achieve in the treatment of 'alcoholism' are mostly accidental. I've literally slept in the beds I made; the true industrial strength crimes are the product of a toxic blend of incompetence and hubris.

Tragically (which sounds like I'm elevating my own significance, but I did become quite pathetic) it took over a quarter century of loss

and suffering to find any real relief from my own pain. To trip over, and rediscover, my own soul. To set a course to become the most extraordinary version of myself. To love and be loved. It doesn't have to be so hard for you or your loved one. I urge you to take the short cut now.

There are too many theories about the myriad paths to a healthy connected life to honor with sufficient attention here. I'll detail my experiences with some of them -- the good, bad and the inert. *Your* journey is about discovering the ideas that *you* can embrace. Get really comfortable with the challenge that implies – the answers are inside you, waiting to be unlocked.

I met my dear friend, Dana, during her first trip to rehab (sadly, by then, my fourth). She carried a notebook and pen, faithfully scribbling every other drunk's half-baked theory on recovery, then set about copying them intently, certain she would discover the answer key and get sober. In addition to this being patently rude rehab behavior, which made her slow to attract friends, Dana is still a drunk. Not because those (other people's) ideas can't work for her – perhaps they could. But because she hasn't found any real relief for her intensely personal pain, it's impossible

for her to recognize what might be good *for her*.

Remember, the alcohol isn't just the *symptom* of her underlying problems; as distasteful as it sounds, it's her *solution*. Until she finds sufficient relief from her internal, personal agony, she can't discover what will work for her. Until the pain disappears, she cannot meaningfully participate in her own recovery. Until the pain is right-sized, sorted, eradicated? She's standing in the outfield trying to catch pop-ups without a glove – even if she gets a touch, odds are, it'll be a stinger. It's like living in Mrs. Pigglewiggle's upside down house: when she feels "all wrong", it's impossible to see what is right.

Just like their toddlers and teens, everyone's sobriety looks great on Instagram. So, Dana stays trapped in a cycle of inauthenticity – all admiration and imitation – trying to rewrite her future using other people's success stories. Not surprisingly, she ends up confused when their methods fall short for her, slipping further into the certainty that nothing works for her, at all. Except alcohol. While she, and her caregivers and family, are keeping the spotlight on the alcohol, no one is focusing on her actual pain. All that's left that seems to work is the alcohol. That's the real lunacy.

During my many years of personal seeking and scorekeeping, I have encountered, discarded, and re-discovered many potential explanations about how we individually experience the world. This story reveals my core beliefs about trauma — Capital T and little t traumas — and provides the best explanation I can offer for how my own traumas held me back, how I changed my own course, and the freedom and purpose I enjoy today.

Several years after my last swig of vodka, I met an incredible man. My partner in every way, Darren has been spared the agony of loving me through active drinking. He's Australian, so his original reaction to my alcoholic past was incredulous and a little comical, "what do you mean you can't drink at all? Like, not even *at weddings*?" His eyes have been opened wide on this front, and he's expanded my own lens through his observations on depression, isolation, and other areas of misery he has confronted. So, we set out, with not much more than an emerging hypothesis, from Mexico to the other side of the world, and back. To see if there was another, shorter, path to creating lives we don't want to drown in alcohol. To see if there

was something left of grace and peace in a crumbling world.

With freedom and perspective, we got a fresh take on abundance. Not the saccharin, glass-half-full, rose-colored glasses, manifesting kind of abundance...you've almost certainly got a motivational app for that kind of magical thinking. Instead, we picked up the scent of something rich and deep. A sense of more-than-enough abundance.

It's different here in Mexico; they have a word it... ***bastante***. It doesn't translate precisely. Basically, it means Enough. *Quite enough*. It's as if Mexicans live in a state of quiet sufficiency, acceptance, gratitude, and above all, faith. It's sustaining. It has preserved critical tenets and principles in their culture through millennia of colonization, leaving their values wholly unchanged while they continue to host a constant stream of temporary occupiers.

So much of living in Mexico is “Aaaaah....” Like a slowly released, cleansing exhale, Mexico can enrich an outsider's perspective and open your eyes to the elegance of a slower, simpler outlook. With an “Aaaaah, Mexico,” we stretch our souls like our toes in the sand, slowly (always, painfully slowly)

discovering the difference between what we want and what we need.

There is also a time when some expatriates start to experience more of the “Arrrgh!” of Mexico. When you realize that the lovely man you’ve hired to fix your internet or stereo or plumbing, who nods and smiles and says, “*Si, Martes, Señorita,*” doesn’t actually mean *this Tuesday*, or any specific day at all. He is just reassuring you that on some far-flung *future* Tuesday, all will be well.

Darren says any day in which we have hot water, electricity and internet is an embarrassment of riches. And, that when your repairman’s smiling cousins suddenly arrive with a six pack of Pacifico, it signals that whatever is broken will likely not be fixed today. Mexico requires tremendous patience, and when you start to notice more of the little irritations and lost luxuries of life in here, it’s time to take a break. We’d both reached that point independently, and when we met, we were mutually craving a break from our five-year ‘Mexi-Comas’.

Alighting from Mexico, we coddiwompled across Iceland, the U.K., Europe and bits of North and South America. In blinding contrast to the scarcity that typifies the global post-

pandemic malaise-- isolation, poverty, desolation, suffering -- we began to see that there actually *is* enough of everything. Enough money, time, food, talent, health, love, joy, innovation, you name it. Bastante.

If we don't have a *sufficiency* dilemma, we wondered if maybe all we really have is a *distribution* problem. We already know that it's the *connections* -- the bridges, the tunnels, the pathways, the pipelines, the chutes -- that solve our physical, practical distribution issues. We wondered if we could find evidence of their social-spiritual-emotional parallels -- the intersections and deep connections that sustain and fulfill us – on the *inside*. Sounds like hippie-dippy bullshit? Maybe. But, man, it sure makes sense to us.

Instead of the “why’s and ‘why *Me*’s” we could have packed up and carted on our journey, we were starting to see the “why the Hell nots” and glaring “what ifs”. We have experienced a world where immediate, sustaining relief from trauma and pain is possible, attainable, and accessible. We are forging paths where every person can really discover themselves, and in that, reveal *to themselves* what lights them from within. What works *for you*.

Discarding the wrong-minded alcoholism construct of past generations – the layers of misunderstanding, misdiagnosis and mistreatment -- we have carved a different approach to recovery. Sometimes only minor adjustments were called for -- the precision of a well-placed scalpel, a slight twist of the kaleidoscope -- but for the most part, we had to swing a machete.

As we ignited these sparks between us, and the inspired healers and inspirational early clients we have come to know, some embers were caught in the breeze -- the connections around us started to smolder and grow. That's when the *really* good stuff started to happen.

I know this: When I am living this peaceful, glowing, on-the-way-to-the-best version of me...I am a better mother, sister, daughter, lover, friend, client, boss, volunteer, parishioner, coach, neighbor. My connections are obvious, authentic, and sustaining. I eat well, wake rested, and generally intuitively know what is right and pure and true for me. I treat myself, others and our planet better. I have become my own dashboard, filled with insights and indicators. I have a pause button that lets me choose how I want to respond to the challenges the Universe continues and *will*

*continue to throw at me.*

When you relight your soul, and share your stories, your glow casts light on someone else's experience. Those flashes ignite sparks between us, illuminating hidden answers, those answers start glowing and ignite another spark, which ignite another, and so on. That's what we need to find, relate to, empathize with – the foundational, pure, meaningful connections to our whole, perfect, authentic souls.

So many paths, people, options. Connections, where once, it seemed lonely. Intersections where we used to see dead ends. Where obligations once weighed us down, now we perceive choices. It's been liberating, honestly. More importantly, our approach works.

A final worthy analogy to the deviations in our philosophy is the contrast between organized religion and faith. Faith might be defined as 'a belief in a power, force or presence we cannot see'. Organized religion, then, is when we co-opt or adopt someone else's beliefs in that unseen power. When both sets of beliefs are identical, or perhaps one provides a fitting context or expansion of the other, it may work for us, at least in the broad strokes. We find

connections between what “feels right to us” and the pastor or text prescribes. But it’s rare that any religion will perfectly square with your own understanding of the Divine...unless, of course you happen to be the founder.

Too often, in emotional healing, we are asked to solely trust in and apply others’ beliefs – our doctors, therapists, families, friends, mentors – to a dilemma that is entirely individual; one that we cannot adequately even describe to ourselves, let alone those trying to help us. As in organized religion, it can be an unpopular strategy to constantly voice your contrarian view in church. The preacher will feel compelled to correct your response, teach you how to react and behave. It’s the same with your caregiver, of whatever variety.

In your own emotional healing, we believe that *your view* is the only one that matters.

Techniques and theories and practices either resonate with you, or they don’t. If you aren’t invited to debate them, twist them, roll them around until you can find the connections to yourself, or reject them, then it’s as if you’re just opening the hymnal and singing along. We invite you to try out a hymn, change the key, play a different instrument, or sit down and say, “this song does NOT do it for me”. Until you get comfortable mostly failing – but

failing *fast* – you are just taking up space in an empty pew -- in the Church of the Human Condition -- and trying to sing along. Stop pretending. Demand the meaningful, resonant hymns that make your own soul sing. Then, *sing*.

So, if you, or someone you love, is ready -- *really* ready --to quit drinking and start living, may you find a short cut here.

### **The Little Book:**

I drag Darren to recovery support groups all over the world. We're completely indiscriminate: we go to AA, NA, CODA, Al-Anon, Al-A-Teen, ACA. I neither encourage nor discourage him from joining me. I don't think sitting in these rooms will bring him much closer understanding my experience – luckily, he missed my thirty years of suicidal drinking -- but we still go, so that we can understand yours. We go to hear what's being said by those still suffering. And to listen intently for what people don't dare even whisper.

Walking home from a particularly animated AA meeting, we were debating some of the readings and shared stories. I said,

"It's really a puzzle. You have to admit that The Big Book (the central text of Alcoholics Anonymous) is kind of brilliant. It's a like a scout's guide to healthy living -- it's organic, it applies to everyone — all ages and stages, alcoholic or not. I've read it cover to cover dozens of times; I refer to it often. But too often, people can't get the simple wisdom. Not because it's dated or inaccessible or wrong (although all are fair situational criticisms); because, when the freight train of

trauma comes running through your soul, you really can't hear anything else over the din. Why would The Big Book make sense when *nothing does*? I wish people knew and could understand that there is a difference between reading about Bill Wilson's spiritual awakening and having one of your own.

Until you are relieved of your pain, reading The Big Book can be worse than never opening it at all. The meetings and readings are like a slightly obnoxious book club that makes you feel that if you don't interpret it like your next-door neighbor, there's something wrong with *you*. It accentuates your loneliness somehow. I wish we could give people hope; the hope that if they find real healing from the source of their pain, and then are open to everything, what works for them will surely reveal itself. I wish we could give them any hope at all." At this point, I can see the forced patience in Darren's expression, telegraphing: "Perhaps you should shut up and journal about it, for a bit, Love."

Instead, he said, "Then, write 'The Little Book'... give them just what they need to find real hope, and begin to discover their own truths?"

Why not, indeed? His six-word challenge acted a forcing function for us – it galvanized our questions -- what do we believe, what do we know, what do we hope to share, what must be dispelled?

To you, it might look like a 56-word wandering haiku, but for us, it poured the foundation, on which we've built an approach which quite literally, can work for everyone. We call it Kaleidoscope.

## ***The Little Book***

Alcoholism is NOT a disease.  
All the answers are inside you.  
You aren't powerless over anything.  
Even immense pain and trauma can be  
extinguished...fast.  
Forgive yourself for what you had to do to  
survive.  
Happiness is achievable for everyone.  
It doesn't have to be this hard.  
The choices are always yours.  
You are not alone.

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Consider a kaleidoscope. As an object, it's just a tube of mirrored panels and a pile of colored shards and bits. Always the same. But the slightest twist will change everything, rendering an image that is as unique as you are and that would take billions of twists to recreate.

Twist your kaleidoscope, and *everything* you see will change.

## **Alcoholism is Not a Disease.**

I'm not a doctor, nor a therapist. I boast no fancy degrees in the healing arts. During Kaleidoscope's meandering/accelerating ideation phase, when the insights were coming quickly, we indulged in a 30-hour life coaching seminar. That's the extent of our formal training. As we are building our company, we are recruiting leaders from across the clinical, psycho-social and spiritual domains. We're not trying to replace the roles of doctors, therapists, or spiritualists. We have always been "seekers", in large part borne out of personal necessity and the insufficiency of what was offered to us. By doctors, therapists, and spiritualists. Now, we are "finders". But don't confuse me with Maria Sabina – I want to curate your healing, but I won't pretend to be more than a witness.

The key distinction in our credentials, Darren's and mine, is relentless curiosity – we are open-minded about anything and everything that might work for you – so, we curate an enormous variety of modalities and approaches. We aren't limited by the confines of licenses and certifications. Because we aren't wedded to anything other than success

in our quest for you, we can afford to ask the big challenging questions. We are developing an Innovation Lab to institutionalize the continued discovery and evaluation of breakthrough treatments across the physical, emotional and spiritual health continuum. You will always be the master integrator of your own experience; we act as your master concierge – we are willing to obtain anything that could safely enhance and enrich your lives.

The key difference between our approach and the ‘standard of care’ is threefold.

Kaleidoscope is exclusively for people who want to *transform*. We work with people who are *really* ready, we facilitate immediate individual whole-person healing, and we never let them go. That is the path to recovery – and it’s quite straightforward: pick the right people, do the right things, don’t let go. Our timeline is swift – we curate near-immediate transformations. The entire program is bespoke; we constantly adjust in response to each client’s personal day-to-day success.

We consider ourselves “open source”: we will publish our strategy freely, collaborate across competitive boundaries, share our result and generally hope to be the tide that lifts many boats. We think it’s fun to challenge the

competition to catch us. Our competitive differential is one of attitude.

I am a classically trained former alcoholic with an all too familiar but completely inimitable story. I spent my 32-year professional career in corporate healthcare, contributing to and bearing witness to criminal inefficiency...widespread mediocrity masquerading as progress, so much unfulfilled promise. Until five years ago, much of that time, I was completely blotto.

The central conflict of addiction is one of identification with a false premise: on the outside, this inadvertent, inaccurate label – alcoholic – seems to reveal *everything* to strangers. But inside, it only serves to intensify our alienation. We struggle *against* our terminal uniqueness as if conforming with a label, a diagnosis, the persona itself, will provide its own relief. Outside, the world urges that first step – the admission, the identification (“Hi, I’m Noël, and I **am** an alcoholic”) – which is oblivious to the reality inside. The reality inside me was that something was very wrong. And drinking made it disappear.

What if we aren’t struggling to admit that we have a problem at all, but rather struggling for

the vocabulary to articulate the real problem? Perhaps that's at the center of the resistance. We all know something is **very** wrong. Often, we can't vocalize it, but we have learned alcohol actually 'fixes' it, however temporarily. We are consumed by feelings *we cannot tolerate*, and alcohol obliterates them. But it always carries its own fresh wreckage, so we pacify, or buckle under to, our loved ones and take up our spot in the chorus, "I'm an Alcoholic, I'm an Alcoholic, I'm an Alcoholic..."

A sense of 'isolation in the throng' -- feeling 'alone in a crowded room' -- is something many express. Along with admitting a falsehood, we are asked to embrace this faux disease, as both progressive and incurable. Then, we're invited to spend small fortunes on treatment that literally doesn't work for the vast majority of the labeled. Yikes! It's hard to imagine why that approach doesn't get more immediate traction, faster, with us alcoholics.

The first half of my career was spent leading big, talented teams at the health insurance behemoths; I spent the second half at tiny well-intentioned start-ups, doing penance for the first. My experience across the healthcare landscape, has been enriched by incredibly talented, caring, well-educated people...collectively tilting at windmills.

The healthcare system isn't a "system" at all – it's a complex mess of conflicting interests, misinformation, siloes and critical delays. Where capitalistic innovation has bolstered other great American industries, the polarity of interests and influences in healthcare seem to be bound fast by a perfect set of tensions, ensuring that even as research and innovation abound, they reach their destinations all too slowly. Inertia is the speed of American healthcare. And every time you isolate a problem, there are a dozen competing levers and weights that keep you from pulling that bar out of the Jenga stack. I have worked for a few truly visionary entrepreneurs who, having truly changed our lives in other ways, naively thought 'fixing healthcare' would be a cinch. It isn't. Outsiders see the problems, and at times, even offer inspired solutions; they frequently under club what it takes to reach the green.

'Make America Healthy Again' seems to find favor with most reasonable Americans -- an inspired slogan we can all get behind. I'm pleased that the new Secretary of Health & Human Services, personally and publicly in recovery, has assembled an agenda which is focused on the big, meaty headline challenges we face. I feel renewed hope that we will start

to truly identify the fault lines, rather than the tiny cracks, in the system. The problem is, in Alcoholism, and the trauma that ignites it, we can't expect a 'system' or singular protocol to fix us, ever. Even a reformed system will crave standards and norms and statistical validity to efficiently deliver to hundreds of millions. You are terminally unique. Elevate yourself above the noise, the numbers, the nonsense. You only have to make *yourself* healthy, again.

When I was in my third tour with the insurance giants, I came across a study which conclusively demonstrated that it takes approximately 17 years (!) from the time a medical breakthrough is identified for it to become mainstream practice. Physicians, regardless of where they practice, are the ultimate cottage industry. Pause on that: it takes *seventeen years* for a clinical *best practice* to become the *standard practice*. Nowhere does the study equate "practice" to patients. Not patients, dammit...we're *people*.

Here's how it plays out in physical medicine: imagine that there is a proven, tested treatment which will ease the symptoms of your arthritis, acid reflux, allergies. Now, imagine that it will take your physician approximately 17 years to receive the

information and begin to treat you properly. Unthinkable, right? You will endure fruitless tests, erroneous diagnoses, misdirected medications, and little relief. All the while some miracle drug or technique is providing relief to others, but not to you.

Now, imagine your symptoms are constant, chronic, debilitating, degenerative, even fatal. Cancer, diabetes, ALS. Likely, your loved ones and doctors will express pity, concern, sympathy, advocacy. They will share your frustration, accommodate your illness, attempt to comfort you in your pain. They will show you compassion. You and they will spend stressful days and sleepless nights cruising Reddit and WebMD and all manner of chat rooms, looking for clinical trials, breakthroughs, relief. And whether the treatments work or don't, you will be judged blameless, unlucky, made sort of holy by your suffering.

But what if your pain is different -- invisible, indescribable, unbearable, intolerable, *undiagnosable* -- emotional pain? What if you discovered that alcohol is the only thing that provides relief? What if, despite your vague certainty that something is very, very wrong inside, everyone else is focused on the external behavior, the drinking? In my

experience, a 17-year path to your ‘cure’ will seem like a sprint. And believe me when I tell you *will be* judged, and found shameful, willful, guilty. As the late, great comedian Mitch Hedberg once said, “alcoholism is the only disease you can get yelled at for having.”

In 1957, the American Medical Association first ‘recognized’ alcoholism as a disease; recognized being the operative word. In physical medicine, the disease model evokes a paradigm of pathology, diagnosis, causation, treatment, symptom relief, cure. The idea, calling Alcoholism a “disease”, was to strike a blow against the stigma, the shame associated with having a drinking problem, expanding willingness to seek care.

If it’s a disease, like lupus or cancer, then the alcoholic is blameless, afflicted, a victim of their condition, right? If we are blameless, then surely, we’ll be shameless in pursuit of a cure, right? Wrong. It was a marketing decision, made with no scientific foundation at all. They knew it then, and they know it still. But, as we plunged headlong into the murky disease model, what I find most unforgivable is that their abject failure to treat the fake disease they anointed is oddly paired with the hollow prophecy of certain failure.

“Relapse is part of recovery,” is a nasty little turn of phrase, mostly uttered by those who cannot cure us, as if it we should find comfort there. Really, all they are saying is “if you quit drinking, by any means necessary, that will cure your alcoholism. But we have no expectation that you will, because as baffling as we find your behavior, nothing we recommend really works for anyone.” Maybe the reason that only one in five alcoholics seeks treatment is because the other four know it won’t work, or it has already failed them.

The medicalization of alcoholism has been the single most disabling movement in its history. Since the inception of the disease movement, alcoholism’s wreckage has mushroomed. Today in the US, over 30 million adults have reported markers of alcoholism – medical, legal, professional, familial – the evidence of direct damage caused by abusive drinking abounds. The true cost to society is incalculably large. Yet, after 75 years of the “stigma reduction” plan, in any year, only 20% of all alcoholics will even try to quit. And every year, across all modalities of treatment, over 85% of them will fail.

The pursuit of the disease model has led to exhaustive research in genetics, biology,

chemistry, neurology, psychology, neuropsychology, pharmacology and psychiatry. They are focused on the wrong objective entirely. Science has aggressively sought, yet failed to discover:

- an addressable link to our drinking problems,
- effective approaches to achieving permanent abstinence
- a successful path to sustained relief from our emotional pain

The alcoholic in your life already knows it is not a disease. They may not have the vocabulary, or even the facts, to vocalize the elements of their pain. But they already know that alcoholism isn't at the heart of what they are suffering from. Aren't the rest of you just wasting time?

I refer, with deep gratitude, and occasional cheek, to the lexicon of Alcoholics Anonymous and its offshoots. The mottos, affirmations, sayings and expressions are age-old for the same fundamental reason that the program itself is so vibrant, despite being rigid and dated: the sayings and taglines are purposefully generic, and usually just futuristic enough to avoid scrutiny. “Don’t leave before the miracle,” is a personal favorite. Old-timers “in the rooms” always nod sagely, “the first

year is the worst year,” until the second, which is in fact, the hardest, until the third, and so on.

Our first client, Bill, who is lucky enough to enjoy a supportive relationship with his ex-wife, recently shared that she said, “I know every day is a struggle for you.” He chuckled, “It isn’t, actually. If it was, I wouldn’t make it.” Wow, you said a mouthful there, brother.

She was being compassionate; she is lovely, brilliant, eager to help, fully invested in his health and his role in their children’s lives. But we need to really examine the societal conditioning. Her comment came from a place of support, but it reveals her underlying bias that every day must be, *should* be, a struggle in recovery. Perhaps what she’s really saying is closer to “you have a disease for which there is no cure, so I assume that life is a daily struggle.”

We reject the struggle. In the same way that we know that the “drinking” is the solution for the alcoholic, we concede that it’s the central problem for everyone else. Alcoholics are conditioned to believe that the struggle is permanent, the disease incurable, and failure inevitable. We reject the need to struggle, or the judgment the idea of perpetual struggle

carries. It is *work*, to be sure. It is the hardest work you will ever do to heal your soul and develop a way of life that is purposeful, fulfilling and connected. It doesn't need to be this hard.

Once you are relieved from your core pain, you start to gain perspective. From a higher degree of consciousness, you can witness and make sense of your own past. Without attaching to it, you begin to unwind its stranglehold on your present. Your future becomes entirely your own. People who are relieved of the source of their pain tend to lead connected lives. Unshackled from misery, the wasteland of daily blackout drinking is downright unappealing. Even in the grip of it, it's not much fun.

Darren and I have witnessed and personally experienced meaningful, immediate relief from trauma and deep emotional-psycho-spiritual pain. We have seen people emerge from their pain, replacing it with insight and perspective. We are helping people become the authors of a new, powerful narrative in their own lives.

If you're anything like me, your treatment journey has run serpentine, or one-step-forward-three-steps-back. I have consulted physicians of every conceivable specialty.

They were all recruited to the top of their profession, from impressive academic backgrounds, believing that science holds the answers to everything. I've been fortunate to work professionally and personally with many brilliant physicians. Their allegiance to science is laudable, when the science is evident, ample, and curative. Then, it's just about speed and information. Instead, what we have in the addiction space is an entire industry built on treating a false disease with a theoretical standard of care in which almost no one finds relief. That's not science. It's greed. It's confidence without curiosity. It's prescription without progress.

Now that I have real relief from my own paralyzing emotions, alcohol is no longer spooky. I have lots of friends who originally quit drinking with the intent to one day drink socially. I understand the hypothesis. Once you are out of chronic karmic pain, it *is plausible* that you could enjoy the odd glass of cabernet at dinner; but what could possibly be the point? I don't even **eat** simple carbs...I cannot imagine drinking them now. And the damage that would do to the relationships I value? Well, let's just say, the glass my two children are hoping I'll raise at their upcoming weddings isn't a champagne flute.

Finally, while I am disgusted by the “settled science” attitude medicine misapplies to the flagrant mistreatment of addiction, I am equally confident that someday, science will understand why some of us lean into alcohol, or drugs, or cutting ourselves, or violence, in order to cope. I pray for those kinds of clinical breakthroughs in the future. I believe they will come. But even then, they will only be predictive indicators; the choice to find other coping mechanisms will still be ours.

I know that if statins had proliferated just two years earlier, or his doctors had been aware of the robust clinical trials of the previous 20 years, my father might not have succumbed to a massive, fatal heart attack (as an otherwise healthy 46-year-old with elevated LDL). Effective medical treatments, clinical cures even, are conceivable. I’ll buy that. But they don’t exist yet. Until then, it’s best to look away from the smears and scans and the rest of the clinical carousel and look elsewhere for the answers.

Consider the BRCA gene (highly predictive of risk for breast and ovarian cancer); if you have the marker, it gives you forewarning, information, and choice. Perhaps you will decide to have a prophylactic mastectomy and oophorectomy; perhaps you become hyper

vigilant about your screenings. Whatever path you elect, it is forewarning, information and choice. And the choices you make may prevent illness and death. That's a pretty great clinical breakthrough. It's also not even close to analogous to alcoholic drinking, what causes it, or how to arrest it.

Do my children need a genetic test to tell them that their mother had a vicious struggle with alcohol? Would knowing that my tea-totalling father's own dad had been a suicidal drunk have steered me away from choosing alcohol as my go-to? It is very rare to find a family completely unaffected by alcoholism. Alcoholic drinking is all around us, 30 million *confirmed* here at home. My point is that knowing *why* we choose alcohol to cope, versus heroin or blackjack, is a false quest. And once we have chosen it, knowing it was our genetic destiny won't help us stop drinking.

In the meantime, if I avoid drinking alcohol, it seems to prevent my alcoholism. 100% of the time. I love the crusty old-timers who say, "I'm an alcoholic, but if I don't drink it doesn't show." If we keep treating it as a disease of unknown origin, and we keep prescribing courses of treatment that don't cure it, we will continue to paralyze progress. It's like a Greek

tragedy where all the action occurs off stage. We're looking in the wrong direction.

A recent New England Journal of Medicine featured an article on the Identification and Treatment of Alcohol Use Disorder. Let me save you the time the author cost me: if someone in your life is abusing alcohol, *in spite of its consequences?* They have a problem with alcohol. The treatment is quite straightforward: stop ingesting alcohol. Diagnosis, treatment, cure. Easy-peasy. I'm not being a smart-ass when I ask you, "Are you having any problem spotting the alcoholic in your life?"

Okay, so if ~~Alcoholism~~, sorry, Alcohol Use Disorder (see what they did there, revealing their underlying bias), isn't a disease per se, then what the Hell is going on with 30 million Americans who seem not to be able to stop poisoning their lives with its compulsive, suicidal, catastrophic use?

You're no doubt familiar with Post Traumatic Stress Disorder, or PTSD. You probably associate it with soldiers returning from combat, victims of violent crime, collateral damage in dramatic events -- traumas whose grave impact seem obvious, understandable, relatable. The Big Traumas, the capital T

indisputable events. Even when they haven't happened *to us*, we think we can imagine them, and we judge them worthy of altering the lives they're inflicted upon. They're woven into literature and film, they're the lyrics of sad country western songs. We feel compassion for the homeless, the veterans, the rape victims, and all those who carry their scars where we can see them. We hold space even though we cannot truly understand. We feel sorry. Importantly, *we believe*.

But, even when we all *believe*, the stakeholders in the healthcare community (policymakers, employers, caregivers) are agonizingly slow on the uptake, and steadfast in their opposition to one another.

We attended a recent scientific conference in Mexico City, where an impressive cadre of scientists and healers from all over the world engaged a dialogue about psychedelics and their emerging promise in the treatment of the human condition. A lot of attention was paid to the murky post-mortem of a recently failed drug approval bid to use of MDMA (known colloquially as ecstasy) with PTSD patients. What went wrong inside this intentionally opaque FDA evaluation? The science was evident -- compelling results from a patient base long-starved for progress. The

advocacy was broad – there was vocal support from leaders across the healthcare landscape. Yet, the interests of patients were shelved, ignored for now...progress shuttered. Perhaps the appearance of too much support spooked the regulators. Perhaps the results were too promising, too starkly hopeful when compared to the “standard of care”, which continues to confidently deliver abject failure. Or perhaps an election year that redrew the lines of polarity was a lousy time to try to overturn generations of societal demonization of psychedelics. For reasons we may never be invited to understand, innovation was thwarted for people who are in a kind of pain *we believe in.*

What if you don't have one of those “worthy” experiences in your past, if your trauma is less obvious than that of a wounded warrior, incest victim, or grieving parent? What if you cannot pinpoint --no matter how seductive the search -- the cause, the beginning, the fracture, the fault line? It's hard to know where to begin, a bit like unwinding a ball of string but never getting to the center.

Even when someone has a clear line of demarcation in their soul, a shattering instance, it's very difficult to process those events or find meaningful help. But when it's

not even clear, it's not a full-frontal, capital T, societally-affirmed trauma? "I feel such soul-sucking miserable, terrified, loneliness all the time. I am in a near-constant state of pain that only two liters of vodka seems to quench, so would you mind excusing me for the next quarter century?" seldom elicits the desired response from your family. Trust me.

In the field of trauma, there is emerging evidence that a) trauma is at the heart of everything that holds us back, b) it's all trauma – big and small c) our response to trauma is entirely individual and, d) even immense pain and trauma can be extinguished – fast – and we can get on with the kind of healthy connected lives our humanity promises. This strikes us as the real breakthrough we have been waiting for. Out of the muddy depths of our conditioning and manufactured empathy, a new group of voices are showing us that trauma is real – for *all of us*. And it affects us physically, emotionally, spiritually and emotionally in a completely unique manner. And if we look past the psychobabble of 150 years of mediocre modern 'mental health medicine' – way past – the ancient wisdom, being practiced in modern times, demonstrates we can be healed from the confines of our trauma.

When we cannot even provide relief to people whose suffering we believe, what hope is there for the rest of the us? When and how can we expect relief from the unseen, unchronicled, unbelievable pain? And what should we do instead, to forge our own path forward, up, and out of the depths of our pain?

For years I was a double agent – an industry insider and a drunk. Here is what I have come to believe about trauma; it's *all* trauma. I believe we are conceived and born whole and perfect and innocent. From that instant, our lives are entirely unique and individual. We begin to encounter the world, and our earliest experiences hold great sway over our forming view of the universe and our position in it. Our parents, siblings, close family all play critical roles. Later, teachers, coaches, mentors, bosses, other authorities emerge in influential ways.

The world begins to show us that some part of that whole, perfect, innocent self just isn't safe. Sometimes trauma comes in the form of insidious, repetitive, consistent low-grade warnings and abuses. Other lessons are swift and harsh. But they are *all trauma*, life's insults to our sense of security. And to become safe, to survive, we begin to adjust and protect ourselves. We alter our behavior,

outwardly, consciously or unconsciously. Our personality begins to emerge, reflective of these changes, these protections, these alterations. Our concept of self becomes twisted and warped from our chiseling, correcting, polishing. And, insidiously, our beliefs about who we are, the value we bring, and our essential truths also begin to twist and shift. In short, we cope, to the best of our abilities, with what our experience tells us we need to become to survive.

The mind-body-spirit connection is real and meaningful. It isn't new-age wisdom, brought to us by the manifesting, affirmation-frenzied New-Agers on social media. The indigenous people in parts of South America, Mexico, Africa, Europe, Asia seem to have always known. Their evidence and healing traditions span generations and centuries, if not millennia. They have always known that our "issues show up in our tissues". They don't see health the way we legislate it in America and much of the western world, with one set of standards for the physical, another for the emotional, and literally none for the spiritual.

There is a difference between understanding the physical, neurological, and biochemical functions in the brain versus how that *makes us feel*. Healers who practice integrative

medicine aren't overly intrigued and distracted by the PET scans and the diagrams of the serotonin receptors. They simply know it is all connected.

Perhaps the better question is: why hasn't your doctor caught up to the real emerging evidence? Why doesn't your doctor or your therapist have the same holistic view of your experience – physical, emotional, spiritual -- that you do? And why aren't they as impatient with the timeline as you are? Why do they seem so smug and certain when their actual results are so predictably bleak?

In the United States, while we talk a good game about integrative or holistic medicine, it rarely plays out in the exam room, or the therapist's office, or the drug manufacturer's pipeline. Our providers generally go where we tell them, in the 8 minutes they can afford us. Our health is politicized and polarized, insured and reinsured; incentives are misaligned, and cutting-edge information -- and healing -- reaches us all too late.

Alcoholism as a disease, lol. What a terrific concept! Methinks the lady doth protest too much. Who, exactly, is this serving? (Hint: you pay your caregivers to not cure you from a disease they anointed, which isn't the core

of your issue). Once you see the reality, you cannot look away.

**You**, the ‘alcoholic’, know it isn’t a disease -- the first drink is always on you, sober, conscious. **Your loved ones** know it isn’t a disease; their faux empathy is wearing an exhausting groove in your relationships. **Your doctor** knows it isn’t a disease. Yet he or she will tirelessly run more tests, write more useless (or worse) prescriptions, and suggest more fruitless paths. It’s a web of misinformation, misinterpretation, and misplaced societal conditioning...and you can trace the roots of every failure neatly back to the *misdiagnosis*. It creates disingenuous exchanges between all parties – everyone is fiercely committed to a model from which we cannot, do not, **will not** derive healing.

Let’s explore the motivations for medicalizing problem drinking. Because, steady yourself, if it’s not a disease, then we’re really just a bunch of drunks, right? My sister once said, “A sober person drives to the liquor store, Noël.” It stung at the time, this full-stop Truth. Which is precisely what made it harder to ask for help each new ‘today’, as I was always already consumed by shame and remorse for yesterday’s antics and behavior. Which

always started with my, presumably sober, first drink.

In 1957, with misguided (though I'll allow, probably positive) intentions, the AMA decided to "recognize" alcoholism as a disease. It's a disease whose only uniting diagnosable pathology is our inexplicable behavior....a seemingly irrational pattern, borne of experience, reinforcing the unspoken belief that drinking is the only remedy for our intolerable pain.

Yes, of course, it always causes more pain of its own creation, but we become increasingly certain that it is the most reliable medicine available to us. Because we've *tried* other methods. Therapy, doctors, medication, meditation, support groups, yoga, hypnosis – they all underly our personal statistics of failure. But we come back to choose Tito's over Lexapro, Grey Goose over Abilify, because it works. We aren't delusional or insane. We aren't lacking in virtue or willpower. We've already conducted our own tests and experiments.

Today, we encounter a lot of alcoholics who would answer my sister's (factual) recrimination with, "Yes. A sober person *does* drive to the liquor store. Because when we

drive to the doctor's office, nothing seems to work. But when we drive to the liquor store, we know *it will*".

In addition to "alcoholism", in 25 years, I have been relabeled and mis- or partially-diagnosed a hundred baffling times – bi-polar 2 (not true, but a dismal year long trip down the pharmacy rabbit hole, conveniently, the year I worked for Walgreens), eating disorders (true), PTSD (probably true, for what it's worth, but it's such a catch all it's become the Irritable Bowel Syndrome of the mental health field), flashbacks, night terrors, anxiety, depression. Each new diagnosis was accompanied by fresh hope, a new prognosis, protocol, often a shiny new prescription. But each treatment plan was a watered-down version of the previous, all of which resulted in failure and relapse. Because at the heart of my drinking problem was another problem, which was obvious only to me. Something was very, very wrong.

My medical team, dedicated though they were, were always baffled that each new medication, path, approach was yet another dead end, a new bottom in my bottomless despair. Together, we spent over 20 years, drilling. And in a fee-for-service medicine, my dedicated medical team always got paid,

whether they drilled a dry hole or struck oil. Staring down the barrel of my torment, they were compassionate, but ignorant of a path to relief. And frankly, just not nearly curious and motivated enough.

In 2017, separated from my then-husband, released from my 5th trip to rehab (for years, even in sobriety, I was ashamed about my rehab history, but I've discovered that a mere five admissions is far from a record); I was utterly, completely alone. Exiled, a continent from the nearest family or lifelong friends, I knew that my pain was real, that I had no real hope of living sober if it continued. I had practically exhausted every trick they had to offer. I felt different from every other "addict" I encountered. I continued to bow down to the pseudo-science offered by neurologists, psychiatrists, psychologists, internists, nutritionists, hypnotists. Bowing lower with each successive failure made it harder to rise again. I faithfully claimed my miserable seat in the circles of recovery or therapy groups, yoga or meditation circles, secure only in the inevitable failure that defined my struggle. Why didn't this stuff work for me, when it seemingly worked for 'everyone else'?

I found myself living in a triple (picture a crowded, chaotic dorm room, absent the

underlying odor of stale beer and air of celebration) in a sober living house operated by the treatment center, 3000 miles from my then estranged husband and teenaged children. Across the country, my daughter's boarding school dorm room seemed generous by comparison. In their intensive outpatient program (aka, Aftercare – another of the great misnomers in recovery, given that it evokes the notion that some "care" has already been provided) I was introduced to a graduate student at UCLA who was studying EMDR -- Eye Movement Desensitization and Repositioning. She was more curious than optimistic – which is now is the number one trait I look for in any healer. For starters, EMDR was neither recognized as a covered treatment by my insurance, nor well integrated into the treatment center's protocols. She said, "I doubt it will work, as you have clearly tried everything else, but before you start looking at more barbaric forms of treatment, let's give this one a try, shall we? You have lived with pain for long enough."

I often wonder if it was her utterly refreshing pessimism, or the simple acknowledgement of my pain, which really opened my heart that day. But whatever moved my spirit, there was an almost imperceptible shift. Maybe it was a sense of "last ditch death march" or perhaps

what remained of my weak and atrophied soul, starting to stir. Regardless, I found the will to press on, as at that bleak point, what did I really have left to lose?

My point isn't to extol the wonders of EMDR, although I'm certainly a personal fan. On that score, here's the layman's tour I was given: EMDR is a therapeutic approach that, for reasons that are far from understood, helps us to reduce the vividness and vibrancy of our past experiences. Essentially, you are guided through a traumatic experience (for me, the biggest challenge was how pick from the obvious contenders), introduced to stimuli like lights or gentle buzzers, at specific intervals. The technique helps you create distance, gain perspective, even find meaning in the memory, without reliving or attaching to the reality of it. How it works is not well understood. Unsurprisingly, celebrating *that it works* for me was more appealing.

I have been evaluated and told that I have an eidetic memory. Alone, it's just another meaningless term assigned by the label makers. I think of my own memory like so many piles of sealed boxes in the attic of my soul. During my marriage, we moved ten times. By our final move in 2014, despite being enthusiastic "purgers", we still had

unopened boxes from our first home in 1993 – boxes labeled “Dad vet school texts – Pullman”, or “Tea towels – Minnesota”, “Grandma’s China – Spokane”, or my then-husband’s favorite: “Extra trifle bowls and terrines (duck and rabbit) – Glastonbury”.

With physical things, it sometimes gets to the point where it’s ridiculous to be carting these unopened boxes around. My dad has been dead for three and a half decades and I’m not a veterinarian, making his 1969 Canine Anatomy text seem superfluous, even to a sentimentalist. But in our emotional lives, whether we just move them from place to place, or we actively open every box and dance among the contents in each new location, they are always with us.

Sometimes mislabeled, and even momentarily forgotten, misfiled, misinterpreted, unneeded but omnipresent -- we cart life’s insults and hurts everywhere with us, until and unless we purge them. ‘Wherever you go, there you are’, so to speak.

For me, in that tiny treatment room in Venice Beach, something magic happened. Over a course of non-invasive six sessions (frankly, the buzzers and lights seemed silly, but certainly less threatening than any of the pills

I'd been prescribed over the years, or the barbaric brain treatments I had seriously been considering) my symptoms receded, faded, decreased in frequency and urgency, finally, abating altogether. In that sad recliner with its tattered olive herringbone slipcover, over a few short weeks, three traumatic (capital T, by society's standards) events which had haunted me for nearly as many decades, just got "right sized". I was able to see the events, almost as if they were happening to someone else, witness them without attachment, make sense of them. Tragedy receded, and in its place, perspective emerged.

Here's the point: when you are ready to be unshackled from the prison of your trauma and your endless drinking cycle? Almost *anything* can work. Until you are, almost nothing stands a chance. When you become open to the idea that there is real, fast, sustaining relief from your pain? The answers will come. They are all inside you, like the boxes in the attic, waiting to be sorted out.

Sometimes the traumas are evident, obvious, clear; to you and to everyone. Certainly, pay attention to these – They're the "Capital T Traumas". They're real; of course they matter. But sometimes it's the cumulative effect of a lifetime of minor traumas –

diminished, forgotten, dismissed —that holds us in a story that has never served us.

What's so interesting is the judgement we apply the traumas, not just societally, but more important, personally. In my experience, this is often where the misdiagnoses and mislabeling occur. Sometimes it's the seemingly innocuous encounters that really stay with us— the stray remark from a parent, coach, teacher, school yard bully – so long ago they seem too minor and insignificant to even raise in therapy, let alone justify your seemingly irrational behavior. Those are the insidious “little t traumas”, or trauma-Lites, that can clutter up the attic of the soul until *what we need* recedes and is obscured by *who we think we need to be*.

The EMDR technique was developed by Dr. Francine Shapiro in 1987, two years before I would even experience anything that an outsider would consider traumatic. But it was nearly 30 years later, after decades of personal failure and destruction, that it was first introduced to me. As an ‘edgy’ technique, suggested apologetically, predicting defeat, almost an afterthought. You may ask yourself, as I often did, how is it that this woman, a seasoned healthcare industry insider – with access to the world’s leading

physicians and medical information, with a loving family, with caring employees and friends -- could take so long to stumble on this non-invasive potential remedy. Ah, yes, but isn't that really a better question for my doctors?

Be wary of the labels and the label-makers. In all things, honestly. Contemporary society has an insatiable appetite to label, but each new category begs us to identify with less and less meaning, imprisoning us in matrix-like insignificance. Be especially wary of the labels that seem to hold increasing specificity, with a curious and simultaneous reduction in *solutions*. Just as the Supreme Court said of pornography, “We don’t know what it is, but we know it when we see it.”, if you’ve got a drinking problem, a swankier name or a co-occurring syndrome or disorder won’t provide much comfort to you or your loved ones. Neither will a genetic biomarker or family history. Tell your doctor you’ve got “it”, whatever they want to call it. Renaming it is hardly a breakthrough.

Be even more suspicious of the insidious ‘quest for the cause’. If your struggle with alcohol has been continuous, progressive, constant, at some juncture, you’ll no doubt be seduced into spending a portion of your

journey trying to understand “why me, particularly?” Many will try to engage you in a fruitless discussion of nature v. nurture. Resist. Skip it. Reject the entire premise of the search. Because *why* you chose alcohol (or, sadly, as some believe, it chose you) is completely irrelevant to *how you will stop* choosing it.

To underscore the futility of the “cause”, let’s examine a few branches on my own family tree: my father’s parents were Olympic-level alcoholics. My grandfather committed suicide shortly after my parents were married. His alcoholic widow, my grandmother, promptly attracted a second husband with the same coping mechanism.

My grandmother was an extraordinary cook, a kind of effortless entertainer. As a child, her kitchen seemed alive to me, humming with simmering pots and steamy casseroles and breakfasts for the masses that were always served steaming hot on Spode plates pulled from the oven with practiced bare hands. But, my father could barely stand to be in his mother’s home on our semi-annual cross-country pilgrimages to Washington from our home in Massachusetts; where I saw her mysterious greenhouse filled with African violets or snatched fancy treats from her

counters and simmering pots, I'm sure he saw her ever-present glass of bourbon and milk on the rocks – from sunup to woozy incoherent bedtime.

On those visits, my parents preferred the bursting-at-the-seams chaos at my mom's parents – they had little in the way of financial security, they fostered mentally and physically challenged boys in a cozy dormer above their house, there was but a single television. There were chores, and baloney sandwiches with yellow mustard, and coloring books, and washing my grandad's Impala (this being rather a competitive sport, not a chore). There was no alcohol. Ever. Which must have made it a little slice of heaven for my dad.

This bit of my dad's history wasn't openly revealed to me until the days following his untimely death in 1989. As a 21-year-old newly learning about my dad's sad childhood, suddenly my parents' near abstinence made sense (my dad could stretch a 6-pack of Sam Adams for several months; my mother still believes a jar of cocktail onions and a bottle of Rose's Lime Juice constitutes a 'full bar'). My parents' liquor cabinet wasn't the target of teenaged raids...they didn't have one. My own dad, who had made it his life purpose to

be an extraordinary father, made a conscious choice, borne of direct experience, to ignore both the nature and nurture influences and mostly reject alcohol. “Why” was never discussed.

I regret the secrecy to this day. Not because the generational warning bell could ever have tolled loudly enough to help me avoid becoming a drunk -- hardly. But because my father carried a secret to his grave that makes me ache for him, and for me. I’m not sure he could have helped me, had he lived. But I regret not having the opportunity to tell him how brave and miraculous HE was, silently suffering the pain of his own childhood, determined to make mine and my sister’s lives different from his own. The “why” isn’t what I was robbed of understanding – perhaps we aren’t meant to re-experience and shoulder our parents’ trauma; it’s the “how” he avoided his history that interests me more.

When the tornado hits a trailer park, do the inhabitants, marveling at the seemingly targeted wreckage, sit around wondering *why* the twister hit *their* trailer but not their neighbor Joan’s? Nope. They cry, pray, rail at God or the weather, surely decrying the unfairness of their fate. But they don’t waste a lot of time staring at their navels wondering

“why”. They get busy clearing debris and twisted metal and *rebuild their lives*. Because if it hits your trailer, knowing exactly *why* isn’t all that helpful. It’s happened. All that matters is what you do next, to rebuild.

We urge you to get pragmatic about your pain. Then, and only then, will you stand a chance at getting sober and rebuilding the wreckage you are creating with your problem drinking. If you spend all your time wondering *why* you keep inviting the Smirnoff into your day, asking yourself if it’s the family business, a genetic inheritance, a multi-generational gift, perhaps won’t help you shove the bottle out of bed.

If Kaleidoscope’s company philosophy and core beliefs become mainstream, the “medicine” we apply to our so-called “mental health” will have to dramatically change. As seekers (patients, they call us, though, in truth we’ve been patient far long enough), we will have to be forthcoming, transparent, and insistent with our care teams. We are each the ultimate integrators of our own health. We must apply a personal commitment to the mind-body-spirit connection and use that criteria when we select our caregivers. Be on the lookout for the popular lip service that most doctors barely provide inside an 8-

minute visit. Treat the pain before the coping mechanism. We must insist on real belief, to find relief from our very real dilemma.

Each year, only 20% of alcoholics in the US reach for any kind of treatment. If that's a disease, we certainly aren't reaching those who suffer. Should we applaud this aggressive "stigma reduction" effort, when clearly, we don't compel the vast majority of sufferers to take action? We've also recently changed the diagnosis name from Alcoholism to Alcohol Use Disorder. See what they're doing there? Getting closer to the truth perhaps, and while I appreciate an accurate naming convention, it smugly distracts us from the absence of any meaningful progress in the treatment of the newly named condition.

Perhaps it's time to recognize that we've eked all the value out of the disease concept we can expect. Only 1 in 5 desperate sufferers will raise their hands this year. Far too few. But when 6 million sufferers *do* come forward, most (85%) of them will find only more failure, more relapse, more hopelessness. Far too many. If you are their doctor, or their mother, their employer, or their judge? Perhaps answer the call a bit differently this time. If you are one of them, we already know that the real problem that makes you unwilling to live

without alcohol, is your pain. I believe in the fact of your pain; more importantly, I know there is real help for your problem.

All of the labeling, coding, diagnosing, prognosing? Much ado about nothing. If your drinking has become its own problem, you already know it. Let's stop allowing them to endlessly rename us, resorting us into more manageable cohorts of misery and certain failure.

I'll tell you another little secret I've discovered after many years in the various rooms where alcoholics gather – our *drinking* problems aren't really very similar. Scotch drinkers don't have much in common with vodka drinkers, honestly. Barflies have little in common with closeted drunks. I know plenty of drunks who had their first sip at age eleven, with an equal number who really didn't experiment until early adulthood, still others who drank with impunity into late adulthood, when it changed, seemingly without warning. We arrived here on an inimitable path; it's nearly impossible to retrace your steps, even if the breadcrumbs seem to be all around you.

The only thing we really share, our common bond, is an intolerable level of pain which is reliably extinguished by copious amounts of

alcohol. Our pain is often of unknown origin; yet we persist in stumbling around, bounced from diagnosis to drug to tactic, emerging emptier and more lost each time we get it wrong. And we share that attribute with copers of every ilk – wife beaters, sex addicts, drug addicts, anorexics, gamblers – our only reliable similarity is that we share an undiagnosed degree of pain which has colored our outlook, our personality, and our decision-making.

It's only in the last few years that I've entered any room without feeling utterly and completely alone. And only then, because I finally found a single, uncredentialed healer who **stopped** trying to dazzle me with the inconceivably industrial-strength certainty expressed by so many of her bumbling predecessors. She simply said, "I believe you. Let's try something else." I went from a one-way ticket on a carousel (with no brass ring) to a soul unburdened (just) enough to regain my own footing. Break the mold.

I believe that there is nothing mystical about our relationship with alcohol. We have many friends and clients who embark on quitting specifically to learn to drink socially. Perhaps they will. The irony is, I think I probably could. Drink, normally, that is. There's nothing

particularly interesting about my physical relationship to alcohol. My pathology was in direct proportion to my consumption. Nearly everyone's is.

We all want to show the world some mysterious diagnosis that explains our behavior – a metabolic syndrome that processes alcohol differently, a pituitary tumor, a rare allergy, a hormone imbalance, a nutritional deficit — anything other than, for example, two liters of vodka a day. I could pay for my children's weddings on the proceeds from the fruitless lab tests and brain scans I've enthusiastically endured in hopes of finding that true physical anomaly to explain my drunkenness. Turns out, it was always just the drinks...

The industrial tragedy – the flagrant mistreatment of alcoholism -- isn't one of greed or even incompetence. First, they medicalized a condition with no physiological pathology, labeled it chronic and incurable, invented proxy "treatments" which do not work, and finally, call the bundle the 'evidence-based standard of care'. It's a fraud being perpetrated on millions worldwide with the slogan that "relapse is part of recovery". But most importantly, they ignore altogether the addressable, authentic dilemma in favor of

peddling more medicine to support their own mythology.

I share these insights to try to expand the perspective of those still suffering. But if you are their caregiver, doctor, therapist, treatment center? “Relapse is part of recovery,” just isn’t true. It isn’t cutting it. It’s a lazy way of saying, “I blame you.” Or, more, “Huh. Not sure why that didn’t work for you; it works for so many others”. Bullshit.

Try, instead, “I *believe* you,” and get curious and impatient. It will liberate your treatment plan. More importantly, it might just accidentally free your patient from the shackles of a useless standard of care in which no care is provided, and very few are getting free. Because she is running out of time.

## If It's a Spectrum...Aren't We All on It?

Our coddiwomple took us from a freak blizzard in Portland, Oregon directly to Iceland -- out of the cooler and into the deepfreeze. Iceland is stunning. Even in February, we were treated to the delights of every conceivable season. Jagged, angry volcanic rocks, belching fire. Remnants of ancient shifting glaciers literally moving beneath us. Lakes, forests, fields, mountains. It's easy to think of it as the land time forgot. It might be the land where time began.

We did a 10-day stretch on Iceland's Ring Road – it was a longer riff from a legitimately great blog Darren discovered, chronicling the details of their journey on the epic byway. Each day, we embarked on a five-ish hour drive, punctuated by one or two key sites. It gave us a lot of windscreens time to contemplate life's big questions. We spent a lot of energy on education...

The American education system and the American mental health system have a lot in common. Principally, they both radically underserve their constituents. No other nation approaches our combined per capita expense on our education and our behavioral healthcare for so *little value*— but, now, they

appear to have forged an unspoken alliance with each other. The two systems self-perpetuate, with one mediocre solution flooding the pipeline of the other, which is waiting to receive its castoffs – and the ticket is round trip!

No one in the education system gets a hall pass in this chapter. All ages from preschoolers through PhD's, all functions from facilities to faculty, all settings public and private – are failing. The purpose of our early education should be to instill a love of learning, which should last a lifetime. Instead, they peddle in categories and labels which produce frustration and despair for most students.

Back in Portland, we'd seen Jason Latimer's performance called, "Impossible Science". In his brilliant talk, the magician/physicist blew our minds, putting once intangible concepts right within our reach. The best part about Jason is he is the sort of scientist who is untroubled by the difference between What Happens and Why It Happens. He's curious. He reminded us that our quest for knowledge is ONLY fulfilled by relentless questions – and the questions are always more important than the answers. And, that there really are no stupid questions.

It got us thinking about how we teach children in the first world. Comparing the systems we each came from, we found a lot of similarity. We'll leave it to you to debate the finer points, but the "systems" we come from seem to have it exactly backwards.

My daughter is finishing her master's in early childhood education at Boston University. While she completes her degree, she is also teaching at a preschool that is taught entirely outdoors. If you know anything about the ever-changing climate in Boston, this might give you pause. But, in all manner of weather (seductive spring, oppressive summer, gentle autumn, vicious winter) her little students (aged 18-months to 5 years) layer up, bundle up, or strip down and apply copious subblock, for an entirely hands-on day of joyful discovery. Every day, under the sun, in rain showers, in drifting snow. They explore, they touch, they feel, they *discover* – each at their own pace, with only enough rules to ensure their personal safety. They learn by experiencing, and they learn to love learning. And it delights them, their discovering, instilling the idea that encountering the world is its own adventure. She sends me videos of their experiences, their adventures, their little coddiwompling through the woods or

parks. It's impossible not to laugh out loud at how tickled they are by each new discovery. She's fostering the potential inside each of them to be curious, to try, to love to learn. Sadly, what happens next will mostly try to beat that out of them.

The public school "system" in the US has its first contact with children at the age of 5. At the age of 5, we enroll them in 13 years of dense, generic homogenized curriculum. We spend the early years trying to spot any variance (in them) from the norm, we label it, channeling little people we barely know into categories that will create lifelong imprints on their learning. We decide whether they are good at learning the way we teach.

Enter kindergarten, where new influences pierce our realm. New teachers and guides, new peers and contemporaries. They each have their own unique teaching and learning methods. If the average teacher is 30 years old, and there are 20 little people in the class, each kindergarten is a mashup of over 130 people-years of teaching and learning experiences. And, yet, we begin with a curriculum that is so insidious in its rigidity that it's never even questioned. Reading. Writing. Arithmetic. They begin teaching *their way*. And they watch.

Like most bell curves, a small fraction will appear to thrive, they'll delight us with their conformity and their ability to commit useless facts by rote to memory and pass standardized tests measuring futility. But the system failed them because it only plays to their strengths and bored them out of their minds for a decade. Most hit the Ivy's or prestigious universities high on their past performance and utterly unprepared to sustain excellence. We churn them. They often become the least happy among us as grown-ups. As adults, is it really that surprising that after years of perfect conformity, they are utterly baffled by their 'broken pickers'.

A small fraction will struggle mightily in school, be labeled "disabled", "disordered", on the spectrum, or worse. The system fails them altogether, immediately and completely and ostracizes for their uniqueness, and intensifies the observation, babysitting, labeling. They drop out or barely get by. We create the losers. We remember the ones in both those categories. They're the Class Valedictorian and the Most Likely to End Up in County Prison.

But most kids are in neither category, simply a little lost, unaddressed, unattended,

uninspired.... nameless, faceless cogs in a bureaucratic propaganda-laced machine. By the middle of elementary school, we've been taught, tested, and measured against a common yardstick, clustering – a few thrive against the standard, a few are really failing, but most are just lost in the faceless generic middle-of-the-crowd, swept up, trying to keep up with teaching methods that are fixed but learning styles which are variable.

The only adjustments we make to the curriculum – a standard which caters to no one – are for the edge cases. We label kids early on as having learning disabilities (or academic talents) – entirely based on their ability to respond to our standard method of relaying information. One way, *the* way, for every student. If you know at least two children, you already know how unique they each are...so, why do we insist on teaching with singular methods that ultimately frustrate most?

What if we got curious, instead? If your kid is failing acutely, not thriving, at some point it will be suggested that they “get tested”. What if, instead of using testing as an intervention for failure, we applied it as an instrument of revelation? What if **every** child in America had a full neuropsychological evaluation at the

start of third grade, or whenever most of our markers are predictive of lifelong patterns? The results would illustrate their unique processor skills and tendencies. Then, what if we celebrated those traits and bent the curriculum to their learning style? (Example: Little Johnny is an immersive learner. So, for subjects like historical facts, or perhaps, literature — he should be in the “museum” learning team — that’s where we teach through hands on immersion, storytelling, mock trials, performance-learning and the like. But Bill is crazy great with numbers, music, and scientific formulas — he might be just perfect for our “patterns” team; that’s where we lean into the learning style that naturally sees the connections between things.) What if “getting tested” was a critical step in creating our methodologies, instead of the “last straw” when our discouraged children aren’t thriving. Our kids will show us how best to teach them if we invite them to show us how they learn.

Imagine if every child was better understood, and the system was reconfigured to channel and nurture their individual gifts -- to recognize their authentic learning powers, and hone them? To discover their unique learning styles and lean into them? What if we treated education as so essential, so critical, so foundational that it forced us to eliminate the

concept of *Special* Education? Instead of so achingly mediocre in its normalcy, perhaps, then, *everyone's* education would be special.

Let's get practical: the average cost of a complete neuropsychic/neurocognitive evaluation in the US ranges dramatically, but with technology, the once intensive process can be streamlined and be extremely affordable and accessible. The full cost of an in-depth evaluation, with interpretation and action plan can run about \$3000 at the high end, and as little as \$1000 on the low side.

One time. By comparison, the average cost of providing the standard curriculum in the public schools is over \$15,000 per student. *Per Year*. (New York and California public schools, naturally, spend 2x the national average, but their outcomes yield the same sad results as Nebraska or Colorado).

What is the opportunity cost of another generation of disengaged, discouraged children? Children who are never taught to appreciate their unique talents and gifts, children who crave the simple recognition of the magic of the way their mind works; children who become our next firemen, plumbers, teachers, engineers, judges. It seems as if the cost of our continued failure is both incalculable and avoidable.

Like so many boys whose learning styles are under-celebrated, the standard teaching methodologies frustrated Darren early in his own childhood. How to hold the pencil properly, how to “show” his work in arriving at the answer to a math problem, how to comprehend a story. Even the word ‘comprehend’ suggests that there is a singular meaning, a perfect understanding, a correct answer; isn’t the real beauty in the personal experience and interpretation?

We are taking an adult Spanish immersion class in San Miguel de Allende. The school has been operating for over thirty years to critical acclaim. The average age of our peers is mid-sixties, and they adjust their methodology to their sense of how “adults learn”. Still way too generic of a category. Even with only twenty people in the class, I have already observed that their approach plays well to some learning styles and frustrates others. Some people are already arriving at the conclusion that they aren’t “good at learning foreign languages” while others are celebrating being once again back in an academic environment with rigor and standards. The biggest pre-requisite to success seems to be previous success. So too, those who were frustrated by school as

children are easy to spot squirming in their seats now. Through repetition of the same basic information in different ways, the instructors are showing us a few different ways to learn the same key principles of the language.

Back in Iceland, our guide on the glaciers of Vatnajökull was a lovely young man from Amsterdam. His words were tinged with sadness about the disappearing fields of ice below us. Finality. Futility. “They’ll all be gone in less than thirty years,” he said. I asked him, “What if we could do something differently, each of us, right now, to make a change?” What if it isn’t too late? What if all is not lost? What if we can do better than doing ‘nothing’?” Troubled by my directness, he seemed content to live in the guilt and despair he has been conditioned to expect.

The magician-physicist, Jason Latimer is asking the questions we should be, as parents, as educators and counselors, as sherpas. The real question is, why aren’t we asking for more? Why are we satisfied with a system that is predictable only in its consistent mediocrity. Why aren’t we curious about better ways to enrich young minds and inspire them to ask their generation’s big questions?

Why are we so committed to the intractability of the status quo?

Perhaps it's because the big questions are always so damned big that they seem impossibly fixed by their own inertia, tethered to the gravity of a status quo too great. Too big not to keep failing, I suppose. But it's asking the big questions, and finding the courage to drive the big shifts, that changes our perspective.

If we stay the course, in thirty years, will the glaciers disappear entirely? It seems likely. Unchecked, too, the education system will produce another generation of under-inspired discouraged children to deal with the mess we've left them. Where the mental health system awaits, impatient to match generic labels to anemic answers. I was recently accused of being a "dismantler". It wasn't meant as a compliment. But we're very blessed to know many talents in the education field; we spoke at length to friends and family members who have spent their lives dedicated to education. They seem to think we might be able to be better, too.

We're manufacturing labels while simultaneously homogenizing learning, then discouraging, misguiding and defining the

limits of their potential. Enter the mental health system. The slippery slopes all begin with the ambiguous labels, the faux diagnoses. Once we label the little sufferers, we can channel them into a system which is already in full swing, universally failing to address the labels their predecessors are already wearing. I have stopped looking for absolutes in emotional well-being, as we all, always, are the exceptions to the rule.

I don't hold the opinion that there is no such thing as a mental health "disorder" (though I reject the terminology as inherently disabling and isolating). There are certainly examples of neurological pathology which have their roots in physiological, genetic and biochemical anomalies. And I pray that we continue to make strides and enjoy advancements which will reduce the limitations those conditions place on the lives of those who have them. But, I have also concluded we've given them the proverbial inch and are letting them take the mile. Clustering tendencies, styles, and traits into buckets labeled "disorders" and "syndromes" is slowing us down, holding us back, and frankly making us passive bystanders in our own well-being.

In research, science is intended to be inspired

by curiosity and grounded by irrefutable proof. The cycle includes hypothesis, experiment, observation, analysis, adjustment; and we repeat it until we arrive at an inarguable conclusion. But in the mental health field, we seem not to be playing within those boundaries. The profession is inverted. They start with a solution – a pharmaceutical agent or psychological technique – then they manufacture the problem, pursuing a target market and convincing them to identify with whatever problem they pretend to solve. It's getting a little mental.

The examples in the mental health field (fed by a dysfunctional education system) are plentiful -- solutions in search of problems. They are in the business of convincing people they already have a specific problem, promulgating epidemic statistics, new nametags to wear, new boxes to identify with, new miracle pills and potions. The problem, as we see illustrated perfectly by the data in the treatment of addiction, is that the solutions almost never work. And, they don't have to, because our caregivers have already convinced us that the problems cannot be cured, only *managed and muted*. They invite us to take the edge off with this, numb the sharp feelings with that, and generally, “manage” our misery to the best of our ability.

When their solutions appear not to fix us? They remind us, always, that 'relapse is part of recovery'.

When you stop accepting the premise of *the need to struggle*, when you are ready to reject the misery? You are ready to shrug off the misdirection and ditch the label-makers. When you decide that you want a life worth checking into? Suddenly the flimsy "checking out" solutions -- recreational this and microdosed that, or the never-ending 'treatment' plan which affords you little sustaining relief – become a little insulting. They should be. Stop letting the carpenters do the work of the master architect. Refuse to be dazzled by their diagrams and cross-sections of your brain. They are pretending that they understand why and how your physiology relates to how you feel. Don't pretend to buy into it.

In advocating for your own emotional sanity, you can't be shy or patient. Demand relief from your pain, whatever its genesis. Demand results from the treatment that are aligned to your goals and timeline. "We'll have to cover that in our next session," just isn't cutting it.

So, yes, I guess I am a dismantler, or a

disrupter, or whomever I need to be. When we stare objectively at these two interlocking, increasingly co-dependent and self-perpetuating systems, systems that are producing generation on generation of dissatisfaction and struggle, we hope you will join us in calling for wholesale revolution and innovation.

The revolution will take decades of commitment to courage, curiosity, and resistance to the perilous status quo. Start in your own life, and your own family. Start demanding that the education your children receive is the continuation of the encouragement you are nurturing at home – create courageous curiosity and lifelong learners. Celebrate their little processors, whatever their unique code base, and invite your children to discover what lights them from within. It might accidentally lead them to a lifetime of individual fulfillment. It certainly can't hurt.

For ten glorious days we explored the circumference of Iceland – and each night, we set out to achieve our real objective – a sighting of the Northern Lights. After seven nights of nothing but inky darkness dotted by twinkling constellations, we still hadn't seen a glimpse of the auroras. I adopted a sing-

songy, self-soothing routine, saying, “it’s all right if we don’t see the Northern Lights. Iceland has been extraordinary. We’ll surely see them on some future visit to Norway...it’s okay, it’s okay, it’s okay.”

Finally on the seventh night, just after the sun was swallowed by the horizon, we were finally treated to four straight hours of divine celestial majesty – purples and greens, which are Kaleidoscope’s signature colors, no less. For our final nights, the Northern Lights were permanently with us, a show that could have inspired Peter Frampton’s light crew. And, just like that, we knew the difference – it would not have been “okay”, not really, with either of us to miss the lights. My people-pleasing self-soothing was the same sort of annoying conciliatory attitude I had previously brought to the years of hopeless treatment, trying to please my caregivers despite them not helping me heal....“I’m okay, it’s okay, we’re all okay,” when nothing was okay at all. We had braved sleeplessness in below zero temps for nights on end -- catching the lights was simply the miracle we both deserved, and manifested.

If you’re drinking alcoholically, you don’t have time for that type of politeness, hopelessness and futility. Resist being pulled into the

vacuum of a mental health ~~system~~ industry that is mostly stamping out widgets of dissatisfaction, disappointment and disingenuity. Fight the labels and the label-makers, everywhere. Refuse the false identifiers and reject anything other than a cure. On the other side of all the noise, a healthy connected life, the life you were made for, is impatiently waiting. Demand the miracle you deserve. Keep asking questions; never stop learning. Manifest your own bliss.

## I'm Sorry It's Come to This

This chapter summarizes my personal experience, in and out, of Fill-in-the-Blank Anonymous. For over 15 years, I have been attending recovery meetings. I estimate that I have attended over 2000 meetings of various types (using the same back-of-the-envelope math, I was easily drunk for 100 of them). In addition to our work with private clients, I still sponsor women who find themselves in the doorways of AA, NA, XA.

If you reject any of the principles in The Little Book, or you are committed to “alcoholism as a disease” with all its misguided accoutrements, then it’s unlikely you have even read this far. If I’ve already lost you, I am sending healing energy into the universe on your behalf, knowing that your soul is still waiting to become open. I’m not being bitchy. I really mean it, and I’m rooting for you, however you decide to run the race.

Instead, if these concepts have reached you, and it’s starting to make more sense to you to remain curious about potential success than to remain committed to certain failure, you are my people. And I’d appreciate an invitation to your house at Thanksgiving, as this section is going to cost me some friends, I fear. This

chapter deals with the role support groups have played in my recovery. But it also pokes affectionate fun at some of the premises which held it back.

I mean no disrespect to Alcoholics Anonymous and its offspring. I applaud them. If you're familiar with "the rooms" as we call them, you know that familiarity is their hallmark. I've attended English meetings in foreign countries, bi-lingual meetings in Mexico, and once in total desperation, a Spanish-only meeting in the United States. I've been in 300-person rooms in Los Angeles, where the recovery community is robust, and tiny meetings in the Adirondak park where only a few souls brave the harsh winter, and every type in between. I've attended meetings filled to the brim with UAW members in Detroit, Wall Street highflyers in New York, real estate tycoons in Columbus, and, for two years, I faithfully attended a closed/non-published meeting for Washington's elite (why they included me is a mystery for the ages). When life affords me stable geography, my home group is wherever I am – at different times, I have chaired meetings, made coffee, set out chairs, sold literature, set up Zoom meetings during COVID, hosted entire recovery communities for holidays. There is something comforting to

me, in the rigid, reliable structure of an AA meeting.

But the part of the program that has resonated the most with me is what happens outside of the rooms. The concepts of mentorship (called sponsorship, like the neighbor who vouches for you at the country club), community, the hastily scribbled phone number, the spontaneous invitations to coffee. It's the connections that sustain me.

In AA, a sponsor is simply one sufferer with some contemporary success helping another to find it. It's people, so it's never perfect, and I've had some real doozy sponsors myself, which I'll detail further. But much of the magic, for me, happens outside the confines and structure of the rooms. That's when, I like to think Bill W is winking.

There used to be a fantastic AA meeting on the Santa Monica-Malibu line. It started at 7 am on Saturdays, at Gladstone's -- there was a constant stream of cars turning off PCH into the massive oceanside gravel lot by 6:15, the room was teeming with the first 200 people by 6:45; No matter how early I arrived, it was never before the coffee urns were empty -- I briefly considered picking up a Friday night waitressing shift there just to ensure I could

score a cup of coffee. But I was leading the health exchange practice of a Fortune 400 company who frowned on moonlighting. Gladstone's was also a hopping seafood restaurant, doors barely closed from the night before; Saturday morning was redolent with the scent of stale beer and spilled cocktails. They celebrated sobriety anniversaries, always with cake, as the AA tradition has come to demand. If Bill W and Dr. Bob had predicted the boon they would be to pastry chefs world-wide, they would have invested in sugarcane futures. I personally took at least one single-digit celebration cake (tragic grammar, but in AA, you "take the cake", so to speak, on your anniversary), so clearly there were other people in early sobriety, like me, but it always seemed that someone was celebrating forty-five, fifty, even sixty (!) ridiculously long and happy years after alcohol – every Saturday. The meeting was called, "I'm Sorry It's Come to This," a moniker that might have generated self-pity under other circumstances. But it was impossible to feel sorry for yourself at Gladstone's on Saturday mornings. It was a crazy great environment, featured notoriously impactful speakers with meaningful messages, all delivered with grace and intelligence, every story a new phoenix rising from the ashes.

If you couldn't find at least one hopeful nugget in that setting, well, you probably weren't ready to quit drinking. A Come-for-the-cake-but-Stay-for-the-miracle sort of vibe blanketed this gin-joint-turned-refuge. Even in early recovery again (always, again), on those early mornings, facing the Pacific with the sun rising against our backs and shoulders, listening to really old-timers share their stories, it was impossible not to be moved. I recently heard that the meeting no longer exists...they hold it a new version up the road at Duke's Malibu. My last drink was at 51 years of age. I'd like to take my 50-year cake there in 45 years. If I can remember the date. AA at Gladstone's didn't get me sober, no. But newly clean and with some real healing behind me, it was a part of keeping me sober.

I love AA. I love NA (Narcotics Anonymous) even more, for all its rebellious leanings, though narcotics are one tornado that inexplicably missed my trailer. My harrowing adventures in alcoholic self-anesthetization were not, as my fifth-grade health teacher warned, a gateway to seeking relief from other mind-altering substances. I attend CA (Cocaine Anonymous) although I was only exposed to cocaine once, before dismissing it as "a disaster in the making", and Al-Anon (for friends and families of addicts) and Co-

Dependents Anonymous (they should rename this one Human Condition Anonymous). We attend as many support group meetings as possible. During my newly single years in California (a.k.a. "Seventeen Horrible First Dates") I even considered that SLA (Sex and Love Anonymous) might be more fertile hunting ground than eHarmony or match.com were proving to be. But alcohol was my toxin of choice, and AA is the oldest of the burgeoning 12-Step institutions, so it's always been my home away from home. It's probably the closest example of adherence, in every way, to what Bill W. imagined.

Maybe Bill would be offended by my blasphemous point of view, but perhaps not. Maybe he'd find me disrespectful, as some of the friends with whom we've shared The Little Book clearly have. More likely, his mission to rid the world of alcoholic misery is served perfectly by my interpretation, my curiosity, a slightly alternate point of view. I believe he and The Doctor wanted me to find my own spiritual awakening, not simply fake an understanding of theirs, like some rote, practiced catechism. I like to think if he's reading this now, I'm sober, and he's smiling.

Roll the credits, whomever is on them. I've had so much of everything, I've learned to

discount nothing. I accept that my next drink is kept just out of reach by an intricate, shape-shifting series of miracles, and occasionally, that miracle reveals itself in the connections in the rooms of AA.

I know “the rooms” intimately, globally, academically...as a participant, a journeyman, and a voracious observer. It would be disrespectful, IN the rooms, to dispel their myths, debate the supposed truths, critique the rigidity. We’ve only got an hour together, after all. Best to stick to our knitting. Because for a small percentage of us, in every meeting, something is working in our lives; and AA gives us a forum, within limits, to share it. It is community, fellowship and (sometimes) gentle guidance – it is connections, ostensibly without shame or judgement. It’s certainly the place to be if you are certain that you are the single worst human being on the planet. The rooms never run out of reminders that as bad as it was for you, it was equally devastating and insane for someone else. That’s pretty damned valuable.

For my part, I am an unconventional but popular sponsor. I come with a “Not Your Grandma’s AA” warning label. And I only have a single requirement of the women I work with – brutal, unwavering honesty. I

already know they haven't found their answers. If they are honest from the very beginning, there is plenty to be optimistic about in our journey together. If they're still playing Liar's Poker, brazenly raising the stakes with the two of clubs pasted to their forehead? They aren't ready. I give them ideas to consider how to become ready, suggestions, cautionary tales, but it's up to them. We're applying that same requirement when choosing clients today. Because we'll offer a 100% money back guarantee (take that, fee-for-service medicine!); it makes sense that we're highly attentive to readiness as the most essential characteristic of the people we help. If you aren't yet ready, then we're all just wasting time.

I don't seek out sponsees – that's as futile as a judge sentencing someone to AA – but there is always an organic fit if you look for it. When someone approaches me, I tell them: "I'm kind of an unusual sponsor. My 'program' is the opposite of perfect. I don't count days, and I'll happily tell you why, and gladly count yours with you, if you like. My partner drinks, and I am often in the company of alcohol. It's served in my home. I cook with it still. That may not be for you. I won't tell you 'Don't leave before the Miracle,' ...I'm only interested in *you getting your miracle* as fast as humanly

possible. Whether you decide to include AA in how you keep your miracle? Entirely up to you.”

I’m not easily spooked, as I’ve learned that superstition and recovery are poor bedfellows. The program, the literature, even my advice, are yours to interpret, debate (privately, if you wish to be popular), and discard or embrace. Healthy debate, an exchange of perspectives and views, is essential to my recovery. But I only know what works for me. And what worked yesterday probably won’t work tomorrow. I don’t know yet what will work for you – we’ll discover that together. Think of me as a sister, mother, daughter (insert age-appropriate role) or just a very safe friend. I’m not here to convert you to my beliefs...I’m here to help you discover your own. The path is *yours* to clear, but I will help you find the entrance, and I will stay beside you for the distance. I have the one requirement – complete honesty.

This pitch yields a low close ratio with newcomers. True newcomers often seem (dis)oriented to a particular kind of desperation – whether court-ordered, or family-threatened, the final death knell of walking through the doors of AA creates the pressure that it be a perfect recipe to

recovery. It isn't, if they are among the 85%. Or it might be. Either way, they need to propel themselves through those early days fueled by the notion that, however sorry they are to join this club, now that they are here, it had better work. Unsurprisingly, with that mindset, it rarely does. AA's own global service office estimates that 44% of newcomers slip quietly away from the rooms in their first 6 months.

I've learned that if at first, we are told: "this is what you have, and this is exactly how to cure it", the weight of our eventual, probable failure is ten times as crushing as not trying at all. The point isn't to "win at AA" – there is no graduation ceremony, the ride keeps running whether you stay on or hop off. Recovery support groups are part of my recovery, not the endgame. The endgame is having a life you love, an outlook that fortifies you – the endgame is thriving. People who try to lure you into the perfection of their AA "program" strike me as sort of one-dimensional, one note. So, quietly, privately, I honor my favorite of the AA expressions, "Take What You Need and Leave the Rest."

I was the newcomer that make the Old Timers shake their heads, knowingly, solemnly, sorrowfully. I failed like it was my calling.

Repeatedly, I was out, in, back out, the door revolved at an alarming speed. A well-meaning sponsor's chagrin can be far worse than a doctor's befuddlement. So, I'll do my best to de-bunk some of the rigidity and show you that, although the rooms of AA couldn't single-handedly *get* me sober, they are definitely a patch in the fabric of the growing quilt that keeps me cozy in my bliss. There is a very big difference.

In the 1980's Lisa Birnbach published her Preppy guides, one of them a Guide to College; alternating between caustic wit, practical considerations, and an insider's guide to campus life – it was chock-a-block with everything eighteen-year-olds were desperate to really know but afraid to ask. Maybe this chapter is a nod to that – one woman's guide to the rooms of recovery. I won't hold my breath waiting for a thank you note from The AA World Service Office.

Regardless, know that an estimated 6 million people walk into a room each year, most still resistant, nearly all in unfathomable pain. So, if you are resistant, you're in great company; another 24 million don't walk into the rooms at all. My advice? Stop resisting. Get curious. Open yourself to the possibility that on some far-flung Wednesday at 9 pm, while you're

climbing the walls, an AA meeting may be just the hour of distraction needed to push your next drink out a little further. If the Serenity Prayer, or any prayer, makes you cover your ears and say, “La la la, I’m not listening,” borrow my simple prayer, “Show me, please.” It’s a little utility player of a prayer, as I don’t have to be addressing God or anyone, and it’s far from the letters to Santa many of us contort our prayers into... “Show me the path, the lesson, a new trick, a clue. Show me.”

When considering whether support groups are relevant to you, know that AA and its siblings are available on every continent, and 24-hours a day on Zoom (which may be a single positive lingering artifact of the recent global insanity and isolation ushered in by COVID). There are over 125,000 groups in AA alone, in 180 countries, and it mushrooms when you add all the offshoots. As immediate (and free) solutions go, you can do a whole lot worse. Your therapist, doctor, mother or best friend can never be as available or accessible as the rooms and the cumulative experience they hold; even the wisdom in the literature is at your fingertips to embrace or reject, around the clock. So, get to know AA and its affiliates, so that you can soundly reject it (fail fast), or be open to the idea that occasionally,

a free AA meeting might give you just what you need.

These are the most common barriers I've heard, have observed, and felt myself, to AA:

**These aren't my people.**

Hmmm...Are you sure? Cause there are a lot of us, and we hail from every walk of life. If you haven't found at least one person in 10 that you can relate to even a little...you just haven't found your rooms yet. Keep looking. Make it a game, a scavenger hunt. You won't see many of them again, others are probably hours from a relapse themselves, and most you won't relate to at all. Be okay with that. No matter how picky or peculiar your taste runs, there really is a room for you. So, find it. Change what you're looking for, perhaps? Make it a personal challenge to walk out of the room with ANYTHING new in your pocket, one solid nugget you can stuff into a crack in your foundation, perhaps for today, perhaps for some other time. Stop bemoaning the fate that brought you into the room and make it your game. And if you can't find something? Maybe today it's your job to *leave* something in the room for someone else. There's another great AA expression that goes something like: "If you think you need a

meeting, find one; if you don't think you need a meeting, find one; the meeting needs *you*".

In fifteen years in and out, I've left meetings in a variety of conditions – sometimes I'm elated, motivated, confident, proud, encouraged, fortified; but also at times, pissed, hurt, scared, lonely. And more than once, very, very drunk. They can't all be Gladstone's. Sometimes the best I can do is feel sorrier for someone else than I do for myself. Those moments are rare, as my own past is so littered with regret, it's unusual that anyone can really shock me with events of their own. It's all part of a scavenger hunt mentality. Sometimes, I go in looking for something specific or hoping to see someone in particular. Sometimes, I find it. Most of the time, I'm just curious how everyone is faring and whether their triumphs might contain a secret short-cut for me in the coming days. My intention is generally, "just show me something new,"; I'm looking for what I can use tomorrow, not only what I need right now.

As I said in an early chapter, life after alcohol is a game of constant adjustment, coddwompling, until the very end. Whether you have previously scorned 'the rooms' or not, I'm a living testament that if you stop trying to discount the merits, and start

searching for anything that might help, it's easy to see the value of having a world-wide, free recovery support community in your corner. You'll find lots of people who've walked, are still walking, their own crooked path. People whose mistakes you don't have to make, if you choose not to.

Here's another approach. Let's say you, or someone you love, clearly drinks alcoholically. No question that you've chosen alcohol as the solution to your pain. You've tried a few AA meetings, begrudgingly (no one walks in like it's the first night of sorority rush and they're desperate to belong— we all go in, scanning for the exits), and you're not finding anyone or anything that makes sense to you. Try going to a Cocaine Anonymous meeting instead, just as a lark. Or an Overeater's Anonymous meeting. Don't share, if you aren't bulimic or a coke fiend, just listen. Sometimes it's easier to spot the sameness, the oneness, the relatable emotion when you're in a room that wasn't purpose-built for your bad habit. And all of the various offspring of AA could simply be renamed: Human Condition Anonymous; if you look, you will find your people, I promise.

**\*Powerlessness isn't in my vocabulary.**

Yup, I had this one in spades myself. Even with Herculean daily drinking, I was the

reasonably reliable sole-breadwinner for a family with significant financial demands. I held onto my career by its shreds through some agonizingly public misdeeds and missteps; I nurtured the careers and dreams of thousands. How could I be powerless – wasn’t I to be congratulated for clinging to the obvious power it took to sustain my career at all? (for more on that, see the chapter about working: before and after) And if I’m powerless, as I’m asked to recite in Step One, really what hope remains in the next eleven edicts?

If powerless isn’t in your lexicon, I strongly urge you to consider it semantics, replace it mentally with something like “my life has become out of control, in part, due to my astounding drinking habit.” I can easily surrender to that reality. Look, here’s a fact: almost no one walks into the rooms without the encouragement of their loved ones, employers, friends, a doctor, perhaps a judge. However you got here, someone you love or care about has suggested that you don’t drink like they do. And since you’ve been Hell-bent on continuing, with increasingly bleak consequences, it seems you might consider that you look pretty ridiculous to push back on this one word. No one is ever completely one way or another...it’s all a spectrum. Consider

it a temporary condition, a momentary loss of judgment, second-drink syndrome, whatever, but if you're parsing every syllable, nothing will reach you. Whether you're called to, ordered to, or shoved into AA, "Take What You Need and Leave the Rest" starts on Step One.

You and I already know that you aren't literally powerless over anything. We know that you don't have a permanent disease, rather, you have a coping mechanism. Therefore, if you learn to cope without alcohol, you aren't destined to have it accompany the rest of your life. We also know that you don't have a rare and unusual relationship to alcohol, despite your probable protests: your relationship with alcohol is directly proportionate to your consumption. We know that most of the time, alcohol looks like survival in a bottle; it's a very logical choice compared to the alternative of ceaseless intolerable pain. Yet, the consequences, from embarrassing to grave, are piling up, and you still don't seem to be distancing yourself from it. Since you will need to summon all your power in order to change your life, perhaps take a moment to re-orient your perspective.

I, too, reject the premise that we are powerless – it's the second tenant of The Little Book. But I also know that we must surrender

our white-knuckled grip on our alcohol solution, because it's become an alcohol problem. Surrender to that. Get a thesaurus. Bill W. isn't here to debate every word (but the sober person to your left and right might be) – instead, pick a fight you can win and let this one go. Few of us have trouble with admitting "our lives had become unmanageable." Clearly, how else did we end up in this church basement? If you don't get it today, be open to the idea that an entirely different version of you might really need it tomorrow. Surrender. If you're picking it apart, you're giving yourself away – you're looking for a reason to leave, not to stay and fight for your life. Excuses, not answers, are in the nit-picking. Can you think of a single person on the planet with whom you always agree, never debate, never have a difference in viewpoint? Bill W. is no different. I've learned to keep the debates over most things completely outside the rooms. But this little one is a debate between you and you. Even if you win, you lose. Put down the semantics sword; it doesn't serve your sobriety.

### **\*Too much God in AA.**

That's entirely up to you. Most meetings start and end with The Serenity Prayer, the Lord's Prayer, the Third Step prayer, or a version of giving thanks and asking for guidance. For

my part, I suppose I am bound to share that yes, I do emphatically believe in God.

The programs speak to a “God of your understanding...a Higher Power”. Unlike many, this first obvious barrier to embracing the program, God, Himself, wasn’t a barrier for me at all. I have never doubted the existence of a power greater than myself. I need only watch the opposing horizons at dawn and dusk to know that something much larger, Universal, and Divine is at work. Even when I was living shackled to a pier, with pain crashing into me, drowning, I never doubted His existence; I just assumed that God had other things on His plate. But I’m not here to convert you to my way of thinking. My life is richer with God in it; you may not need the sense of being simultaneously impossibly small and completely unconditionally loved, and guided, by the Divine. I don’t force it. But don’t let it be the reason you are one of the 44%-ers who immediately reject the rooms, please. My God is likely willing to help you even if you don’t believe.

My mother is a Christian. But, at 82, she sees the wisdom in hedging her bets. From her way of thinking, just in case the Muslims or the Mormons or the Buddhists or Jews or the Hippy-Dippies have some of it right, and ‘her

people' might gotten it a bit wrong, it's safer to split her chips between red and black. This strategy won't help her in Vegas, but it's a winner for keeping her in the Divine, whether she is right or wrong. Hers is a deeper kind of faith than any individual religious sect can offer. It's a certainty that even if the Catholics and Hindus can't quite agree on the specifics, the essence of a Divine presence is working in her life. When something is worrying a hole in my mom's heart, she sends out prayer requests to every conceivable corner. I like her style. It's indicative of the kind of curiosity which has been noticeably absent from recent global dialogue. It says, 'I was raised to on this, this is what I believe, and I live my life accordingly. But I'm leaving room to be wrong, and I hold space to honor your beliefs'. That's diversity and open-mindedness, and willingness in their purest forms.

Since the dawn of humanity, man has used religion to control other men; we've engaged in worship, debate, violence, terrorism and wars over fierce beliefs we *cannot* be sure of in this life. If faith is a belief in things unseen, religion seems to be adopting someone else's belief in things unseen. It makes me sad that anyone would be willing to die or kill for a position they cannot even confirm is true.

My ex-husband has an expression that applies here: 'Leave room to be wrong'. It's like 'Take What You Need and Leave the Rest', inverted. Don't let an insistence that there is no God be what keeps you from everything else. Skip it. You might be wrong; so, isn't it silly to insist that you aren't? You look a bit ridiculous with your hands over your ears saying "La-la-la I'm not listening -- I just can't hear this, *this God stuff*," in a room which exists solely to offer you solace. If you don't find that solace in God, yet (perhaps ever), move on. Or, take a page from the Flat Earthers' book, and Leave Room to be Wrong.

**\*The Steps aren't helping me; they don't speak to me".**

This one is easy. Get a sponsor, if you haven't already. If you still feel this way, you have the wrong sponsor. No shame in it. When you walk into a cocktail party, you don't leave with everyone in attendance on your Facebook friends list. We're unique. It's a game of adjustment, interpretation, attraction. Who cares if other people seem to gravitate to the cotton candy saccharin of a particular passage or a Step or a Tradition? Your initial focus must be on finding a or getting a new one. When we work with Kaleidoscope clients, we have a role we call a 'sherpa'.

Your sherpa is just a guide, a coach, an experienced journeyman, someone who's made the trip before you. They're not there to make you adhere to their route, or tools or suggestions. They're only there to keep offering them, endlessly, patiently, until one makes sense to you. They're here to show you as many possible ways of climbing the mountain as it takes for you to choose your own.

The greatest sponsor I ever had was an early sponsor I found in Puerto Vallarta, shortly after I'd had some relief from my trauma, through EMDR. I was newly energized about the idea that, sober, largely free of my obvious demons, it was my job breathe new life into their entire program. I was obnoxious; she was mostly amused by me. Sober, getting physically and emotionally stronger by the day, and with a decade of meetings in the rearview, at that point I thought my calling was to save AA from itself. I would isolate the minute details, explaining in depth the myriad myths and trappings of this stodgy nearly a century old program. She would simply look at me, and say, "I see your point. Here's another way to maybe look at it".

Her approach gave me a venue to debate and discuss without recrimination. I was certain I

was right, with my 18 days or 11 months or 2 years of gold star sobriety success; surely my new calling was to teach, not learn. She mostly thought I was full of shit, hopped up on the pink cloud (this is what the old timers call the period of bliss many of us find when we finally stop poisoning ourselves with liter after liter), but she never judged, however comical my protestations. Her name was Lacey, and she hailed originally from New Zealand. I'm in touch with her to this day, though I long since moved on to other mentors, sponsors, sherpas. I collect people who are curious enough to see if they can open my mind and patient enough to withstand my constant questions, push back, objections. Find your Lacey (or Larry, as the case may be; the rule that you work with only with members of the same sex – unless they prefer that sex, in which case, it's the opposite sex you should seek as a sponsor -- is one I vehemently support; sponsors are **not** romantic prospects).

**\*Ninety in 90: Ninety meetings in the first 90 days -- a *must*.**

Too often, this potentially helpful suggestion, is laced with an underlying threat. I can promise you, with our travel schedule, client schedule, and ever-shifting geography, I personally have never made ninety meetings

in any consecutive 90-day period. Ever. Even with Zoom meetings available 24 hours a day. This is a bit like not shaving during the play-offs -- that bizarre custom where men all over the world celebrate the certainty that preserving their increasingly untidy scruff is somehow essential to their favorite sports team's performance. The meetings are for you, primarily; in the early days, I think it's okay to be really, really selfish about that. You have more questions than answers, even if you've been a member of the club much longer than you've been sober.

Superstition has no place in my recovery. I used to tease the old-timers, privately," if I can't make ANY meetings this week, but I do 2-a-days the next, will that still count? Is there anything magic to this formula at all? If I wait until the last four days of the 90 days, and go to 92 zoom meetings 24-hours a day, will that satisfy your silly condition?" Go to as many meetings as you must until you find the rooms that suit you. Go to as many meetings as you can, with your new scavenger hunt mentality. Fill your own toolkit with suggestions, people, books, passages, tools, techniques that make sense to you. Skip the rest.

Anyone who tells you that sobriety and healing have but one sure formula is wrong.

Anyone who tries to make you feel as if everything is working for everyone else, and therefore will, for you, is a charlatan, a snake-oil salesmen. You have doctors, drug companies, and therapists for that sort of superstition, all peddling their slice of the ‘standard of care’. 17,000 treatment centers are standing by to take your call. The only promise we make is that your answers are already inside you. You have everything you need to find your way, though you may not know it...as Glinda reminded Dorothy, “You’ve always had the power my dear, you just had to learn it for yourself”.

**\*Fake it til you make it.**

Or its companion “Act as if,.”. Like all of AA’s lexicon, this well-intentioned expression can really piss me off at times. As an active drinker, my entire life became less and less real to me...alternating between the watery, life-stealing blackouts and each new day’s hit list on my latest apology tour. I seldom knew the facts of the previous day firsthand, let alone had the recall to apologize with any specificity. Faking anything – joy, contentment, even orgasms – was tossed out with the last of the vodka bottles.

I went through such a course correction that I was unfailingly, annoyingly, aggressively

honest for a while. It was refreshing for me, sure; for a few months, the opportunity to be truly honest was so seductive that I even ignored the social niceties that protect people from the brutality of unnecessary truths. “Do these jeans make your ass look fat? Why yes, they do.” I was so in love with my newfound authenticity that I left nothing to the imagination.

Quickly realizing this new degree of honesty might not be serving my friends and colleagues, I adjusted again. When I sail, I also tend to overcorrect, tacking more sharply than needed. But I’ve learned that true honesty and authenticity aren’t about making the right call, or even being accurate, it’s about keeping the ship upright, facing ahead, finding the fair winds and following seas.

Faking it, in a singular major element of your life (alcohol), leads to faking it in others. Soon, there wasn’t a soul left on the planet who really knew me. Including me. That’s an awfully lonely way to live. If I want to lean into resentment, I think about all of the horrors of my drinking that no one ever discovered. I don’t want to fake anything anymore.

You’ll find your own sea legs in sobriety. But don’t feel pressure to “fake it til you make it”

because faking it won't light your soul on fire, and there is no making it...no finish line, no closing bell.

**\*Counting days from your last drinks:**

Like everything else, this one is very personal. Some of my friends know exactly how many days they've lived since their last drink, at all times. They probably have an app on their phone – there are many that will tell you exactly how many hours, days, weeks, months years it has been that you have “not done” something. It strikes me as a little hollow.

Here's my take: I love a good countdown; I know how many shopping days until Christmas or my children's birthdays, how many seconds until the ball drops in Times Square, how many days to my theoretical retirement date. But the counting up tally does nothing for me. Up to what, exactly? Time is a silly mistress when it comes to bliss and recovery. The only moment I need to get through is the one I'm in, and then, the one after that. Other people constantly ask, “how long have you been sober?” and seem disappointed when it takes me a minute to calculate the response. Who cares? I am. Once, I wasn't. But in this moment, today, I am. My strength comes from within, and all

around me. But none of it comes from the calendar.

I have seen people with ten, twenty, thirty even, years of sobriety pick up a drink. I have seen people with little time at all apply such dedication to their own practice that I am ashamed of my own hap-hazard, “whatever works right now” meandering path. I have also seen people find success just months before leaving this world, dying clean and sober. Time ‘in the bottle’ is not reflective of the severity of your drinking problem. So why do we think that our ‘clean time’ affords us any special protection?

Many believe in the notion that it takes 21-ish days to form a habit. Maybe. There is a decent amount of evidence that it takes a while to make a change; we resist change, even (sometimes, especially) those that are for our own good. I support that. When you quit drinking, depending on your luck, your genes, and the damage you’ve caused, you and your doctor may be counting up to the days and years it will take your liver to recover. That’s logical. Quitting drinking – not drinking -- is just the absence of something. And my own experience has shown me that nothing about my abstinence is fortified by its tenure. It just isn’t. The only moment that

counts is this one. At ten years, fifteen years, even twenty, I think I will have more practice reaching for *anything other than* alcohol...but it's not a guarantee, affords no special protection in this moment. And no length of time makes me prouder that simply getting through the most recent test of will and luck that the Universe is going to challenge me with today.

Like everything else, if counting and cakes work for you, you're in good company. I'm not trying to take away your celebrations. But if you're like me, and time is such a meaningless currency when it comes to avoiding your next drink that it seems innocuous at best, not particularly helpful at least, maybe stop counting? My mom counts for me. Someone in your life will be happy to count for you....

### **\*Stick with the Winners**

This is a tricky one. First, you may need to recalibrate the definition of "winner". Is it tenure in sobriety, or tenure in bliss? By now, you are probably starting to question a lot of the mythology and wrong-minded social conditioning that surrounds alcoholism. If "winning" looks like white-knuckling abstinence from alcohol while still suffering mightily, you will find a lot of people in the

room to stick with. What I need changes daily, so the people who I admire does as well. Sometimes I'm struggling for the courage to be vulnerable, and the "winner" is the person next to me sharing something achingly personal that reminds me that "what's coming is going" and helps me find the strength to share my own challenges. Sometimes, I just need a slight perspective shift from my "glass half empty" musings, and the "winner" is a friend who proactively underscores something to be grateful about in my story. Sometimes, I am someone else's "winner". Sobriety is a minute-to-minute metric.

Ask yourself what you need today and make it a game to find someone in the room who has it. If you have excess bliss today? You might be someone else's "winner". Fight the tendency to label the people as winners or losers; instead, investigate their techniques, mindset, strategies for yourself. Discover what you connect to, and you'll find your winners. I'm pretty sure they'll be a ragtag bunch of people with variable sobriety and highly variable success stories. The winners are the people who help you win, regardless of their tenure, or image and position in the fellowship. And finding them in this unusual way makes every meeting an adventure.

### **\*Relapse is Part of Recovery:**

I was once a card-carrying, completely deluded member of the 'relapse is part of recovery' syndrome. My personal track record left me little choice. I 'got it', lost it, reached for it again, let it slip through my fingers dozens and dozens of times. I counted days for many months, sometimes years of sobriety, only to drag everyone into another, seemingly unpredictable, soul-crushing relapse. And the most soul crushing of all were the ones no one even knew about, to this day.

Given the number of celebrities who famously, publicly, struggle with alcohol, Hollywood gets AA way wrong, way too much of the time. Weird right, since they certainly have the power, the voice, and our undying attention? They want us to know their political, social, environmental points of view, yet they persist in these false portrayals of addiction; I rarely say, "Did you see X film? ExACTly how it was for me." More often, I'm puzzled by their devotion to the fictions -- inaccurate, unfair, silly portrayals of the rooms, the principles, the essence, and the people. How can a program that is so utterly unchanged in its first century be so misrepresented?

When they get it right, it's something to admire and appreciate. I believe that they got it mostly right when they turned the pivotal memoirs of David and Nic Sheff (Beautiful Boy: A Father's Journey Through His Son's Addiction, and Tweak: Growing Up on Methamphetamines, respectively) into the film Beautiful Boy. I would love to know if the authors agree. (I'd also like to put in an early request that if this story is ever made into a film, I would like to be played by Laura Dern. Darren is considering a young Nick Nolte, or a younger Dennis Quaid.)

There is so much to appreciate about the human condition in their story, Beautiful Boy. For me, there is little in the tale that is directly relatable. My kids have had their own struggles, but so far, the alcohol tornado has only rattled their trailers. Oddly, drugs didn't appeal to me as a daily solution to my pain. By the time I spent enough time in NA to hear what I'd been missing, I was already sober, so their siren song had passed me by. Phew. In my life, I haven't managed to dodge that many bullets, but drugs never found their mark. Through my last five trips to drug and alcohol treatment, I was certainly exposed to enough information and contacts, but vodka was legal and plentiful, so it's a bit of grace that I stayed with what I knew. Because the temporary

relief my friends had found in heroin or pills came with the same kind of permanent and devastating results I already knew how to create. I didn't need alcohol as a gateway drug, it was already my perfect medication.

There is a scene in the film, in which Steve Carrell's character, David, gets a call from the rehab from which his meth-addled son, Nic, has just escaped. The woman who runs the center calls to notify David that his son is missing, explaining that, as he is over 18, once he leaves the premises, they are no longer responsible for him. Calmly, she tells him, "Relapse is part of recovery," with the identical smugness used by the woman who ran the first alcohol rehab where my ex-husband admitted me so many years ago. I wish my ex had the presence of mind in his desperation to respond the way the movie character did. "Relapse is part of recovery??? Isn't that like 'crashing is part of flight training?'. Exactly. **What** a racket.

Relapse is NOT part of recovery. Recovery is part of recovery. In AA, we often pair it with, "Keep Coming Back, It Works If You Work It," the final mocking mantra we chant in the face of relapse. The "you" always feels vaguely insidious..."it works, if **you** work it". Hang on, I see what you did there...Isn't that just

another way of saying, “if it isn’t working, it’s YOU?” Kind of a lazy mantra on the program’s part, isn’t it? Like so many of AA’s affirmations, this one reminds us that if it isn’t working (and most of the time, none of the standards of care are working for most people) it’s because you aren’t working hard enough. Try harder, longer, more, better. It’s the free version of your therapist’s, “Sorry, we’re out of time. Let’s cover that next session.”. Or your doctor’s detached “hmmm...let’s try a different prescription. Weird that this pill isn’t curing you.”

Second (second only to the damage caused by the notion that this is an incurable, chronic disease), is this maddening self-fulfilling relapse prophecy; the idea that you will probably succumb to it over and over is a devastating handicap, a foreshadowing of certain failure. And it seeps into our loved ones’ unconscious creating the permanent narrative of anticipated future failure. Bullshit. Accept the fact that the first drink is always on you, and no one can ever make you have another one. I know that every single relapse which followed my first genuine efforts were on me. They aren’t a prerequisite to sobriety – they are the failure to find what works.

Relapse just isn’t part of recovery.

**\*Don't get romantically involved in the first year of sobriety.**

This is such an interesting one. I've had ten "first years" in sobriety. I was married for seven of them, pregnant for two, separated for yet another, and finally, I was divorced and lonely at the time of my last drink. Loneliness, and a general sense of not belonging are party favors I still carried, long after the dregs of my capital T traumas had been scraped from the ocean floor of my soul.

I am social, gregarious, and like to surround myself with friends and family as often as possible. I am a Taurus, and while I know that commercial astrology can seem hopelessly generic, it is impossible not to see the Bull's traits in my own demeanor. I love to entertain, make a beautiful home and fill it with treasures I love and people I treasure. I was engineered for companionship. So, this AA mandate was a real stumbler for me.

First, it immediately excludes the massive numbers of us who try to break free before we have lost the loves in our lives. It creates a tangible sense that if you still have a spouse or partner or love in your life, you will need to eventually lose them; then, spend a chaste, lonely, celibate year in sobriety before you can

safely feel intimate love. Who could resist that long, lonely forecast?

Here's a capital T Truth, from Johann Hari: "the opposite of addiction isn't sobriety; the opposite of addiction is connection". When the whole world embraces this mantra, I think we will finally usher in a welcome era of understanding, compassion, companionship, fellowship.

Consider the earlier perspective: any amount of tenure in sobriety affords little protection against your next drink. If you are like me, you already suffer from terminal uniqueness, which is isolating to begin with. In the tangled mess of would-be solutions over the years, the strength of the tether joining me to friends, family, love has figured heavily into my recovery. The absence of vibrant, healthy relationships was always in the root cause analysis when I fell short. Part of my scavenger hunt is the daily quest for the moments of oneness, collaboration, connection.

On my birthday a few years ago, at that lovely beachy supper with a couple dozen celebrators, I raised my mineral water in a toast, declaring, "God, I am finally ready for great love in my life. But after years of futility, you may have to be more obvious!" Two

weeks later, I met Darren; prayers answered. Amen. Now I had some years of success behind me, and I was ready, the gunk had been scraped off my soul, and I was open to the idea that real authentic love and connection could come into my life. Because I peered into the kaleidoscope through the lens of an uncluttered soul, I felt free to make authentic choices about love. It was well over a year, true, but it wasn't about the calendar, it was about my internal compass being set to true North.

Here's another Truth. Released from the bondage of your own trauma, one of the most difficult things you will encounter is a front-row seat to other people's misery. You need to create a fragile balance between your constantly shifting needs and those around you. Set your soul's compass to "bliss" and be attentive to what causes the needle to jump and quiver.

Find relief from your pain, *first*. Know yourself, *first*. is perhaps a better marker for relationship readiness than some irrelevant sense of the passage of time. If you are buckling under the weight of your inescapable trauma, you aren't bringing your whole authentic self to your current relationships, or any new ones. It's binary, not time bound.

You are either emotionally free or emotionally imprisoned. But to apply a hard and fast rule on when to fall in love? Yeah, right. Pencil that in and let us know how you fare.

I'm sure you have a friend or relative with a seemingly "broken picker". Despite the best of intentions, they seem to attract troubles with family, career, they are invariably 'unlucky' in love. That was me, and it had nothing to do with luck. In early sobriety, I found myself locked in a series of poor, complicated choices in my own career, love life, and estranged relationships with family. Sober, sure, but with a soul encased in a kind of hard, dark resin, obscuring my view of what was coming at me. It wasn't until much later, after a lot of scraping and chiseling and polishing that I was able to clearly evaluate my choices. I changed jobs, geography, fellowships, friends. When I raised my mocktail to the girls that night, it was pointed at true North, with openness, and a sense of my authentic self, reawakened. Had that moment occurred just 12 **minutes** into sobriety, I would have been equally ready to accept the love I truly deserved. My picker finally had a chance and the needle was jumping. It wasn't about time. It was about me.

Time is a silly metric and a useless device from which to judge progress in recovery. You're on your own clock, not your next-door neighbor's. Be wary of anything that sounds like a hard and fast rule. Fix your picker and you'll be free to choose.

**\*Rarely Have We Seen a Person Fail:**

Most meetings open with a few readings straight out of the original literature. "How It Works" is a frequent pick, and it pisses me off every time I read it. First, the statistics about the absolute success rates of AA are hotly debated. I mentioned that AA's own group service office quotes a very high rate of initial newcomer disengagement. But most of the lore about AA's success rates aren't self-generated. In fact, between the printing of the first and second edition of AA, they changed the word to "Rarely" from "Never". So, they already acknowledged that this simple program wasn't a guarantee. The passage goes on to say: "Rarely have we seen a person fail who has *thoroughly followed* our path....". That's a big, juicy subjective caveat, no? Continuing, "there are such unfortunates. They are not at fault; they seem to have been born that way. They are naturally incapable of grasping a manner of living that demands rigorous honesty. Their chances are less than average." Well, now. That strikes me as just

the tiniest bit self-righteous. It could just as easily have been written “if it’s not working, it’s your fault.” Which can be a powerful turn off to a group of people who are already internally and externally conditioned to believe everything is their fault.

Since the success rates of AA, limitations of the validity notwithstanding, don’t beat any of the other “standards of care” it seems like perhaps we might tone down the “Rarely have we seen a person fail,” rhetoric in favor of something that’s less confusing to people who are staring at the slogan “Relapse is Part of Recovery” printed on the wall above the chairperson. Perhaps an overall attitude of: “this stuff is incredibly personal and complicated. Nothing works for everyone, and not everything works at once. Sometimes real healing must precede real discipline...”

There is a men’s “Crosstalk” group that is rumored to take place here in the shadows of San Miguel de Allende. Presumably, they drop the veil of catechism and really debate how AA is working in their lives. I’m considering starting a co-ed version myself. The debate keeps me sober. Stifling it and making us feel as if “everything is working for everyone” but us strikes a sour chord for many. But the lesson is to seek what and

whom you *can* relate to...take what you need and leave the rest.

If I haven't addressed your personal barrier to adding a recovery support community into your plans, please reach out to me directly. We have big plans that our website will soon host a place for people to record their own stories -- their triumphs and tragedies -- and we will try to highlight them all, respectfully, in the hopes that someone else might connect to them. In the meantime, if you aren't sober yet, perhaps leave a little room to be wrong. Consider that hidden in plain sight in your own backyard may be the meeting that pushes your next drink an inch or two farther down the counter.

The biggest challenge with AA is the same challenge faced by the rest of the standard of care -- rehab, non-12 Step groups, traditional therapy, psychiatry and pharmaceuticals – if something isn't working for you? It isn't working. Fail, but fail *fast*.

This is perhaps a critical facet that distinguishes for-profit private healthcare from single payor solutions. In private healthcare, we buy a lot of bad medicine because we fall

victim to extraordinary marketing, and we are determined consumers. So, if it's FDA-approved, or JAHCO Accredited, or HIPPA-compliant (all deeply troubling yardsticks), and it's legal, we fall prey to our own worst instincts as consumers. And with little meaningful transparency or regulation about effectiveness, and a 17-year time delay on breakthroughs acting like breakthroughs, we are always a Party of One.

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A bit of a postscript to the friends and family of the alcoholic, regarding AA, Al-Anon, Al-ATeen, ACA, and their ilk: There are no pat answers, no perfect path, no one way. Some spouses, kids, parents, friends attend faithfully with the alcoholic in their lives. Darren does, or we mightn't often see one another. He doesn't love it, but he loves me, so he joins me on my scavenger hunt. If your loved one would find it supportive, find an open meeting and attend with them. You won't feel any pressure to share; you'll be very welcome, but only to listen. It's the opposite of scary. If the alcoholic in your life doesn't relish that kind of support, leave it alone; maybe try an Al-Anon meeting for yourself.

My extraordinary children and their exceptional future spouses have each attended one AA meeting with me, on

separate occasions. They were powerful, symbolic moments in my recovery, I hope for them as well, but I don't expect it to be repeated. My mom and stepdad (very) nearly attended a meeting once while visiting me in Mexico, but their apprehension was palatable; in the end, I made an excuse to allow them to bow out gracefully.

My mom is a big fan of AA, for me; but I think what goes on behind the doors will probably remain a mystery for her. Her autobiography should be entitled, "Your Glass is Half Full...".

My former in-laws were rumored to have attended a few Al-Anon meetings on their own, around the time my drinking problem became a permanent family-wide drama. Revealed to me many years after the divorce, it struck me then, and still, as precisely the type of emotionally supportive and quietly generous gesture they were known for. Perhaps they found some solace. I hope so, as loving me was difficult, and yet they were steadfast.

I always appreciate the friends and family members who have made the effort, however awkward it might have been. And for those who never could or would, that is perfectly fine as well. Darren joins me routinely, when I feel like company, when he feels called to expand

his own understanding, or just to twist his own kaleidoscope. The rooms are a simmering stew of humanity and humility with a dash of gratitude sprinkled into the pot. The Human Condition Anonymous. It's a great place to study the world and your place in it. And we're on the scavenger hunt to find new nuggets for you, so he listens to what is being said, and listens in the silences for the quiet omissions.

In the early years, he bristled and shifted in his seat. It reminded me of my own dear father in church, his groans registering his muffled disapproval of the sermon. Darren's barely suppressed irritation also reminded me of my own initial attitudes -- the silly obstacles I put between myself and the worldwide support community that was available to me. He, too, had to learn to take what he valued, and ignore the balance. His bristling at the rules and steps and traditions reached a comedic tipping point, and he sometimes pressed past, breaking the rules altogether.

I remember the meeting in San Miguel de Allende, when he cleared his throat, booming, "Hello, I'm Darren, I'm from Australia, and I know I'm not supposed to share, but I have a few questions for the group..." I cringed, "Oh, boy I thought. He can't get us kicked out of

here fast enough...cross talk, a non-alcoholic sharing, asking direct questions, this is a disaster!" But he's a bright, kind, somewhat imposing man, with an Aussie accent that's like an international "get out of jail free card". The chairperson that afternoon was gentle, masterful in his redirection; today, Darren saves his sharing for me and others, after the meeting. It's our own meeting-after-the-meeting, so we get twice as much out of the investment, and the AA rules and principles are preserved for another day. Win-Win-Win.

Recently, we took in the Sunday noon AA meeting in San Miguel de Allende, our adopted Mexican hometown. It was an open meeting, of course, or Darren wouldn't have been welcome. He listened intently to the chairperson's gentle admonishment that only those with a sincere desire to stop drinking are invited to share. At the end of the small but animated meeting, everyone had shared, and the chairperson said, "we have a bit of time for more."

As I felt Darren shift in his seat, I braced myself for a stern reprimand that might follow his opening gambit, "Hi I'm Darren, and although I am not an alcoholic per se, I would like to share....". But God was smiling on that little room, Darren's share was beautiful, so

profound, and in the end, even the crustiest of the rule followers were nodding and smiling. I thanked the chairperson afterward, a little apologetic, and he said, "Hey, I'm the chairperson. I could have interrupted him at any time, but he is part of supporting you, which is part of supporting me, etc." What a lovely, lovely point of view. Also, he elevated my esteem with the Ladies of the Old Guard, as I refer to the long timers who are, as everywhere in life, a bit cliquey. The program itself is very welcoming – introverts pass through the rooms without incident. But it's a bunch of people – a big bunch of them – so it still often feels like there are the cohorts as high school, including the Cool Kids.

Technically, I know however differently I run my own recovery, however 'off-book' I am as a sponsor --the rules, the literature, the steps, the traditions -- keep the program as unchanged by time as possible, which keeps us closer to its origin and its promises. Many addicts, incapable of managing their own lives, decide to take it upon themselves to manage AA, NA, etc. in their recovery. But, if you remember that everyone in the room has a history and a context for inescapable pain and a potential short-cut for your own recovery, it generally affords us all a little grace to color outside the lines, even inside

The Rooms. It still proves insufficient for the vast majority – luckily, it only needs to be a potential consideration for you. Your own unique and varied path will become clear.

Alcoholics Anonymous, in its essence, has little to do with alcohol. From the outside, it might look like a bunch of former drunks, sitting around talking about how drunk they once were, and how they're not drinking anymore. And for the members who have not found sustaining relief from their agony, it is. Because they are still camped out in Pain's Waiting Room, statistically, AA probably won't be a permanent solution to their drinking problem. But for some of us, AA is part of our growing arsenal against the next drink, not simply a memorialization of the last. It is about finding connections in our sober lives and recognizing what we eventually learn: when we walk away from the drinking 'solution', we can see the authenticity of the real answers. It isn't about learning to live *without alcohol*; instead, it is in the learning to *really live* after the alcohol becomes irrelevant.

Everyone is different. There will be plenty for you to do to support the alcoholic in your life, but our needs are fluid and individual, so unfortunately, how to support us must be as

unique as we are. If you are ready and open-minded, we'll figure it out together.

## **Work, Work, Work**

Success consists of going from failure to failure without loss of enthusiasm.”

~ Winston Churchill

My entire life, it has been observed that I am a “hard worker”. I don’t see it that way.

Coaches, teachers, bosses have commented, unprompted, that I cannot be outworked.

Since I first tied on a Friendly’s apron in the Wilbraham, Massachusetts home office store in 1984, it’s true, I have always worked, earned, devoted a portion of my day to toiling for someone else. Even as a child, when we played “school”, I wanted to be the “working mom” who dropped my child off. I loved spending hours at my dad’s animal hospital, re-organizing, creating imaginary record-keeping systems, and marketing promotions. I love work, truly; but it has never been hard. That is, until I got sober, actually.

Professionally, beyond waitressing, I’ve worked for eleven companies in 32 years. That’s twice as many job changes as the average Baby Boomers who came before me. If that seems like a lot, consider this: I was drinking suicidally during some or all my tenure at 10 out of 11 of those companies. In

the depths of my drinking, my career likely saved my life. Work tethered me to a small, defined, warped set of priorities, and despite record-breaking levels of consumption, I was pretty good at work. When you consider just how drunk I was in the board room, at the podium, at my desk, in staff meetings...you'd have to guess that I was maybe really very good at work. There really isn't a more plausible conclusion, as I got away with a lot of bullshit – soap operatic, high drama, intense bullshit. As we embark on starting our own firm together, I spent a lot of time considering what it was like for me, and importantly, for my employers and the people entrusted to my care.

My first 'real job' after Northwestern commenced in 1990. Over the next twenty years, other than private promises hastily made and immediately broken, I never even made an attempt to stop drinking. So, if you are unlucky enough to have hired me between 1990-2010? I'm sorry, but you should have fired me. I know you considered it. I will provide a highlight reel but obscure identities; I have no wish to embarrass my former employers as individuals or companies. There isn't much here that is accretive to any of our brands.

Beginning on my fortieth birthday, and the ten years that followed, I checked into/graduated from several treatment centers; first for an eating disorder (it is very common for alcoholics to chase any co-occurring “illness” to pull the spotlight off the alcohol); since I had been bulimic since the age of 12, it was both convenient and accurate as a distraction, and it was genuinely affecting my health, and then for alcoholism -- a staggering five times.

Much is devoted to my experience in treatment centers, but they were all effective in unique ways and utterly ineffective in the same way.

Those employers, during the “rehab years”, really got screwed. Even when I continued working from treatment (and boy, did I), they were saddled with a geographically imprisoned executive whose best qualities emerged on the road. You guys got a raw deal.

Only my very last employer got me completely, totally, permanently sober; ironically, it was at that post, stone cold sober, “lights on”, ready-steady that I found myself in the most toxic alcoholism-fueled workplace disaster of all.

If you have an active alcoholic on the payroll, you already know you have a real problem. Even at a tiny firm, you'll have to navigate a complex morass of considerations, most of which are designed to protect the alcoholic: policy, law, business risk. You will also deal with your own variable degrees of compassion and personal feelings. Whether they are operating heavy machinery, flying your aircraft, or answering your phones, the active alcoholic on your payroll is a huge problem. The paralysis you face as their supervisor is no less vexing than what they face with the medicalization/non-treatment of the faux disease. You're in it together. And it's a mess. And the current employer-sponsored medicalized options available to you – the 'standard of care' -- are a waste of time, money, and mutual dignity.

I'm not an innocent bystander, so I won't even attempt the illusion of objectivity. I should have been fired 100 times by the first ten companies I worked for. I was a drunk, and I seemingly would not, or could not, stop drinking. Curiously, from 1990-2006, during those unchecked progressive drinking days, I worked for the big guns. I led increasingly vast teams at the trifecta of the nation's dominant health insurers. My teams were impressive, and the list of clients we served

was the like the Who's Who: the Fortune 1000. My job was very public. Most days, my drinking began in the morning, so it was a fairly safe bet that I was well on my way to a mind-eraser of a day in your board room or on your factory floor during most of our encounters. Impossible as it seems, some never knew. Those who did were mostly quiet.

During that first half of my career, I had great benefits (should I choose to reach for them), and a return to my job would have been protected (should I choose treatment). I also worked directly for some of the kindest, most brilliant CEOs I have ever encountered – intuitive leadership in motion. And, once or twice, I've worked for the other kind, too.

In the Spring of 2006, I was the president of a sizable division of one of those giants. We'd emerged from an incredibly long and difficult turn-around during which my unusual brand of leadership had ushered in a lot of change and finally, a return to a healthy and growing bottom line for my division and the company as a whole. We were being profiled on the mainstage at a national benefits conference that was the see-and-be-seen event of the year. Following my speech, I exited the stage a bit wobbly, left the hungry audience in the

capable hands of my staff, and retired to my hotel room. That's my last memory of that day. Apparently, a lot transpired as the evening wore on, though I cannot account for anything following my talk. The next morning, my CEO surprised me with the head of Human Resources and paid me the first of my "intervention/ultimatum" visits. He insisted I had a problem which needed to be addressed, and with gentleness and compassion, he offered me pretty much carte blanche -- the full resources of the company and total flexibility in where/how I received treatment, my position would be held for my triumphant return. Instead of gratitude, I rewarded his grace by immediately finding and accepting an outside position (within hours of his ultimatum) and presented him with a very healthy separation agreement in exchange for agreeing not to compete against him. We parted company the following week.

Bonkers, right? I often felt guilty about my ungracious refusal of his unprecedented kindness. Years later, sober, I managed to summon the courage to tell him so. I was a counter-culture leader in that organization – a blonde, young, brazenly candid woman with a wispy English Literature degree commanding over a billion dollars in revenue and the fierce loyalty of my staff and clients. In a company

run for the previous century by middle-aged white men carved from a certain type of finance MBA marble, I stood out *without* the drinking problem. I assessed his ‘offer’ and instantly concluded that my creative brand of leadership wouldn’t survive the reality of a very public trip to rehab, and it would erode my ability to be effective in the future for him. I was barely welcome without a public blot on my copy book – I had no illusions about returning, triumphantly or otherwise, after a trip to rehab. I believed I was doing him a kindness by refusing his rock-or-hard-place offer. Today, I don’t feel guilty, as in addition to further diminishing my reputation, I am certain any treatment path I embarked on then would only have been my first of many failed attempts.

For the next fifteen years or so, I climbed another 7 rungs on the career ladder. My mostly suicidal drinking was punctuated by many trips to the ER, two comas, a psych hold, and a couple of failed attempts at suicide. They were sincere efforts, but I was too drunk to pull it off. There were also periods of long sobriety – once nearly three years when my kids were in their mid-teens – but there was no relief from my indescribable, undiagnosable, all-consuming pain. Through it all, with few exceptions, I was able to

continue to lead, deliver results, and generally presented management with a conundrum of epic proportion.

I never actually lost a job, which is just semantics, because I never really left one voluntarily again. Until I finally set the bottle aside for good in 2020, I always ensured that there was a job waiting in the wings for me “elsewhere”; I bounced from one terrific job to another, each with greater responsibility, economic reward, and an inexplicably loyal staff in tow.

I was technically fired once, lol, for getting sober. That company fired me on the very day that I returned from rehab. It was a busy, promising start-up that was poised to dramatically enhance the way the world accessed healthcare. I had taken to living in a hotel near the office during the week, working the required 80 or 90 hours without the increasingly watchful eye of my spouse, and commuting home to my family on the weekend. I often called down to the front desk to “refresh the mini bar” having emptied it by dinnertime. In the middle of an April night, I was awakened in my sad, lonely hotel suite by a commercial for “Passages Malibu: a Cure for Alcoholism”. I called the number flashing on the screen, and commenced some

rapid, inspired research the next morning. Their founder soundly rejected the disease model (which was beginning to make a lot of sense to me, too) and believed that at the root of all addiction is simply another condition – unresolved trauma – and that if the underlying condition could be sourced and exorcised, the self-destructive coping mechanism would be rendered moot. He'd created the company to cure his son's addiction to cocaine, and they had seemingly impressive statistics. He'd written a best seller called *The Cure*. I held a bed that night for two weeks hence, feeling the first authentic hope I'd felt in years. The Program Director cautioned that it was unwise to wait and that they could admit me immediately; I countered that he couldn't possibly understand how useful the two weeks would be to my company and team, and that I'd waited a long time to get well – two more weeks of survival didn't scare me.

After I powered through the two-week self-imposed 'transition' preparation, I returned to the hotel and got so drunk that my assistant had to come and pack my things for my months on the opposite coast, sober me up enough for boarding, and literally check me into my departure flight. My BAC reading when I checked into the rehab later that day, my birthday, was .385 (this is neither a typo

nor a personal best), and I was conscious, lucid, and “sobered up” sufficiently to commence my treatment the following day.

Emboldened by the kernel of an idea -- maybe I didn’t even have a sad, incurable disease -- I summoned the courage, gulped hard, and sat down with my boss, the CEO, to notify him that a) I believed I had a drinking problem, and b) that I needed help. They were magnanimous and allowed me to execute my transition plan over the next two weeks – I was lulled into the false sense that they really understood, valued me, and appreciated that my attention to this issue was also to their benefit. While I told my trusted employees the truth, the CEO continued to refer to my upcoming elective “procedure” as if I were having surgery for carpal tunnel syndrome. It should have been a cautionary flag, but I continued working for them throughout treatment – my California-based staff even visited me several times at the treatment center (ostensibly offering support and decent Chinese take-out, but really looking for guidance in my absence).

When I returned to the office, two months hence on the agreed upon date, hopped up on The Cure, I discovered that my key card had been disabled at security. When the

guards called up to our offices, the receptionist seemed not to recognize my name (I was their Chief Sales Officer and had been publicly at rehab for two months – it's a safe bet that everyone in the complex knew my name). After being ushered into the public waiting room, I was informed by my boss that "You look wonderful, and we're so pleased you got treatment, but, while you were out, we've made some changes, and we think it's best to part company at this time". I asked if by "while I was out" he meant, "over the weekend", as I hadn't been "out" at all. In addition to getting treatment for my medical condition, I had been working for them continuously throughout my 'rehab relocation'.

The court helped them to see their legal miscalculation and I was eventually reinstated to my position, after months of sitting on the sidelines, fielding insulting fictions from their attorneys. All I wanted was to be returned to my position, sober, which was my legal right. The law was on my side, but to this day, I understand their desire to cut me loose – my vulnerability, admitting a personal problem and asking for help, had rendered me defective in their eyes. The surprised look in those same eyes when I did return sustains me through some dark moments. I remained at my post, endured the awkward whispers

and back-channeling with as much grace and class as I could muster, until an opportunity presented “elsewhere”, and I was able to resign on my own terms.

The laws that govern addicts and the workplace aren’t arbitrary, but man are they tricky to wade through on both sides of the aisle. The uneven foundation was poured when the AMA anointed alcoholism as a (faux) disease in 1957. HR policy has had to flex and bend a lot since then; this supposed disease, which affects some 30 million of us, became a protected disability under the Americans with Disabilities Act (1990), and the subsequent passage of HiPPA (1996), The Mental Health Parity Act (1996), and the subsequent Mental Health and Addiction Equity Act (2008) all make it incredibly complex, and expensive, for employers and the drunks on their payroll. We have hiring, workplace accommodation, and firing protections which are confusing to administer and require constant, precedent-setting, coloring outside of the lines. You cannot refuse to hire someone because of a history of alcoholism, and you cannot fire someone for being an alcoholic *per se*, for requesting treatment for alcoholism and the time away to receive it – and you will likely have to provide

accommodations when you welcome them back to the fold.

I am grateful that I had protection under the misguided laws – but only because despite being an active drunk, I was a great leader and was delivering, even during my trip to treatment, the same essential leadership they enjoyed before I dropped the veil and asked for help. But the irony is, the only way to attach to those protections -- in the status quo – is to admit you have a disease that isn’t a disease and agree to treatment that doesn’t provide a cure. The confusing disingenuous conversation you are having with your spouse, parents? It plays out nearly identically in the workplace. No one believes it’s a disease – largely due to the fact that, it isn’t. Everyone knows your drinking is ushering in consequences and risk that are untenable. The only thing to do seems to be to put your shoulder, resignedly at first, more easily with practice, to the wheel and start the long slow death march in the circle to nowhere. Or, in my case, to elsewhere.

My six trips to rehab were spread over five employers between 2008 and 2020. Fun fact: there seems to be consensus that your legal protections actually increase in the wake of failed treatment – so, one unlucky employer

was treated to two long, awkward bouts at rehab. Relapse has become its own weird form of protection: the alcoholic surrendering to the only available construct, inwardly shrugging, “well, I have this incurable, chronic, disability; what else can you expect?” while the employer, the friends and families stand helpless against their own warped words, “you have an incurable, chronic disability; what else can we expect?”

All my other employers were technically supportive, but as I continued to relapse after treatment, my symptoms unabating, my own hope index plummeted. I knew something was very, very wrong. I knew that alcohol made it nearly bearable, though not quite, with its own consequences in tow.

I went along with it all primarily to keep my job, my marriage, my family or to preserve enough protection for my supposed “disability” to give me time to identify my next unsuspecting lily pad.

I never wanted to leave any of my posts, even after my own behavior should have made it too embarrassing to greet my colleague’s eyes. I once kept a job six months past the shrieking alarm bells, in large part because the CFO of that company seemed incapable

of calling a taxicab. The fact that his DUIs had become a frequent entry on the local police blotter in our worldwide headquarters, with seeming professional immunity, made it more difficult for them to deal with my shenanigans (which didn't involve the law or the national newswires). I don't think that's what AA means when they describe "one alcoholic helping another", but for a time, it was just that.

Why did these companies – some with only startup skeleton crews, others with more attorneys than a national law firm, all universally driven by hard-charging CEOs -- why did these companies keep me, not just on the books, but in the board room, on the dais, on the factory floor? How could they keep an often-drunk leader, giving me leverage and exposure – public and private – making me responsible for tens of thousands of employees, hundreds of high-profile clients, and millions of consumers? It's not because I'm particularly charming or brilliant or especially expert in any one area.

I have a single superpower – I have the uncanny ability to see the extraordinary in YOU. This singular talent has made me a kingmaker, a fierce advocate for my own staff, a jealous protector of my clients and their

constituents, but also their personal professional ambitions. Once I have visualized your greatness, I can architect and develop a career path designed to help you reach the very top of your game, nearly always surpassing me in the process. It's made me popular as an employee, a peer, a boss. I see your highest level of aspiration and help you reach it as if it were my own. I am generous with credit, selfish with blame.

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Sober, I can afford to be objective, or objective-ish, about my first ten employers. Half of them dealt with me as a drunk, long before anyone ever said the word "alcoholic" aloud. I am sorry; you tried your best, as did I. The other half took me on as a begrudging alcoholic, in a cycle of continuously failing treatment. I am sorry to you as well, as the laws and policies that choreographed our dance formed a cyclical riptide, dragging us all down. No matter where you were in the lineup, we had many triumphs and tragedies, none of them small.

We disappoint our employers in the much same way we disappoint our families. Rich with personal tales of betrayal, anguish, broken hearts, fractured families, "the rooms" echo with shock jock tales from the dark side

of our professions as well -- from minor flags like missed flights and meetings, to DUIs in the company car, embezzlement, theft, fraud, negligence, injuries -- they are all met with the hollow, knowing laughter of the formerly-damned -- as a collective, we are shockproof. One sponsor, on hearing my alcohol-related statistics, said, "wow. I think you should continue going to AA until you hear a story that is actually worse than yours." I'm still going, and, lol, still waiting. But it isn't a contest I want to win.

We are conspicuous in our secrets. My drunken work episodes were so public, wacky, terrible, under the hot spotlight, often recorded for posterity. While I am the least reliable historian of those waking nightmares, my colleagues experienced my inexplicable, inappropriate, crushing behavior with vivid clarity. And because my own employees and clients became my family in a very real sense, they suffered the disappointments on both a personal and professional level. I didn't share the unspeakable pain behind my drinking -- I had yet to connect the dots myself. If you were frustrated, confused, confounded by my drinking, let yourself off the hook, please, as I have had to. I too was befuddled. Where I received grace and mercy, I thank you; your instincts were a credit to your character.

Sadly, it was my final job in corporate America that was the real heartbreaker. I still find myself caught up in a daily emotional and intellectual post-mortem. I had been permanently sober for quite a while when I accepted that post. What occurred there seems unimaginable, even years later. Here is the 'short' version of the sober cautionary tale:

I received a call from a former colleague. We'd worked together, as peers, during a long, difficult turn-around some fifteen years prior. The kind of trench warfare that creates deep foxhole bonds -- I learned on reflection that I romanced our previous tenure. She was bubbling over with excitement about her new post, and she needed a strong commercial leader to bolster her new team. I had recently turned out the lights on my prior post, sober, steady and stable in the end. I was ready for a new challenge, and when she called with this huge opportunity, it seemed tailor-made. I could hardly believe our mutual good fortune. God was surely smiling on us both.

She inherited a brilliant product lead and a strong, growth-focused CFO; she'd already recruited an operations leader I'd admired from that same turn-around where we'd

worked together. The new firm was consumer-focused genetic testing and counseling company, founded by the founder of one of a large, successful genetics labs. He and his son were at the helm, and from all accounts and my evaluation, possessed a level of integrity and vision that was both rare and admirable among healthcare startups. They had a mission to bring critical, usable genetic information to patients, and I was inspired by their passion. They'd acquired a tiny, flailing competitor, getting a troubled sales and marketing team in the bargain. They already knew they had serious problems on that side of the house –which was music to my ears since those are my favorite problems to solve.

I embarked on my own due diligence about the model, the service, the board, and, of course, the CEO who would be my hiring manager, not my peer as she'd been fifteen years prior. I was no longer interested in the #1 job, her job. While I had been successful in the GM/President positions in the past, now that I was sober, and had meaningful healing from my own traumas, my soul craved the luxury of focusing on a narrower space where most of the responsibilities were completely in my sweet spot. It seemed I would be in the

enviable position to both do what I loved and support an old friend in her own career goals.

Prior to finalizing my offer, I found the courage to remind the CEO that (she might recall) I had struggled with alcohol when we had first worked together. I informed her that I'd been sober for some time, and other than a daily recovery meeting, I was finally free of its claim on my time and soul. Her response was enthusiastic, if a bit condescending. 'I didn't remember that...but I'm so proud of you!' In sobriety, I've become adept at recognizing this brand of faux, forced empathy. I also highly doubted her failure to recall, since my departure had been abrupt and the topic of a considerable, if brief, period of industry-wide scandal and gossip. No matter, I felt that I'd disclosed it, and since I was no longer suffering, that was the end of it.

There aren't any lemon laws in at-will employment, more's the pity. No consumer protections exist to keep you from buying into a story; nowhere to look but the mirror when your choices are misguided, or misled. To say that things weren't really 'as advertised' is an understatement. There were all the problems I expected to find – value proposition, price, distribution, talent – the fact that they were given a light touch in the hiring

process wasn't surprising. There were other problems I spotted almost immediately – technology, delivery, customer service, clinical partnerships – but I had peers I respected in those areas. The other problems – when I realized this game of bridge wasn't being played strictly according to Hoyle – were troubling, but they were all under my purview. As each new alarm bell pealed, I took it in stride. This is why they had hired me, after all, and why I had immediately brought some of my best and brightest to join us.

What was so strange is this: the problems they hired me to solve, I immediately set about solving. With every ounce of the social capital, I possessed (and cognizant that after my divorce settlement, most of my remaining capital was of the purely social/professional variety), I breathed first life into their as yet unrecognized brand. I supplemented the existing team with key leaders in sales, distribution and marketing, nearly overnight – my first hire was within days of my own arrival. As a drunk for much of the prior 22 years, I found that I still held bizarrely considerable sway and have a handful of people I can confidently call whether I'm leading a healthcare organization or opening a sidewalk cafe — people whose careers I have protected, treasured, nurtured that trust me

intimately, and I them. I led adjustments to the model, the marketing, the pricing, our sales story, sales focus, sales compensation, marketing, distribution channel strategy. I was pulling rabbits out of the hat daily, opening doors that had been previously closed to them.

I was particularly proud to have secured a critical consulting relationship for the firm, making room for us (read: strong arming) as a client on the very crowded plate of one of the most influential leaders in the entire benefits space. This gentleman had been my trusted client, advisor, and friend for over 20 years and holds tremendous sway in our space. Having run benefits at one of the country's largest and highest performing conglomerates, he "retired" by becoming the President of the most powerful trade association in the space, and ultimately opened his own firm as a consultant to both the employer marketplace and promising disrupters like my new firm. It was one of many minor coups we fashioned in my short tenure; I developed a full-scale market attack that included wedging us into places on the national conference stage and consultant-controlled markets where they were previously shut out. In short, in my first few months on

the job, I set about putting this firm on the map.

I encountered huge challenges and set about overcoming them. I dealt with their under-disclosed talent and infrastructure issues with sensitivity and transparency, and unflinching rigor. I collaborated with my counterparts around the clock to close our product and operations gaps — as they collaborated with my team to create sales momentum. I was internally present and prominent, leading our market entry firmly, but gently, in the right direction. I was crazy busy — working the kind of insane hours I love — and I was pulling out all the stops for them.

It was the only company I had worked for where alcohol hadn't clouded the work. Ironically, on my first tour of my new home office, their Chief Technology Officer seemed disappointed that I wasn't more impressed by the keg, permanently tapped and flowing, that stood like a gleaming altar in their employee cafeteria. This wasn't my first start-up; I'd already lived this 'work hard/play harder' dynamic five previous times. But this time, I was sober.

I'm not afraid of alcohol in the workplace, or anyplace. As long as I wasn't expected to anchor the senior team in a chug contest, it

was amusing. And we had a lot of employees who had only recently graduated from college — working unGodly hours — I saw the appeal of the Silicon Valley affectation in our hiring. I'm all for a celebratory culture.

We were making huge progress in the sales and marketing, The entire organization was focused on the huge-but-attainable goal I'd laid out, and I was confident that with sufficient attention, our capabilities would rise to meet the market demand. But there was one insidious challenge that I failed to spot: discrimination, in the purest sense. A nasty black thread of discrimination, backroom dealings, sabotage and subterfuge was taking place that I was only able to see in hindsight.

The CHRO openly despised me from the outset, which was a weird and unwelcome realization on my first day, especially since we'd had a terrific video interview before I'd accepted the offer. In fact, in addition to the CEO, CHRO, Chairman and his son, I also interviewed with all of my peers (CFO, COO, Head of Product) as well as one of my subordinates, the head of sales from the previous acquisition. The CHRO had rubber-stamped the CEO's endorsement, and as far as I was aware, there were no hold outs among those who'd interviewed me. But far

from welcoming me, the CHRO began to exhibit hostility towards me at our very first leadership dinner, just about the time I said to the waiter, ‘No wine for me, thank you,’, then, meeting the curious gaze of one of my colleagues, ‘I don’t drink anymore, I’m a recovering alcoholic.’ The look on the CHROs face from the end of the table was fleeting, but unmistakable. Disgust. Followed by head-bent whispering to our mutual boss, the CEO. The next morning, in our executive retreat, she began to debate with unflinching passion and an increasingly nasty edge, every opinion or inquiry I raised.

We had big grown-up problems at that firm. In fairness, many of them came from the shady dealings and practices resident at the company they’d purchased. I’ve lived this dynamic many times – all acquisitions have pros and cons, and I was on high alert for any lingering missteps that could impact our nascent reputation.

Following a particularly difficult termination -- a man I’d been instructed to fire, then “wait! Don’t fire, coach”, and once again “Fire, now!” -- it was revealed to me that he’d already been on a previous performance improvement plan for the exact issues I was now encountering. Apparently, this gentleman

threatened a hostile work environment claim after I terminated his employment, citing that he was uncomfortable with my open admission that I was in recovery.

It's true, I did share my recovery with my entire staff, always – for no other reason than that their roles involved a lot of business entertainment (some of it rather like a fraternity party at a large state University); so I always tell anyone who works for me, lest they find themselves inadvertently pushing alcohol toward me in an external setting, where I would prefer not to have to mention it. The CHRO told me, "You should be careful who you tell you're an alcoholic, Noël. You never know what they may be thinking." Prolific, prophetic; her comment left no doubt about what she was thinking.

Lean in and pause on this for a moment. This woman, with three decades of human resources experience, was responsible for our overall workplace culture, our adherence to our own company core values, and the law, as it related to employee conduct. Even more, she was to carry the banner of our culture in spirit, infusing our Chairman-Founder's high ideals in our workplace attitudes. "*Be careful who you tell you are XXX*". Try completing that sentence with a different condition. Be careful

who you tell you have Multiple Sclerosis? Be careful who you tell you wear a hearing aid? Be careful who you tell you have diabetes? Cancer? Lupus? My response in front of our boss, was, “Actually, I’m quite sure that *you* just created a hostile work environment for me.” It was a bit of a quip, but it proved prophetic.

In the months that followed, the CHRO continued to object to me on principle, in person, or wherever the opportunity presented itself, even meeting secretly with my subordinates -- trying to trap my own recruits into bad-mouthing me, misrepresenting their comments, blocking personnel actions, and just generally working against me at every juncture.

It may be hard to imagine the type of mutual loyalty that exists between me and the talent I recruited — they had all worked with me previously, as a drunk; now that I was capable of being fully focused on their success, they were even more fierce. These were seasoned pros with their pick of employers, yet with a single phone call and the right message, they would still drop everything and come and dream a new dream with me.

Sober, that foundational loyalty was bedrock. I appealed to our boss, repeatedly and directly, to address the CHRO’s blatant, targeted

behavior, but importantly, I refused to return serve and make it personal. I pointed out that her actions were counter-productive to the business, her behavior was causing unnecessary drama among our employees, and we had a lot of work ahead of us as a team. In short, we needed to row together.

Our sales and marketing momentum was increasing at roughly the same rate our operational and product weaknesses were materializing. I expressed the concerns collaboratively, but pointedly, as my team had their own reputations directly on the line, and I wanted to protect the entire firm from unnecessary, preventable risks and negative exposure.

The CEO was under tremendous pressure to raise capital and she and the board were very focused on a new infusion of cash. Rather than take a forthright appraisal to the investors and board, the CEO turned up the private internal pressure for results to materialize faster than the actual market cycle would allow. It should have been a shrill alarm, but I chalked it up the typical tension between the sales and operations in all early-stage organizations, and persevered. I wasn't directly in the rooms where she was overcommitting – she started bizarrely

excluding me from internal meetings that were my areas of responsibility.

Had I been called upon to affirm her accelerated optimism, I could have found a thoughtful way to show that the eventual outcome she was promising investors would be the same, the result, the revenue, all but the timing. I would have gladly explained to investors why we needed to remain steady in our cadence, continue to nurture the marketplace, and been privately glad that none of the Fortune 100 giants who were actively considering our solution were far enough along to demand closer inspection of our capabilities. We needed just the amount of time we had, still a lot of hard work was ahead of us, but that all was proceeding as anticipated, planned for. I never had the chance.

I tried to neutralize the CHRO's hostility directly (since our boss was focused elsewhere and had routinely ignored my direct appeals) by becoming overly, creatively inclusive. Can you imagine how bizarre it is to invite the head of HR to your pricing meetings or sales collateral development meetings – stupidly, I thought if I could get her directly involved with how I was leading the team, she would get beside me, if not behind me, with her support.

I even leveraged my relationship with the president of the national trade association whose annual conference was poised to host our public debut to score the woman a coveted invitation, as our company was still too small for her to earn a ticket. I am still stunned by my naivety — I even left one of my more junior sales execs home to make room for my attacker in a setting where she had no real role and offered no value.

No dice. The more I opened the door to her perilous presence, the more she kicked it down with targeted sabotage -- malicious back-room dealings, untrue rumors and fearmongering. She berated and attacked me at leadership meetings, once reducing me to my (first-ever, in 32 years) tears in the workplace during a leadership retreat on the power of “Vulnerability in Leadership”. Oh, the irony.

Perhaps the CEO’s own ample insecurities led her to continue to needlessly overpromise to stakeholders – the board, the leadership team, would-be investors -- despite of the chorus of caution from her staff. I don’t have the over-promise-under-deliver gene, so I can’t hazard a guess. My career was built on setting stretch goals for organizations, and

helping brilliant people outperform them. The CEO began isolating communications -- triangulation instead of openness -- hiding meetings under misnomers on the calendar, embarking on a sort of internal and external misalliance and spycraft, where she became omnipresent while diminishing her own effectiveness.

I took my first meaningful vacation from the company in May, following an overwhelmingly positive outcome at our national debut. Our presence at that critically important conference, the press event we held, the Chairman's talk I had personally brokered, were all compelling; we had arrived.

While I was attending my daughter's college graduation in Ohio, I saw a positive personal performance evaluation pop into my inbox, which was a nice surprise, but rather odd, given a) she and I spoke daily – neither of us needed a formal process to ensure feedback, and b) I hadn't been there long enough to expect a raise, and I expected to be compensated handsomely only when the results materialized, as was always my standard. On my last day away from the office, I attempted to reach my boss on a time-sensitive matter, but to no avail. We shared an administrative assistant, a lovely woman

who was placed in the difficult position of informing me the CEO needed to meet with me at first light on my return but that she had no idea what the agenda was.

If you've ever been part of an organization in turmoil, you know that an unexpected mandatory meeting with your boss, top of the morning, no agenda forthcoming, is usually not to announce your promotion. I logged into our one-on-one but found the CHRO waiting for me, instead of our boss. Whether merely tacky or Machiavellian, our boss chose to be late to what was now an eerie threesome. I waited without offering any customary small talk; this no longer appeared to be the sort of meeting where pleasantries would be exchanged. When our CEO finally joined us, she instructed the CHRO to read aloud a strange and sloppily written letter describing vague but serious deficits in my professional demeanor which needed to be addressed, which could only be accomplished by completely stripping me of all of the core responsibilities of my job. Admonishing me not to discuss this action, the proposed changes, or this the letter with anyone else, I was told they were confident I could individually achieve the company's goals. The letter outlined a set of requirements and restrictions in which I personally would be

responsible for securing the firm's entire sales result. From here, I was instructed to run any internal communications through the CEO alone, having no other direct contact internally other than these two.

I asked them for a copy of the letter and told them I would need some time to reflect on this unexpected and unprovoked action. More than the dangling participles and other grammatical misdemeanors, it still irks me that my name was also misspelled in the letter. In the end, this pair of women -- one whom I'd mistaken for a collaborative leader just slightly in over her head, and one I'd mistaken for a seasoned human resource professional with the minimally required virtues for the post-- led to my resignation, under duress, just shy of my one-year mark at my dream job.

As near as I could tell, based on these new foreign circumstances and admonishments, the defects in my demeanor were an unwillingness to overcommit to our stakeholders, and internally leading with the transparency about the concerns in our product, while cheerfully outselling the supply chain. Oh, and admitting that I was a recovered alcoholic. I had fallen down the looking glass.

I never heard from that high integrity, visionary founder, or his remarkable son, both of whom impressed me greatly. Their silence in the wake of such blatant mistreatment of one of their executives bewilders me still. Perhaps they were also admonished not to speak to me. Interestingly, there was concern in the genetic testing industry about insidious organizations and the potential for genetic data to be used against people, sold without our permission, used for purposes that are other than straightforward. But I had been their champion in the market, vocally holding them out as the white knights of the genetics industry, defending their steadfast protections of consumer privacy, their earnest mission to get meaningful useful genetic information in the hands of patients and their doctors. Yet, one of the restrictions they verbalized in that strange meeting was a warning against 'spreading rumors about the founder's intentions to misuse genetic data'.

Eventually, I had no recourse but to resign. They issued an edict to employees admonishing contact with me. Imagine how insulting and isolating that last bit was. I had been there less than a year, brought and was bringing my best and brightest people, and was engineering everything to hit an aggressive company-wide goal. I did hear

that the CHRO was let go not long after I left, and predictably, the overpromising/underdelivering CEO had also run her course. Alas, all too late for me, or the company, or the outstanding people I had hired and joined. “Be careful, Noël”. Yes, thank you. Trust me, in the future, I will.

Staggering under the weight of resigning from this dream-turned-nightmare job, and reeling from the inhumane, targeted treatment, I set out to conduct an eyes-wide-open retrospective, a post-mortem of sorts. I didn’t want to further destabilize the talent I had brought to that firm, so instead, I started at the very beginning of my career. I spent months interviewing former employees, former bosses, colleagues, recruiters, clients, consultants -- partners spanning my entire career – from the ugly drunken cycles all the way through this last crushing post. I left no stone unturned. I was on a mission to understand how, sober, with diligence and thoughtfulness, I could have gotten this so very wrong. Surely there was something wrong with my “picker” (I had drafted a manuscript entitled **Seventeen Horrible First Dates on the Road to Sayulita** about the early years after my divorce -- I had picked up some real-life experience with a wonky picker).

Could it be that somehow alcohol had made me a success of the variety that couldn't be achieved, exceeded, sober? It was confusing and demoralizing.

I held over fifty calls and meetings with colleagues from the past, but one former employee I saved for last. A brilliant woman, who (like so many I have had the good fortune to recruit and lead) is now the CEO of her own thriving firm -- I had been lucky enough to snag her on her way up -- put it this way, 'Drunk Noël had a huge advantage. Although you were often unable to account for your own actions, your drinking required you to see around blind corners for potential attackers, subterfuge and insincerity. You could see trouble coming a mile away -- not just the problems you were creating for yourself -- **all** the problems, too, because you *had* to. You had to develop a superhuman nose for the rotten and decaying -- this weird, warped, but accurate, antenna for trouble. You had a bizarre intuition. But,' she paused, 'Sober Noël? She has no time for spotting bad behavior or malice -- she believes that, like her, everyone is getting out of bed with purpose, integrity, respect, fully intending to do the right thing. Most aren't, Noël, but you find it harder to spot now while you are looking for the

goodness, the promise you can help realize. Sober Noël might not be cut out for this shit. You may have to go do your own thing, because your peerless virtues aren't going to help you spot the lurking corporate evils. And now, you will have to sit out for a while, because you used your own brand to lift their profile, and then the needle went off the record. You let them way overplay your hand. In short, you're screwed. My advice is: Go dream a different dream and try to find an escape route for the folks you recruited to that disaster.'

I was resistant to her summation (mostly because it makes it sound as if Sober Noël and Drunk Noël are two entirely different people) but elements of truth of have haunted me in the ensuing years. When I met Darren, I was drawn to so much of his life philosophy; but I don't think he'd mind my saying that generally, he is much slower to trust people than I am. He used to say, "Expect nothing, and anything you get is a bonus." I really push against that way of thinking. I prefer to expect the very best – that which my superpower reveals – because when people do rise to their highest selves, the feeling of delight is so sustaining that it always eclipses the disappointments when people fall short.

That same powerful consultant I'd engaged on their behalf quietly sunset his relationship and drew much the same uncomfortable conclusion for me. Remember he'd worked closely with me for the last twenty years, drunk and sober, always as my client, advisor, marketplace bellwether and mentor. 'Let the dust settle. Let the shock of your abrupt, inexplicable departure after hailing the company's virtues on high just dissipate. Wait it out.'

Even as I write this, I have been waiting for the dust to settle for some years. I need to earn, so I am still interviewing for leadership roles that might bridge me to retirement more easily than launching our own company probably will. But I find it difficult to summon the required confidence with prospective employers. I'm a woman of a certain age, at the top of my earning scale, with a well-known (however distant) history of workplace alcoholism, and a multi-year break in my corporate earnings trajectory, who spent the last two years isolated from her own rolodex. Should I disclose my drinking history or conceal it? What is the right response about why I left my last employer? That CHRO's caustic warning, "Be careful who you tell you are an alcoholic, Noël," still rings in my

ears. Be careful indeed. It's certainly difficult to know who to trust, where to be forthcoming, where to stay silent.

Living unspoken truths dims my superpower. When I am not authentic and forthright, I am just *less me*. Which makes it much harder for me to help you realize the greatness in you. It's hard to command and control a job interview cycle, let alone reenter the coliseum with confidence. I won't ever risk my own health, sanity and sobriety for failure to spot a toxic, discriminatory, fear-mongering environment. So, I'm cautious, which makes me slower to spot the truth in you. And likely, I'm a lot less appealing than the brazen, blonde, blasphemous Benefits Barbie of my early career.

Don't waste too much sympathy on me; I've survived a lot worse, and I will emerge stronger from this as well. At first, it was a lot to take – this loss of faith in humanity while sober. My therapist saw more of me than she'd like. But I'd rather see you convert your disbelief and outrage to a mirror within your own organization, with your colleagues, employees, and leaders. As we will in ours.

I'm sober. Which makes me a cheap date at almost any price. Drunk, I was a mixed

bag – a lot of success, but a whole lot of risk. Sober, I concede that I am kind of an exceptional package. So, as we embark on building the company of our dreams, our values are fixed and immutable. They are values of action: authenticity, transparency, curiosity, honesty. We recruit diversity of thought and experience, background and perspective, rather than other contemporary markers that ultimately don't reflect diversity at all. Whether you are our client, or our employee, we will be jealous advocates and supportive guardians, ensuring that no similar fate befalls you. We will protect you from the malice and the misinformation and the missteps. We will help you find the shortcut I didn't see. And, together, we will change everything.

## **Client Zero: Life is an n=1.**

In December of 2023, we became reacquainted with old friends from my childhood. This couple (the woman was my sister's best friend growing up, and her husband) had just launched a revolutionary real estate brand – communities united by fierce American patriotism and old-fashioned family values – that was attracting some national media attention, much of it negative (sensational, soundbites, heavy with controversial innuendo, like: “*Is it legal* to require residents in your subdivision to fly the American flag? One couple in North Carolina is launching communities that do just that... join us at 7 o’clock for an insider’s look ... “, etc. Bemused by the “haters” (we recognized that when we launched Kaleidoscope, we would surely attract a few of our own), and eager to learn, we set up a call to congratulate them on their launch and hear more about their plans. We couldn’t have predicted how that casually inspired conversation might change all our lives forever.

We caught up on friends, family news, and their vision for their exciting, young company. Shyly, we shared ‘The Little Book’ to give them a flavor of what we’d been up to. It was only then revealed how consumed with fear

and worry they were for her younger brother, Bill – who, unbeknownst to me, had spent the previous 20 years acting out his own struggle, with alcohol as his trusty costar. Professional and personal wreckage littered their story, and my heart ached for all of them -- this sweet little boy, now very much a man, seemed to be pointed towards the miserable destination I knew too well. His family, with all the resources you could imagine, had run out of ideas. Blessedly, it was long before they ran out faith and love.

Immediately, our engines started to fire, wheels turning, gears shifting. Logic should have dictated caution – we were at the very beginning of even articulating our own vision for a radical approach to addressing alcoholism—we hadn’t even developed our own business plan; The Little Book was hardly a complete manifesto. After we hung up, Darren and I had a long conversation about where we were in our own process, and that we had no right to think we could help Billy, or anyone, yet. We weren’t nearly ready for a client, not by half. But as we kept coming back to their story – the danger signs were so clear, ominous, prophetic. We decided that no excuse, least of all our own unreadiness, could stand in the way of potentially helping this man, this sweet little boy of my youth.

We set our own process aside, and sort of inverted our brainstorming: What would happen if we simply took our hypothesis/research/experience and proposed our vision, unvarnished by future would-be investor feedback, to my old friend? Surely, the worst case was he would know he was a tiny bit less alone in the world. We didn't dare articulate our hopes for a best case, even to each other.

It took two months for Bill to call us. I had a sense of mounting worry, a low-grade buzz, waiting for the phone to finally ring. When he finally did call, he was pretty drunk. He seemed mildly comforted by our thoughts about recovery, even more so, by the lowlight reel of my own experiences with alcohol, which probably 'normalized' his own dramas a bit, and allowed him the space to reconnect with me, without too much paralyzing shame. But, in his eyes and voice were the unmistakable signs of hopelessness, confusion and pain I recognized as if it were my own. Bill was sure we couldn't help him. We knew differently. At least, we hoped we did. Professionally, I love a turnaround; personally, I gravitate to the underdog. Darren, a lifelong defender of the down-trodden, shared my resolve.

That day, we embarked on a journey that put our theories immediately and permanently under the hot lights. First, we rallied the troops – his family, his doctors, his therapist, his friends, always with him. We explored and exposed every failure point in the many previous attempts he'd made to quit drinking – like me, Bill had seemingly tried it all. We came to understand his preferences, his own perspective, and his inner pain. By late April, everyone in his life was fueled with fresh hope for his recovery. Except Bill. Bill was still mostly drunk.

We all waited impatiently for him to become ready. It would be ridiculous to conclude that we had embarked on a perfect plan, or even an adequate one. We adjusted hourly as Bill's journey had many twists and turns --the up-on-two-wheels-scraping-the-guardrail kind of turns --before he really reached for us and allowed us to help him find his own way. As achingly frustrating as the speedbumps and hiccups were, we already knew that "fail fast" meant we would have to get comfortable with not only failing period, but with *mostly* failing. So, we stumbled, prayed, rose and fell and rose again, together, a team.

On January 1 of this year, several months

working with Bill as our Client Zero – months of trial and anguishing error preceding the first glimmer of miracles -- Bill summed up the transformation in his life in his own words, giving us permission to share:

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Picture a team of doctors and nurses frantically covering my body with band-aids while I bleed to death internally. That was how my struggle, and treatment went for 20 years, until Noël stepped in.

I should be dead. At least 5 times over. Instead of just surviving, I am **really** living for the first time in my half century life! Not just sober, but happy, a critical distinction that the industry doesn't track, or seemingly care to know. I wonder about this a lot: are the 15 percent who remain sober truly happy? How many are "white knuckling" it through sober misery, attending meetings for decades while fighting temptation daily? Those are considered the lucky few "success stories". No one is even asking the question, until now. If the choices are drunk and miserable, sober and miserable, or sober and full of joy, I think you know the right choice. And, yes, it is a choice. I am living the miracle of that choice and feel compelled to share it.

I write this testimonial for so many reasons. For myself, yes. That's where it *must* begin (the 'industry' gets this wrong as well – external motivators are no match for this foe). But I am also writing to and for my children, my ex-wife, my mom, my sister, and all of those in my life who have witnessed my transformation; they held onto a deep faith in me, and the belief that I deserved this, even when none of them knew how to help. We all deserve this. It shouldn't have been this hard.

I reached a point that I could not live without alcohol. There were no sober days. Alcohol was the most constant presence in my life. Then the bigger problem materialized -- I couldn't

live *with* it, either. This was the real force to be reckoned with; I was trapped in Hell. Every move seemed lose-lose, and my worst fears were steadily confirmed by my emerging reality. Doctors, therapists, psychiatrists, and other professionals, along with friends and family members, all with good intentions but strong opinions, only made it worse. For decades I was told how powerless I am, that I had a debilitating, progressive, incurable “disease” (a confusing disease where the patient is punished and blamed, while being told “it’s not your fault”). I took it on the chin daily; the fallout from the prior day or evening easily ignited pre-existing feelings of shame, regret and guilt. The fresh daily shaming wasn’t enough, so it was punctuated by countless well-intended, but misguided interventions. Each of these experiences ate away at the draining hope inside me, until it was gone. I felt paralyzed. Looking back, being told that I was powerless may have been the most destructive advice anyone could have given me, and there was no shortage of that kind of BS. Bad counsel is plentiful in the “relapse is part of recovery” treatment industry. The treatment has no incentive to succeed against an incurable imaginary illness. Looking back with fresh eyes, a clear heart and a cleansed soul, the absurdity of me being “powerless” would almost be funny if it wasn’t so infuriating.

Long before Kaleidoscope, I had tried most of what mainstream treatment offered— my efforts spanned residential rehab, AA, SMART, therapy, psychiatry, ‘cutting-edge’ brain mapping and related treatments, and on and on. My total spend was well into the six-figure range, and it grows even more tragic when I consider the countless wasted hours, months and years. But more than the criminal waste of money and time – while my drinking only worsened -- I bitterly regret the pain my coping mechanism inflicted on my loved ones all those years. I was batting 0 for, what seemed like, infinity. I was out of options and, more troubling, I was out of hope. I repeatedly found new lower “bottom” after bottom. I disappointed my two beautiful children, hurt countless friends, family, and colleagues -- I drove loss after loss. My highlight reel spanned two decades, while the wreckage worsening progressively, so, too, did my suicidal drinking. My coping

mechanism had already cost me a lot – if the behavior continued it would risk what remained, further threatening family, career, health and lifespan. Nothing was outside the risk zone and the circle was widening. With the recovery industry’s ‘help’, I made it hard. Really, really, hard.

My life and entire orbit had become a nightmare. I had run out of options and hope. I was actively engaging in suicidal behavior as my only remaining “choice.” My kids? My ex? My mom? My sister? All of my friends and family who loved me? Each should have its own sufficient and powerful reason to not take my own life. But nothing outside could ever be powerful enough to address the excruciating pain inside, a pain that was obscuring even the infinite love I have for my family. My failures weren’t reflective of my efforts. But, while everyone was focused on my elusive sobriety, no one focused on the intolerable pain. Including me. We were all myopically focused on taking my medicine, the alcohol, away. In fact, a close friend recently shared with me that he, and many of my friends, had been concerned about me for years. He said that none of them wanted to say anything to me because in their eyes I “had my life together better than any of them and who were they to weigh in on my situation.” Wow. If they only knew that what they saw on the outside, as ugly as it was at times, was nothing – *nothing* – compared to what I felt on the inside all the time. While I bled out inside, they stuck Looney Tunes band-aids on my knees and elbows; “relapse is part of recovery.”

The culmination of my hopelessness came last year while at a work retreat in the Caribbean, where I dug deep and found yet another new “rock bottom”. We had just concluded a full day of meetings, and as a new partner at the firm I was the main attraction. The whole event felt like a surreal charade – the standing ovation my talk received, the admiration and praise I received from cold acquaintances masquerading as lifelong friends. It’s as if they all knew me well, a vibe of intimacy, even from those I’d just met. That night, with each accolade my heart sunk deeper and deeper into the darkness of my soul. I thought, if my new law firm partners knew that I was completely dying inside, they might see the absurdity in

the entire event. But they didn't know me and couldn't see it. In fact, it was **my** heart and soul circling the drain and even I didn't fully see it or realize its magnitude. So I slipped away after the final round of meetings to my hotel room with the intent to unwind and regroup. That is not how it all went down.

Back in my room, finally alone, dark memories came rushing back to me. The twisted feelings were like a storm surging through me; an emotional/intellectual spiral pulled me down into my painful divorce, an 8-day coma I shouldn't have survived, numerous hospitalizations and near-death experiences (some by accident and others with sincere intent). Each one of these memories was its own dagger through my heart. An overwhelming flood of shame, failure, hopelessness and **pain** was so much greater than any one horrific memory. I did not realize at the time that the evening would take an even darker turn. Darker than ever before, which is saying something.

That evening quickly devolved into yet another adventure with self-harm. I marched out to the balcony with determination; I loomed 32 floors above the hotel parking lot. I could see beautiful fountains on one side and the Caribbean Sea on the other. The moon lit the sky with abundance, but I couldn't really see it. All I could see in that moment was that fountain, a mere football field of gravity away from where I stood. Now *that* would be a final bottom, once and for all. I mustered the courage to lift a leg over the rail, like a bird on a perch, staring down at my fate, and thought all I had to do was get the courage to lift my other leg over the railing. All the pain, all the suffering -- it would all finally be over, not just for me, but for my family. I believed that they were better off with me dead. I felt certain of it. Perhaps I had finally found potential relief the only way I could! Now for that second leg.....

In a last-ditch effort to stop, I forced myself to concentrate even more on the people I love more than anyone in the world, which got me wondering about my hefty life insurance coverage, the critical safety net to care for my ex-wife and kids after I was gone. 'This method is too obvious', I thought, 'Insurance will never pay.' I sat there for what seemed like

hours, the wind swirling around me as I wobbled on the railing. As the reality of the “financial” mess awaiting my kids hit me, I climbed down from the railing to rethink my methodology. I needed to go back to the drawing board and find a “better” way to end this, to thread the life insurance needle and make sure my ex-wife and kids were “taken care of.”

Looking back, I had a single priority. The only thing holding me back was my kids’ financial future. I didn’t pause to consider a future without their dad. I didn’t stop to think about a future where every big moment (graduation, marriage, kids, etc.) and the millions of little moments would be without the love and unwavering support from their father. My entire focus was on the money. It’s not that I didn’t see the value in all the **real** things I could provide my kids: support, love, wisdom and guidance...and the one thing I miss most about my own dad: presence. The only problem was, I didn’t believe I could offer them any of that. I didn’t feel worthy. I wasn’t good enough. I was in so much pain and felt so worthless, that the only value I could tangibly see was the financial security I provided. My love for my family is unquestionable and never wavered. As it turns out, my love for them was the second most powerful emotion I could feel, offset only by my self-hatred. Or, maybe the love was eclipsed by the fear.

Thankfully, that night, screwed up or not, the specter of financial fallout was enough. Just enough to pull my leg down from over the balcony. I rushed back to the safety of my room, locked the sliding door behind me, downed a few nips of Titos from the mini bar and crawled under the covers of my bed to hide from the world, and, from the balcony. I closed my eyes and prayed for death in my sleep, as tears poured down my face.

The next morning, I continued to ponder better ways to take my own life without losing insurance protection for my family. I continued to ponder and thought a bit about Noël. A few weeks prior, I reconnected with her for the first time since childhood. I was drunk when we spoke, but I recalled her

saying something about “pain” and “trauma” and “relief” – they seemed like mismatched concepts. Relief seemed like a long shot, but what if it was possible? What if there was a chance? Hopeless with relief seemed far better than hopeless and in pain. So grading misery on the curve, I decided it was worth a shot. I could always revisit the suicide mission in a few weeks if Noël’s promises eluded me. Plus, I needed some time to find a more effective method anyway. Still hopeless, I reached out to Noël to talk a bit more about relief.

Did I think it would work? Absolutely not, as nothing else had provided me with any relief whatsoever. Was I convinced that it would fail? Probably, but Noel had cast just one tiny ray of hope. Just one. Looking back, I now wonder if that is all it takes to begin. Someone who believes in the intolerable pain, but greets it with just a shred, an ounce, a sliver of hope.

What transpired next, and in the year since, has transformed not only my life but the lives of those I love. I found real, sustainable, and nearly immediate healing. I was able to unwind the events of the past, make sense of them, get perspective. By extinguishing my own trauma and filling that hole in my heart and soul with the good stuff (love, compassion, spirituality) I enjoy each day, each moment, and every human interaction – not just with my loved ones, but total strangers, too. I’ve become a pretty great guy to sit next to on the train, make change at the coffee shop, or exchange smiles in the elevator.

What’s even more amazing is that my approach to quitting drinking has improved every other aspect of my life. I used to always look outward, seeking validation and reinforcement from outside sources -- substances, relationships (including unhealthy ones), income, accolades in my field, etc. Now, I look inward. For months it was an effort for me, both affirmative and deliberate, my full-time focus. Today, it comes naturally, more like autopilot, although I greet every day with whatever commitment is required to hold onto this feeling. Just to be sure.

As I reflect on my past, it baffles me. The best way to describe it is in the third person, like watching an actor playing my role (not very well, to be honest) in a film. How do I know? I know because the character in that film gave up. He threw in the towel. He gave up on himself first, followed by giving up on everyone and everything around him. But why? Why was this different?

I have never been a quitter. I played sports at the college level, so I'm used to intensely physical, prolonged challenges. I played hurt. Always. I credit my dad who taught me from birth that there was nothing, *nothing*, that I couldn't achieve if I applied enough dedication and passion. He was correct, with one massive exception (well two, if you count the "dunking a basketball" exception he always offered as a caveat). My point is I don't accept failure, even if I'm playing with a broken arm, a broken collarbone, a concussion, or any other serious injuries (it's a long list). None of my **physical** injuries has ever slowed me down. I always left it all on the field under all conditions, no matter what. How, then, did I fail for almost a decade while leaving it all on the most important field I have ever stepped on? The field that is the core of my life. My health, my family, my very existence.

During this decade of failures, I did have one moment of what outsiders would describe as a "success." I quit drinking for sixty days or so with an "at-home rehab", which was fifty-nine or so days better than my prior attempts. Something to celebrate, right? No. Not even close. It was two months of total pain and misery, as my unaddressed trauma seemed only strengthen during these sober times. To those around me everything was fixed and binary. Sober or drinking. What they didn't realize, is all that I had achieved was a two-month break from my medicine, my numbing agent, with my internal pain now on the full offensive. Every day was a struggle for those two months. More than a struggle. Total Hell. It was too hard (a new phrase to me at the time). Harder than losing everything that mattered most to me. In retrospect, I cannot see the logic in any of it, and under those conditions, suicide was the most logical and viable option.

Now, I know why. All of those physical injuries were easy to identify. In many cases the large cast, brace or other medical devices made it impossible to miss. Here, my injury wasn't physical, but emotional. Its intensity was only matched by the depths to which it buried itself inside my soul, poisoning me from within. It flew under the radar for years while I, with mental health industry's "help", lost time, money and health for myself and my loved ones. Alcohol was my medicine, but it was also a stealth assassin, continuously getting closer to finishing me off. It almost won that night on the balcony.

I now contrast that with the rest of my past -- when the chips were down, I always fought harder, whether it be on the field, in the classroom, professionally or otherwise. After a decade of fighting with every ounce of my being while my life circled the drain, dragging my loved ones down with me, I now realize that my "toughness" was irrelevant. So too were my "efforts." Last time I checked, an "A" for effort and an "F" for performance is still earns you an F. That sums up my forties. This had nothing to do with fighting harder. It had everything to do with fighting smarter. No more band aids, please.

Sure, I've had trauma. I've learned that we all do, and that the way it affects us is completely unique. Until last year my trauma overwhelmed, controlled my emotions, compelled my actions. At the time I would have told you that "I don't have any trauma" and that I was "just fine, anyway." That could not have been further from the truth. Maybe it was aspirational at the time. But, when did "just fine" become acceptable to me? I felt the trauma pulling me under every day while those around me only saw how I self-medicated. Until I resolved my underlying trauma, I knew I would continue to pound my head against the wall. I wasn't going to win the direct frontal attack on the alcohol; it was time to attack the underlying problem, not the symptom. I had to pivot and flank. I had to. It was the final Hail Mary.

I have overcome the miserable coping mechanism, alcohol, that stole so much from me and those I love. In the process, I have discovered something much deeper that I may have

never found if not blessed with this unsavory coping mechanism of consuming alcohol. I discovered *me*...my deepest innermost heart and soul. It took a lot of digging. Not more of the surface-type digging you get in a therapist's office that had gotten me nowhere over a decade. Real digging. Drilling right through the crust, through all the magma and into the core, the nucleus, my heart and my soul. I had to extinguish the trauma, and I did. Without extinguishing the trauma, all of the tools previously at my disposal had been completely ineffective. This time was different. By extinguishing the trauma and bookending it with intense preparation and emotional discernment, I have been riding cloud 9 for almost a full year. The best part? Each day still gets better. Each day I still feel stronger. And each day I wake up with real purpose, jump out of bed and seize the moment.

For the first time in a long time (perhaps, ever), I really like myself. In fact, I love myself. I faced my pain (really leaned into it, in fact), my past, and adjusted my perspective. I stopped trying to control the world and began to acknowledge and understand the impossibility in that. What I can control, however, is how I respond to it. Seems so obvious, right? Well, it still blows my mind that it took me 49 years to get that. The future is blindingly bright. So is the present.

Four months into my reclaimed life, it felt like I finally downloaded the right internal software. I actually felt like my personal growth had plateaued, and at the time I was very pleased with that result. Today, roughly twelve months into my reclaimed life, I look back at the four-month mark and can't believe how much I have progressed since then! I have stopped trying to measure my progress as I now realize there is no maximum score I can give myself for how I feel at any given time. Each time I think I have peaked, I find myself jumping another new hurdle, breaking through another milestone or helping a new friend or a nearby stranger who crosses my path, and in each case the bar gets raised, and so too does the fulfillment. Now when I provide love and support for my kids it is not only sincere and genuine (always has been) but is also through a completely different

lens. This lens has perspective, real perspective. And when I speak to my kids these days, they really listen. It is not just my words that move them. It is my overall presence. What a gift to my kids. What a gift to myself!

Every day now is a blessing for me. It's an opportunity to achieve something, to help a loved one, make a stranger smile, or just enjoy what used to feel mundane.

This is NOT just about not drinking. That's an element for sure, but it is not the punchline. It's also not about staying sober and fighting temptation, because who wants that? I clearly never did. Abstaining from drinking is not my miracle. My miracle is living a life where I don't WANT to drink. Could I drink again? Maybe. But I have a life that makes alcohol irrelevant. It is absolutely, positively, glorious. Every day can be your miracle too, if you open your eyes, your heart and your soul. And get the real healing we all deserve

It's not about sobriety; it's about emotional mastery.

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Bill's story is entirely unique, and yet, his success was completely predictable. It is the story of what happens when courage, collaboration, and connection triumph over pain and conditioning. It's his own happy ending, and it won't be the same as yours. None of us who love Bill ever wavered in our collective faith; faith that if we remained willing to keep *failing fast*, we would witness his eventual success. His friends and family went against more of the ineffective conventional wisdom, stopped flirting with blame and guilt,

and really put their collective shoulders to the wheel, knowing Bill alone must prevail. It's the greatest joy and honor in our lives that we, and they, were right. It is a story of Love conquering Fear.

Darren and I observe Bill's quiet, steady strength now with wonder and, for me, a little envy. He is so important in so many lives, and now he is present, patient and sober in all of them. Bill's family was still full of hope, and unconditional love, which is rare for his particular type of track record. As I witness the extraordinary changes, the transformation in their lives and dynamics, I know it became possible because they allowed themselves to open their minds to new ideas and embrace changes in their own conditioning and perspective. It's hard not to wonder what life might have been like for me if only I had found relief sooner. I don't waste much time on wishes, though, as witnessing miracles is more fun.

We don't share the techniques and tools and tangents we explored, discarded, and collectively discovered alongside Bill – because they're *just what worked for him*. It was his effort which secured his path to peace, and his practices that keep him in his bliss. Which is the entirety of our point. We'll

check in with Bill by way of postscript in the next few chapters. See what you can connect to in his experience, the arc of his healing, how he reclaimed his bliss and twisted his kaleidoscope. His approach won't be identical to yours; yours may be more difficult or perhaps even easier, it may take a bit longer or be just as swift...the trouble with our terminal uniqueness is, we're terminally unique. Bill's journey led us across three countries, and many months of indefatigable quest for healing to reveal what works for him. It took patience, love, and a fierce belief in him. When you are ready, with that same determination, we can help you discover *what works for you.*

## If It's Not One Thing, It's Your Mother

I labored over this chapter fitfully. I think it is because I have unrealistic expectations of what I can deliver to you and your family, in the context of this book. I want to be a voice in the darkness that provides comfort, promise, hope. I want to jealously advocate for the alcoholic in your life – whose pain I believe -- and for all of you who love them. Most of us do not get out of this dilemma with our families intact, and those that do are often held together by worrisome pieces of chewing gum and rubber bands, hastily placed then watched over for inevitable weaknesses to give way.

A lasting artifact of the forced isolation of the pandemic is that we seem to know a lot more about what our friends and family are thinking about, well, everything. I now find that my own knowledge of their opinions has long since surpassed my curiosity. I often find them inauthentically presented, like protesters content to stand on any side of a line, holding signs bearing slogans they haven't read. The forced intimacy of our digital personae isn't breeding compassion and engagement. If familiarity breeds contempt, then this forced false Fauxmiliarity surely breeds self-contempt. I bet you can think of at least one

friend who has recently fractured a relationship with their siblings or parents or children over an issue that in years past would have filed in the “who cares”, or “mind your own business” bins. Instead, we live in a time where we are compelled to stand up, shout out and be counted; increasingly, we don’t even ask what we’re being counted for.

This isn’t intended as an indictment on social media, though I do think we are participating – seemingly voluntarily, or at least haplessly -- in the most interesting human experiment in that regard, replete with label-makers, labels, and everyone choosing sides about the labels. Alcoholism is one of them, and there are entire generational chapters of societal misinformation that must be confronted, fearlessly, if we are to heal our families from the gaping wounds of alcoholism.

I had coffee with a woman a few months ago. We were connected by a mutual friend. She was a recently published author of a women’s finance book, so naturally, I was very excited to hear about her journey as an author. Although our subject matters couldn’t have less in common, I thought it was a stellar opportunity to learn.

It was rather a table turn though, as it felt more like she was interviewing me than sharing. Unwilling to talk in details about Kaleidoscope in that setting, I instead showed her The Little Book on my phone. Her mood instantly soured, and she encouraged me, rather impolitely, to check my facts, saying that 'Alcoholism is very much a disease' perhaps I am out of touch with the research, etc., etc. It was revealed that her father was an alcoholic (the way word hissed from her, you'd have thought she said "leper"), and that she believes that she, too, has the "alcoholic gene", that her sibling most certainly does, and so on. I asked if that knowledge, this supposed genetic predisposition, had helped her to understand or make sense of her father's drinking, or in any way, prevent hers or her siblings? In the end, I paid the bill and slipped out of the conversation, a bit awed by how committed she was to a delusional fact set which shone no light on her path forward.

And I learned. I learned that most people have a context for alcoholism that is so entrenched, so inevitably pervasive, so societally programmed, that it may take us multiple generations to unwind. And if those people are your family members? You just don't have that kind of time.

My own family experience is a cautionary tale. The same (my only) little sister who got it dead right when she said, “A sober person drives to the liquor store, Noël,” also famously told my then husband that “Noël will never quit drinking until she loses everything.” I know where the sentiment came from; she wasn’t alone, it was all around me. But it wasn’t the central theme at all; again, for me, all of the action was just off-stage.

Perhaps she felt that the consequences of my drinking could be, must be, cordoned off like a hostage in a suicide vest, isolating the impact zone to me alone. As though, if I succeeded in killing myself 3000 miles from everyone I loved, the impact of the blast radius would be lessened by the sequestration and distance. Perhaps it would have been. I forgive her, as I forgive all of them. They didn’t know any better. Neither did I. Accepting my exile and ruin corresponded well to the self-loathing and isolation portion of the journey I was on. I deserved my divorce, any judgment, the estrangement of my children; the losses were all my crosses, I felt then.

Today, I am in very close touch with several of my family members, and remain a bit estranged from others. Being the “identified patient” in a family system forces a strange

dynamic. Everyone else's identity warps and molds in relationship to your "illness". Because of the dramatic effect that alcoholism has on the entire family, no one is left out of this shape-shifting identity crisis. The intensity of the alcoholism takes on its own life and everyone propels themselves into their respective roles, in relation to the alcoholic. So, in recovery, with real healing and perspective, why does the former drinker find themselves shocked and saddened when their family is holding them fast in the old dynamic. Save yourself the agony. Your spouse, sibling, parent, child was trapped, with you (by you) in the insanity of your drinking. Although they were generally not at the core of your drinking problem, they were the collateral damage in the wake of the wreckage you caused. And, although it's almost never accurate, they take your drinking very personally, and the consequences you flout are also theirs to bear. They have difficulty understanding why they alone were insufficient motivation to quit. So, when you arrive home, healed and loaded with insights, it's actually not at all surprising that they are greeting you with suspicion and tepid confidence in your sobriety.

I have made my peace, my amends, and I don't harbor ill-will against any of them. They

didn't know any better. My drinking was suicidal, I was suicidal, the consequences were becoming harsh and dire; those facts are not in dispute. The only credible playbook they had was like some Schoolhouse Rock-type public service announcement... "The Alcoholic Under the Bed." They did their best with tragically bad information and the societal justification to support it. Me, too. But it certainly wasn't good enough. For any of us. And forgiving them has been recently made easier by finally, authentically, forgiving *myself* for what I did to survive, for who I became.

My mom is probably the only person who has truly showed me unconditional love, although she has developed a habit in recent years of turning her phone off at night, which as a mother, too, I cannot understand. As the mother of a former drunk, it's likely a survival tactic – she says her prayers and turns it over to God for the wee hours. Her true understanding of all of this isn't important. She is there for me now and was there for me then. She did her best, as she never tires of telling me, and I believe her. It's enough. More than enough.

If you decide to believe, then the path becomes damned clear, despite the wreckage of the past. And on it, lie mutual forgiveness,

and finally, the kind of relief for your mother, sister, wife or daughter that they have always deserved. Which leaves you with the space to fix the now obliterated foundation of your relationship. If you cannot, will not, do not believe, then in my opinion, the odds are so stacked against you, we don't hold much hope. But, if you decide to find the courage to fight the social conditioning and go-nowhere comfort zone of the status quo, we give you very, very good odds.

Here is how that went for Bill, our Client Zero, whose battle had raged over twenty years, poisoning and tainting every relationship and painting every corner of his life with darkness. His mother Maria was raised by an alcoholic father, then married a man who drank alcoholically, divorced him to protect her children, and had been dealing with the around the clock worry and anguish over Bill for decades. Maria has earned her perspective, surviving this dynamic her entire life, and she has perhaps broken the cycle in her own life, having no obvious or negative coping mechanisms. Seems the alcoholic "gene" missed her.

When she approached us, Maria's love for Bill was fierce; she was desperate for guidance, any alternative, any shred of hope. Maria has

known me since I was a little girl, and she and my own mother are dear friends, so there was an element of trust implied already. We told her that we had no idea what would eventually work for Bill, but that we would find it and fast, she had enough faith in God, and in her son's essential goodness, and in us, to ask, "How can I help? How does Billy need me to be, what can I do to support his healing?"

Ever since I heard Johann Hari close his 2015 TED talk with 'the opposite of addiction isn't sobriety, the opposite of addiction is connection,' I have been exploring the implications of addiction on family. My longest standing therapist, Athena, who has been a sounding board to us, and brilliant thinking partner, has a sign in her office, "If It's Not One Thing It's Your Mother". Family is her specialty, her jam. She's helped me unwind a great deal of this -- within my own complex and often-dysfunctional family tree, certainly, but more so, for my outer circle. Friends and family still struggling, our clients, the network of healers we are gathering -- everyone seems to have a branch of their family tree, strained or broken by alcoholism. The level and scope of familial, communal, societal healing that must occur is pretty daunting.

I have architected a fragile sort of peace within what remains of my own family. Where it is strained, I now know, it is because some of them may never have the capacity to move past what I have done to survive. Where their love is obviously conditional, I have had to decide if my love should morph into something conditional in return. It's hard for me to live that way. I know my own truth, but in the face of such bleak characterization of who I am, what I was enduring, and what I deserved, I find it hard to summon the self-love to turn the other cheek. And when I do, there is often a smack waiting in reward on the other side.

Often, the best I can do is to live sober, place few demands or requirements on them, lower my expectations, and wait. My family was heavily involved in all my failed efforts at recovery. They did what they felt was best, and it's a fool's errand to try to dissuade them. Water under the bridge. Luckily, my recovery isn't about them. And real recovery, meaningful healing, affords me the clarity and peace to understand them and accept them, which I could never have achieved behind the veil of my vodka-soaked victimhood.

My own family didn't know what we do now about the disabling paradigms: the medicalization of alcoholism, the societal

mischaracterizations of alcoholics, and the utter futility of the ‘standard of care’ to heal them. They did their best armed with bad information. And for some of them, even that had an expiry date. Happily, you get to do better than we did.

However you decide to treat the alcoholic in your life, there will be a forum that validates your choice, takes you in, claims you as their own. You will find yourself in good company whether you host agonizing interventions, issue ultimatums, commit them to fruitless rehabs or therapies or medications, or simply leave them. If you are a child of-, you can plot your estrangement and future revenge; a parent can deliver a lifetime of guilt over the disappointment and anguish suffered, a sibling can simply cut you off, a spouse can exile you or worse.

Loving a drunk is hard. It means loving someone whose pain makes them lie to your face. Someone who will betray you, easily, if you come between them and their tonic. Whether you are a spouse of-, child of-, sibling of-, parent of-, the alcoholic in your life will absolutely challenge your concept of unconditional love.

I love my children, unconditionally. My ex-husband and I were keen to accelerate our kids' understanding of this principle, in the hopes that they would learn to turn to us first in times of trouble. I once explained the concept to my son this way (or perhaps it was my ex, who was truly gifted with this sort of material; he has never met a problem which couldn't be addressed with a good analogy), "unconditional love means that there is nothing – no *thing* – that can ever make us stop loving you. If you become a serial killer, we will be devastated, gutted, wrecked. Then, we will hire the best attorneys and psychiatrists, and while we may never understand why you are a serial killer, I will visit you in prison, I will pray for you, and I will love you. My love for you cannot be extinguished by anything done by you." This is the love a parent has for a child. The ceaseless boundless love I have for both of my children. And I do not doubt that this is the love my mother has for me. I'm getting to an age where my contemporaries are becoming grandparents and describe it in similar terms.

Early on, I shared that you really have only one choice to make if you love an alcoholic: **believe** that they are living in such a state of unchecked pain that the catastrophic consequences of their drinking pale by

comparison, or **leave**. Their recovery, and your relationship, will not survive your ambivalence or double-talk. *Believe*, or leave.

If there is still an active alcoholic in your life, and you decide to leave, you have made the obvious choice, the well-travelled path.

Perhaps, it is the only logical choice you see. It may be the best choice you can make for yourself. If the alcoholic's adventures have become public, or if there are children at home, you may not feel there is another choice. Your next steps will be obvious, and finite. You can try to draw borders around your own pain, your own loss, and try to move past it. You can give up, draw a line, and walk away. Most do.

Most love is revealed to be very conditional. Contemporary divorce statistics bear out that our vows, promises, contracts are as likely to be severed as not. Even sibling relationships – our brothers and sisters, whose connection to us is as close and pure to the beginnings of “us” as we can find – are fracturing all over our society over issues we might have considered preposterous a few years ago.

If instead, you decide to believe? Well, you my friend have signed on for a lot of hard work, and some of it will be yours. Because

loving an alcoholic changes you, is its own brand of trauma, and you, too, have things to resolve.

The mother of our first client, Bill, has known me since I was a little girl. Maria and my own mom have been friends for decades; they've weathered the losses of their first husbands, an alcoholic child apiece, and many periods of epic self-. Second only to my own mom, she is the mother I admire the most.

Maria was raised by an alcoholic father, married and divorced the alcoholic father of her own children, and endured Bill's twenty-year battle with alcohol. She has a lifelong context for alcohol that is nearly precisely as long as we've been *mistreating* it as a disease. Given my own happy upbringing by a couple of teetotalling, loving parents, and having two kids of my own who seem not to have followed my path, I cannot hold a candle to the ways in which alcohol has affected Maria's life. It's been all around her from the very start.

When we agreed to press pause on our business pursuits and focus solely on Bill, we had several long talks with Maria. What struck me initially was how difficult it would be to try to unwind her understanding of what

was *actually happening* to Bill, and what might be a meaningful path forward. She had nearly 80 years of experience and programming to confront, and we were proposing some radical departures from anything close to the “standard of care”. Her response was such a testament to maternal faith, faith in God, and (slightly worrisome and very premature) faith in us. We told her that if she believed every word in The Little Book, then we felt she could be a force in Bill’s recovery.

Even with all her up-close exposure to alcoholics, Maria seemed to instantly surrender to the process and the plan. As we methodically confronted decades of misinformation and painful experience, she took every concept in stride, asking only, “what does Bill need from me, how does he need me to help, what should I do?” In every step of the process -- and at some, I am sure she had to suspend some real skepticism -- she sought only to understand only what her son needed from her... and prayed for the strength to be that for him.

Maria was, and still is, like a walking version of the St. Francis prayer. Look up the full text if you are unfamiliar, but to me, it is a prayer about unconditional love, faith, and the willingness to apply them to others. It’s not

the “Letter to Santa” kind of prayers I used to fervently whisper in the darkness, there is no quid pro quo. It is asking only to be shown how to be an instrument of your own soul’s purpose, and to be of use to your fellows. I’ve recently been beating myself up about my own praying and meditation, so I’ve shortened it to, simply, “Show Me.” Show me the lesson, the wisdom, the path.

As Maria encountered worry, frustration, stumbling blocks and dead ends with Bill, she never lessened her faith in him, responding with love, grace and patience. I will someday ask her if we really managed to unwind a lifetime of her experience and conditioning, or if she decided just to suspend her disbelief, just in case our crazy ideas might work for her son. But even that notion is just my own ego’s curiosity. It doesn’t matter. Her love was unconditional, and her faith so abundant, that she made a choice to believe. To believe in Bill’s pain, that it must be worse than the insanity of his drinking, and to let us try to address *that* so that he could unburden his own tortured soul. She summoned Herculean strength through his final slips and struggles, knowing that the pain must be relieved before he could hope to enjoy life without alcohol. As a mom myself, I am honored to continue to watch her put his needs above her own

reflective conditioning. She has raised the standard in my own parenting by enviable example.

She still comes to us from time to time with a question or two – “How should I react in this situation? What does Bill need me to do, be, say?” Relieved from his pain, his own intuition and instincts have become a reliable barometer. But the beauty of it is, we mostly turn her attention back to her own instincts (which are honestly always dead on), and what her brilliant, sober, extraordinary son is already telling her. Bill’s sister, Nicole, has also been a faithful presence in his recovery...sometimes seeking us out, uncertain about how or whether to broach a subject or face a situation. Again, Bill is blessed and surrounded with a family of incredible faith. Faith in God, sure, but also faith in him. Their instincts are a credit to that unshakable faith, and the enduring power of unconditional love. They decided to believe.

So, if you, too, have decided to believe, the work starts here. Your loved one is the grip of grave emotional pain, which must be doused, killed, extinguished. You can hold onto your (likely, quite easy to justify) negative emotions and resentments about their coping

mechanism, or you can get busy helping them find a way to kill the pain, for good,

Start by supporting them on that journey, leaving no rock unturned. *Until* the pain is extinguished, it's unlikely that anything will keep your loved one sober forever. But once it is? Their unburdened soul will reveal the answers. They heart space becomes open, and suddenly any suggestion for how to push the next drink away becomes viable. Even then, most suggestions won't work perfectly out of the gate, and some won't work at all. We're human, and therefore, terminally unique. Fail fast, then cross those off the list. Alcohol will become superfluous, irrelevant, meaningless. And sober, you will begin to find your way back to one another. If it sounds impossible, given your situation, your loved one, we understand. In 35 years of insanity, I've learned that my own failures are unremarkable. When you stop doing *absolutely everything wrong* with the alcoholic, all that's left is what works for them.

In our observation, there is one clear exception to the Just Believe or Leave premise for families – that of the spouse or partner. The kind of radical healing we propose generates massive personal growth

and transformation in a very short period of time.

If you are the alcoholic and are in a long-term relationship that you intend to continue, we believe you must both experience personal healing simultaneously, individually. You are both part of the dynamic. This is in no way a hall pass for the drinker, or any implied accusation of the spouse – it's not about who's done what to whom. Blame is a wholly unhelpful concept in the resolution of trauma, or in finding your bliss. But you must consider that if you have stayed in a relationship with an active alcoholic, despite the dire consequences, for any length of time? It has changed you, traumatized you, altered your own sense of self. Your picker is wonky; your own soul clouded by the years of worry and anguish and failure. You've been dealing with a big, hairy identified problem, subsuming everything in its path. With all the attention being necessarily, but unhelpfully, siphoned away from you and heaped on your loved one, self-care probably hasn't been a huge priority.

If you send your loved one to heal and transform, how will your exhausted, empty shell of a soul greet them on their return? Probably as angry, frustrated and consumed with worry as when you waved goodbye.

We've seen many such relationships, still rich in love, fail after real healing, fail in sobriety. They failed simply because the spiral down was together, but summitting the peak was separate. You deserve to have your own, individual 'summer camp for the soul'.

Your loved one deserves your very best, now that you are finally going to be introduced to theirs. As difficult as it is to bridge the growing chasm forged by active drinking? After the healing, the growth will create even more distance. The specific path is different for every couple, but consistently we see that success as a couple is achieved only when the growth is mutual, proximate, simultaneous and shared. It makes sense.

My two children are both getting married next Summer. They've both made brilliant choices, and we are so excited to welcome these two permanent members to our family. Having been unable to push my 23-year marriage (sputtering on fumes) to the 24<sup>th</sup> anniversary, I know that life is long and filled with triumph and tragedy. What I hope for both, what I believe I witness in their relationships, is a partnership devoted to each person being their very best, individually. Investing in yourself is always the right play, but when you both invest in one another's growth, real

sustaining love emerges.

They are both entering freely and purposely into their own adventures. Confronting their parents' failed marriage, dealing with very child-like responses to the theoretically adult behavior they were raised on, meeting the challenges of their mother's alcoholism and often disappointing parenting which resulted head on – it sounds like a cautionary tale. I certainly gave them plenty of material. But what I see in both my children is intentionality, borne of experience, tempered with strength and grace. Their successes and failures will be all their own. Sober, I am in a position to exercise my maternal right to support and advise, and generally offer my interference wherever I am permitted. They alone possess the wisdom to forge their own paths to bliss.

My ex-husband used to say that 99% of parenting is simply avoiding entirely screwing your children up *today*. He's right – and I have always coveted his easy demonstration of that. I suppose we all give our kids enough material for a lifetime of therapy. If it's not one thing, it's your mother, lol. Perhaps our true birthright is to screw up our own children in entirely new and different ways from the ways our parents messed with us.

There is always lot of work to be done, after the healing has begun. There is a lot of wreckage to clear, much to rebuild. A lot of forgiveness to cultivate, nurture, share -- from everyone to everyone. But once you believe in the pain, and drop the veil of endless fictions, forgiveness is actually the most natural and attainable state. And the ancient Shipibo believe that when one of us releases generational trauma, we heal the seven generations behind us, and the seven ahead. So look to that as warriors, who break the cycle, suit up, and forge a new path.

How many times have you said, “I would do anything if they would stop drinking!”? What if *all* you needed to do was believe? Could you do only that, just long enough to insist on some actual relief from their pain? Understanding their pain, actualizing it and advocating for healing? That doesn’t mean that they are not accountable for all of the pain their drinking has caused you. Quite the opposite. It means you, too, are finally ready for it to stop. And you may be their last, best, *only* remaining foundational support. You can be pivotal to their recovery still, in spite of all the prior defeat. The seeds of forgiveness can be planted right now, although they will not sprout and blossom until healing and transformation is evident.

Consider their doctor, therapist, treatment center...odds are that none of them are on your loved one's timetable. But if you are, if you are relentless in the quest for relief from their pain, then you are officially becoming a part of the cure. And we salute you, welcome you to the team, and will fully support you in the work ahead.

## **Life is a Co-occurring Disorder**

My first experience with a treatment center was really great. Unfortunately, it wasn't for my drinking problem. My mind had become pretty warped from silently suffering years of unresolved trauma, two liters of Smart Water (this wasn't what I called it; I actually emptied Smart Water bottles and refilled them with cheap vodka), lies, coverups, and more lies. My behavior had become increasingly erratic, rash, manic. I was working 100 hours a week, sloshing through my marriage and family obligations, mostly loaded. My boss and my then-husband were voicing their independent, but eerily similar, concerns in stereo. I'd begun casually attending AA meetings locally, showing my husband how proactive I was being – 'I'm probably not an alcoholic, but they have some good suggestions' – to shift his mounting focus away from the alcohol.

I flew to Minneapolis to meet with their state governor – a retired WWF champion – to discuss the state retiree healthcare program. It must've been one hell of a flight from Hartford, as after checking my luggage in with Delta in Connecticut, the very next thing I remember was wandering barefoot, shivering in a thin hospital gown and scrubs, in what I later discovered was a combination psych

ward/drunk tank, gripping a paper cone holding the remnants of some sticky medicine. No clothes, no possessions, and oddly, no clip holding my shock of now-untidy hair, I am certain that the attendant struggled not to laugh when I approached the desk, explaining calmly, “Um, yes, hello. There must have been a mistake. I am Noël Obourn, and I am here to see Governor Ventura. On an important matter of the State retirement plan, which you may find yourself in need of one day. Would you be good enough to reunite me with my things?” Post-blackout disorientation seems to cause a bizarre form of brusque self-aggrandizing on my part. I will never forget the expressionless gaze that met mine, equally solemn, “Yes. There has been a mistake. You were unable to be revived when your plane landed. Your Blood Alcohol was .341 when you arrived here, still mostly unconscious. Once you have ‘blown zeroes’ for six hours, you can have your telephone and sort things out with the Governor.”

It is hard to believe, even having lived it. I deduced that “blowing zeroes” meant having a series of clean breathalyzer tests. So, I splashed cold water on my face from the drinking fountain, then induced vomiting for good measure, forged an alliance at the Nurse’s station, passed a depression and

general psychological risk screen, and begin to plot my escape. I remember I Love Lucy was playing on the television in the corner of a room with about 30 cots and chairs; Lucy and Ricky were on a scouting trip to move to Hollywood. I sat with six or so fellow parishioners, in various states of undress and unconsciousness. I was able to muster enough presence of mind to secure a single phone call at around 4 am— always a tricky choice, ‘to whom’ I should place the call – my husband drew the decidedly short straw. Still barefoot and scantily clad, like a Cold War spy to her handler, I explained in whispered hisses into a filthy ancient payphone in the corridor, that “something had happened” and he needed to call my #2 at work, a dear friend ours of many years, and explain that I’ve been taken very ill, and that I am in the hospital, and am quite unable to attend the meeting with the Governor. I finished, “I don’t believe I’ve been arrested, but there was some confusion when I arrived last night, and I’ve got to sort things out here. I cannot say more, I don’t need an attorney, it wasn’t alcohol, and I’ll be home tonight.” Like silk off my tongue, still thick with that ‘overnight in the psych ward/drunk tank’.

The meeting with the Governor’s Office went off without a hitch without me, just one of the

many absurd ironies of my escapades. My team always had to be hyper prepared with an understudy given my volatility. Though they rarely had to execute the back up plan, there were a few key events where I sometimes wonder if I gave myself the hook just to let them flex their own incredible talent. A scant ten hours later, a town car deposited me back in the driveway of the home I'd left just the morning before. Oddly, my luggage, brief case and purse had all somehow remained in my vague custody, and I could very nearly have pulled the whole 'mysterious hospitalization" story all the way through.

Instead, I played this one very, very carefully. I told my husband that my bulimia had gotten out of control, and that I really needed help. (This had the convenience of being true). That the ravaging of starving, eating, purging must be playing tricks on my sanity; that I must be suffering from malnutrition, which was clearly the culprit behind my confusing behavior. I'd already done a prescrub of the internet, scouring for examples of malnutrition-related "sundowning". There were plenty of examples of glucose-related behavior swings making my story marginally convincing, and a plan was cemented, leaving the alcohol safely off the treatment menu for the moment.

Three days later, on my fortieth birthday, my husband flew with me to Fort Lauderdale to check me into my first treatment program, Milestones, for eating disorder recovery. We stayed in a suite at the W on the water and had a somber birthday dinner. I had already liberated the minibar liquor bottles into my purse, thinking they might prove useful. The next morning, when they forced us to say our goodbyes in the little lobby, he sat in the parking lot of the rental car and sobbed for an hour. I often think of that, how scared and wrecked he must have felt. While the *fact* of our marriage persisted another decade, and five more trips to rehab, I believe that was the day it ended.

It wasn't luck that landed me at Milestones. It was the result of months of pre-planning. Sensing that 'something would have to be done about something', and since nothing had been relieving me of my symptoms – anti-depressants, anti-anxiety medications, a brief slurry period on an anti-psychotic – I had felt that I was going to have to demonstrate to my husband, and my boss, that I knew what the issue was, and was taking strides to address it. I'd chosen Milestones months before, "in case it came to this". It's an unfortunate reality that if you drink alcoholically, your spouse has likely already been commissioned

as your partner in this type of fruitless crime; they too, hope that anything but the alcohol is what's causing you to be drunk.

Eating 'disorders' are as complex and individual as drinking problems. How and why we choose to weaponize food is deeply personal. For me, it was probably a combination of things: an over-developed interest in food and cooking, parents whose worst fear was an extra five pounds of chubbiness would spell my eventual demise, not being picked for the recreational elementary school cheerleading squad, never being able to quite make my body look and behave the way all of the other little ballerinas did – who knows? Some constellation of experiences managed to warp and shift my sense that, in food, I might find the elusive control. I could control what I swallowed, and if I was disciplined, even what was digested. And if I could control my weight, I would please my parents, make the cheerleading team, and fly through the air in a pixie's grand jetté just like ballerinas in my dog-eared copy of The Best Little Girl in the World.

Milestones recognizes that our disordered thinking is utterly unique. From jump, everything was customized, tailored, bespoke. We lived in little four-bedroom suites,

planned/shopped for/cooked/ate our meals together, but in accordance with our own personal plan that was developed in collaboration between the client and nutritionist. We attended group therapy, and recovery meetings.

Most of our free time was consumed in the planning, journalling, and “indulging” in our meals, but I remember it was there that I was introduced to Grey’s Anatomy in the evenings, and so began a love affair with the creative minds of Shonda Rhymes’ writing team. I received loving messages from my mother and a daily email from my mother-in-law (his parents had come to stay and help with the kids) filled with encouragement and scrumptiously heartbreaking details to ease my copious Mommy guilt. My boss, a lovely man who probably knew before he hired me that I had a drinking problem, went along with the bulimia scenario, and was unflappable in his personal support; my staff, many of whom were already veterans in my foxhole, were likely less encouraged, but outwardly supportive.

The lead psychologist, Marty, asked me about drinking, and I remember I shifted awkwardly in my seat, a bit startled by such a seemingly off-base line of inquiry, “I’m sure I don’t have a

drinking problem...the last few years (*twenty-eight years*) of the food issues have probably affected my alcohol tolerance. But, I mean, I really cannot imagine attending Zoë's wedding and not raising a glass of champagne." Marty glanced at his clipboard, "and, how old is Zoë?" I stammered, "Oh, she's only nine now, but I just mean, I don't think I'm really an alcoholic." "Yes, Noël," Marty chuckled wryly, "people who aren't alcoholics don't tend to plan their drinks decades in advance." Mic drop. In reality, the twelve little bottles I'd swiped from the minibar at the W had been confiscated when my luggage had been searched, so Marty already had me pegged at the door.

Marty introduced himself at recovery and group therapy saying simply, "Hi, I'm Dr. Marty, and I'm addicted to anything that changes my feelings." The impact of that simple statement has rolled around in my consciousness for years. Accurate, perhaps, for him. I think the problem is the word 'addicted'. It evokes an insidious sense of permanence and passivity, defeat, a chronic, incurable condition which I know to be untrue. Trying it on for size and examining from every angle, I prefer a twist. "I have the tendency to *use* things that change my feelings 'In a habitual way'." It doesn't roll off your tongue

in the sharing circle, but it is more authentic. I like one the Old-Timers use, “I’m an alcoholic...but if I don’t drink, it doesn’t show.” I gave this a light touch in the AA chapter by design, I think the shaming exercise of introducing yourself with an affirmation of a negative persona, over and over, is not a net positive. Accountability is one thing. But in my life, words matter. I may have spent decades in a blackout, but I do not identify as an alcoholic, an addict, or in any generalized chronic or acute manner, *diseased*. I say it in AA meetings if I introduce myself out of respect to those who are gripping the disease wheel for dear life and are easily triggered by alternate theories of the game.

My traumas were not resolved when I left Milestones; they were accentuated, foretelling a pretty grim future, by abstinence from both my drinking solution and my eating solution, but my food abuse was in the rearview mirror. If you’re not a bulimia expert, or haven’t indulged in disordered eating-thinking and behavior, I can attest, it’s tricky. It’s deeply personal, and like drinking, becomes an insidious form of coping that permeates every corner of your life.

Together with Nicky, their brilliant staff nutritionist, and Dr. Marty, and frankly, some

of my fellow inmates, I was able to step away from the minute-by-minute habituation and gain some perspective. I discovered I had used restriction (starving) to gain control over my otherwise volatile and traitorous emotions; failing that, I could achieve the same outcome, and a degree of physical release, almost a euphoria, from the act of purging. I learned that with practice and discipline, I could soon control a thrice-daily relationship with food, and I still, of course, had the alcohol waiting for me.

The dirty little secret is, I knew that the bulimia was directly interfering with the drinking solution. The only way to ensure that two liters of vodka could perform its black(out) magic was to keep my stomach empty of anything else. Invariably, the two schedules competed...if I drank, I couldn't eat, as I'd have to purge, which might sober me up. If I ate, the vodka would be too slow to deliver the desired state of nothingness, or worse, I'd just be conscious, and really drunk. One of them had to go, and since I couldn't purge myself into a blackout, I gladly sacrificed my 28-year relationship with food as a drug. That really was my conscious thinking.

I am forever grateful to Milestones, and to my ex-husband, and that boss, and my family, for

that one trip to treatment. The bulimia that had caused chronic reflux, severe esophageal erosion, dental issues, and the dreaded yo-yoing on the scale was behind me. Now, the disordered thinking? That's mine to keep. And I don't even fight it, not really.

There are foods I am irrationally afraid of. I know it's irrational, like my fear of bridges decades after a devastating car accident on black ice years ago. Unlike bridges, I don't think it's a badge of courage to force myself to eat things that trigger my fears about my appearance, my worth. I skip them. They are mostly white, starchy foods that you probably adore. Potatoes make me sad, rice makes me tired, carbs generally sour my mood, sugar has no place in my diet. I'm allergic to wheat, which I brandish like a "keep the carbs off my plate" warning. If you are ahead of me in line at a cafe, I can calculate the carbs, calories, and other culinary crimes on your tray without even glancing up from my phone. I'm not judging you – I think I'm getting thinner (and, maybe, taller) by standing so close to your mac and cheese and mashed potatoes. I will probably never actually feel like a waifish ballerina, gliding through the air as if on strings. But I don't starve, I don't binge, and I don't purge. I'm a card-carrying former bulimic, but it no longer shows.

Darren and I picked up a parasite last Spring in Texas – having lived in Mexico for years, we considered ourselves immune to such microscopic perils -- which took two frustrating, nauseating months to resolve, after which we both were looking a little wan. On a video call with my long-time friend and therapist to discuss our plans for the business, she gasped, “my dear, you are looking dangerously thin!” I still laugh at how much pleasure that silly statement gave me. Athena does, too! When the parasites left, so did their GLP-1-like effect, but the memory of her ‘compliment’ sustains me at times like a welcome treat.

The reason Milestones worked for me was simple -- everything was designed with me in mind. I ‘volunteered’ for treatment, however manipulative my original motives. My objectives were personal and specific – arrest the disordered behaviors and the underlying internal narrative that drove them, while maintaining some of my food-group psychosis and my overall weight.

My intention was to learn as much from Nicky, Marty, the other practitioners and techniques, and the community, as possible. If I was going to get serious about digesting

everything I was ingesting? I needed to know it all, understand what would work for me, and put a plan and a new set of habits in place. The work required vulnerability and total honesty (if you forgive my insistence that I probably wasn't an alcoholic) about my thoughts and behaviors. I hit my stride, and attained my goal weight, with frequent small low-carb meals, safely navigating my entire digestive cycle.

Milestones advocated what we then-called "holistic" treatments. In addition to an intense focus on nutritional therapy, they included body work, breath work, personally tailored fitness regimens, even hypnosis (at the time, this was pretty edgy stuff by Western medical standards). Thirty days of simply being allowed to obsess about food, no, being *required* to obsess, gave me a chance to rise above the behaviors I'd fashioned over a lifetime, and understand what I was thinking and feeling – without judgment or attachment, I began to see that the disorder had started as a pre-teen notion of gaining control, had in fact, for many decades, been controlling me.

Armed with new knowledge about my already out-sized obsession with food, I laid a new foundation for how I would navigate the world, free from the behaviors that had defined my

relationship with food since I was twelve years old.

Consciously, I sacrificed the counter-productive ‘coping value’ I had found in the bulimia in order to preserve the vodka. I had to protect my life-or-death grip on alcohol. Although it looked like it was a sudden response to missing the meeting with Jessie-the-Body, I’d been researching it for a long time. And, because I wasn’t as afraid to give up the bulimia as I was the alcohol, I invested in the process, anxious to give my family, friends and co-workers something to celebrate. I spent a lot of time getting ready, finding the center that best fit my priorities, and I dove into it, once there, with curiosity and gusto. And, when I left, it was with an enormous set of tools, experts, and new friends who could help me abstain from the unhealthy cycle.

I reference the treatment centers I’ve been to by name, because there is too little transparency and too damned much bullshit in the marketing. The potential positive outcomes are wildly overstated by every recovery center, so I prefer to be downright specific here about the good, the bad, and the inert. It’s been nearly 20 years since that trip to Eating Disorder Summer Camp, but I still

refer to the resources I was introduced to at Milestones, including Marty and Nicky, whenever I need to.

When I think about that unlikely success, I can objectively summarize that there were three distinct legs to the stool: Getting *really* ready, engaging in effective personalized care and real healing, and establishing a lifetime of practice and support.

With proper attention to those three areas, treatment can be like a fantastic spa facial: first, you open your pores to give your skin a chance to bring the impurities to the surface. Then a great aesthetician does the cleaning, extractions, other treatments personalized to your skin and your goals. Finally, your renewed, fresh layer of skin is ready to absorb great hydration, sun protection, anti-aging lotions and potions. You leave aglow, and probably, with some expensive products in your bag which will help your nose and your psyche channel that dewy, youthful experience from your own bathroom at home. That is how it should always work, but of course, it isn't quite as straightforward as a custom facial, is it?

I don't think it's coincidence that in 2008, I inherently knew how to choose a center that

aligned to my preferences, I knew how to engage and self-advocate during the treatment, and that a lifetime of strategy would be required. Nearly 20 years later as we start a revolution in healing from alcohol abuse, as we look through the kaleidoscope, it's the same essential steps, and the same critical respect to each which must be paid. There are no accidents.

## There's No I in Ayahuasca™

I am an aberration in the recovery community on a range of subjects. This chapter will put me squarely outside the Venn diagram of the currently accepted treatment standards – I expect enemies to surface in psychiatry, psychology, pharmacology, and all manner of recovery support groups. The “system” that argues for the No-Cure “standard of care” in alcoholism are people who are inexorably wedded to their own techniques, programs, prescriptions...and profits.

When we formally launch Kaleidoscope, we will pull no punches, brook no confidence in pseudo-science masquerading as a ‘standard of care’ – treatment either heals you, or it fails you. Given that the dubious options for recovery through traditional Western medicine produce such markedly abysmal results, we’re okay coloring outside the lines until the world catches up to the obvious truths. We have no wish to be provocative for novelty’s sake. The only enemy to our cause is bullshit.

I am not afraid of alcohol. It isn’t a spooky serum which calls to me with any special seduction. I serve alcohol in my home. I routinely cook with wine. From time to time, I have been known to flambé, occasionally, on

purpose. Darren drinks: a bit maddeningly, he never seems to drink too much.

Like the delusion that I'm probably losing inches while you indulge in starchy carbs near me, I'm very pleased to have you drink a glass of empty calories next to me. I can almost feel myself getting taller, and after your third glass, I even feel a bit smarter. I don't judge your drinking anymore than I would deny you homemade pasta or a flaky pastry. Just because I won't have it doesn't mean you shouldn't. My firstborn child, whom I love and admire, has a very serious dairy allergy. I do not deny myself cheese or heavy cream in solidarity. He knows I love him dearly, but he also knows better than to come between me and good Irish butter. He's a grown man about to be married, and is aware of his allergy, so I no longer feel compelled to warn waitresses when the canapés are passed. Interestingly, even after years of sobriety, telling my story, and forming a company to radically change recovery, my friends and family still seems incredibly interested in my beverage selection.

I am also not afraid of many other substances. (I should say "any", but honestly, I abhor needles, so the siren's call of intravenous drugs eluded me, despite the promising ways in which they were often described by friends

from rehab). Other than heroin and crystal meth, my early twenties included a degree of personal experience with many ‘mind-altering’ substances, often of suspect provenance. Marijuana had the alternating effect of making me sleepy or hungry, two side effects I eschew. I even tried cocaine once in college, long before “the Troubles”, and immediately dismissed it as “a disaster in the making” after a very productive 96-hour study session.

Because I am no longer tortured by the cruel mistress of my own warped memories, I don’t reach for substances to change my feelings. I adjust them naturally. I have acquired a very deep bench of strategies, but in this regard, I mostly succeed using a personal technique I call simply ‘emotional discernment’. It’s hardly my own invention -- I have taken several courses and distilled their amalgamation into a practice with a simple cadence that works for me: identify the emotion, acknowledge it, understand where it comes up for me in my body, and choose.

The choice is always between giving in, leaning in, rolling around in it, or dismissing it, adjusting it, moving it on down the road. But I don’t even consider reaching for something outside myself, other than perhaps a well-

placed hug, to change my feelings.

I had a breakthrough in this regard three years ago when I realized that my overall bliss isn't contingent on always feeling good. I am a hedonist, and a stubborn Taurus through and through, so this revelation was a bit jarring. Given the choice, I would choose to feel "giggly orgasm" all the time (this is my proxy label for 'just about the best feeling imaginable' – you could substitute 'bliss'). But we can't always live life at 11 on the dial, and since I spent most of 1990-2020 in the feeling-free zone of the daily blackout drinker, sometimes I relish feeling sad, or fearful, or anything at all. Because, miracle of miracles, I can.

Emotional discernment was a bitch for me to understand, and even more challenging to master. It is perhaps the skill I am the proudest of, and I believe it's the most essential bit of my recovery repertoire. You won't notice it (I hope) all of this checking in with myself that I'm constantly doing...I don't even know I'm doing it anymore. It's just one of those positive mental processes that I tried really hard to get good at, and suddenly, when I let it flow, I was a master. We can teach you. It isn't hard. And it has none of the consequences of a couple liters of vodka.

But without the essential relief from my so-called capital T traumas, I didn't have a prayer that anything would work for any length at all. I existed in two distinct states: blackout nothingness or total anguish. During the brief periods of sobriety I strung together (six months, nineteen months, and once, three and a half years) on grit and moxie, everyone around me was in the impact zone of my internal suffering. I no longer resent the fact that it took decades of seeking for the potential solution to be suggested. It's the memory of the languishing misery that fuels my purpose for you – once we begin, we will fail, certainly and often; but we will fail very, very quickly. The source of your trauma must be relieved. Until it is, everything else that might sustain your recovery is just static. White noise. Once you can hear the stirrings of your own soul, your recovery repertoire will become clear – you will intuitively know what works for you. Our first job is just insisting that you find the relief from your pain so that your internal compass can be trusted. And, for many, extinguishing that pain can be practically immediate.

A few years ago, we were housesitting in Brittany, France for a tiresome British couple and their pair of exceedingly painful dogs.

When Darren and I met, “Must Love Dogs” was pretty much his baseline requirement for determining whether someone had the essential goodness to be in his life. As the daughter of a vet, we’re a pretty good pair in our canine obsession. But this pair of dogs were like a couple of anxious, anorexic ballerinas trapped in the impossibly frail frames of fussy, twitchy retired greyhounds.

Brittany is a difficult region under the best conditions, but that October was especially harsh, the converted stone barn house had no central heat, the dogs refused to hold either bladder or bowel overnight, and literally everything from greengrocer to library was “closed for the winter”. We were at a difficult point in the development of Kaleidoscope, and caring for each other and these two nutty dogs was getting the better of our spirits. It should be noted that if you live in Mexico, it is perfectly acceptable to not have a tumble dryer; I don’t recommend for a bloodless stone barn in a Britton Winter.

My son had recently confronted a health crisis, and though the urgency had passed, I was feeling every inch of the 6000 miles between France and Florida. Driving home in the British-side vehicle on the French-side roads from a demoralizing trip to the

supermarket (during which the deeply unhappy woman at the register had made me cry over, literally, spilt milk) I felt myself unraveling. I thought perhaps it was a good time to check in with my longtime therapist and friend, Athena. Emotional discernment was lighting up my instrument panel, telling me I was perhaps experiencing some of the wreckage after the storm.

Athena and I made quick work of catching up on our last few months of research and travel, and I found that the simple act of initiating contact to say, “I think I’m okay. Are you okay? Do you think I’m okay???” was enough to reset my engine light. We moved onto the topic of Kaleidoscope. Because Athena is creative and impatient and tirelessly well-researched on behalf of her clients, she has been a trusted advisor and thinking partner to us from the outset. And the best, most impatient kind of therapist and friend. She was also dealing with an aggressive form of treatment for an equally aggressive cancer, so she welcomed the positive, proactive forward-looking segue.

That night, she suggested I call the former Director of Passages. I laughed to realize I had (finally) been away from treatment so long that I didn’t realize Michael was now their

“former” director. He had moved onto a stem cell/vitality endeavor, and apparently was setting up infusion suites adjacent to a wide variety of wellness retreats, all over the world. I asked her if she thought it was a kindness to highlight an outrageously expensive anti-aging technique to a woman of my advancing years, with a multi-year gap in her earning history. She laughed, “No! One of the retreats is a fantastic ayahuasca center, created by another famous Passages drop-out, Gerry, and the former Clinical Director, Jeff, that created the original Passages design.” I knew Dr. Jeff only through my decades-old Passages research, as he had long since departed. It is impossible to have been associated with Passages and not know at least some of the legend of Gerry. I was intrigued. Athena, who is also a seeker, only regretted that her current course of therapy was contra-indicated for ayahuasca, or she’d already have gone herself.

There is, of course, actually no “I” in ayahuasca, which a few epic fails on google revealed. Then, it was as if my ancient MAC started to hum in that frigid bleak Brittany kitchen, the petulant puppies asleep at my feet. I stayed up the entire night, researching, reading, sending email inquiries and texts. Nine hours later, Michael returned my call,

and I listened intently for any of the vocabulary of defeatism and certain failure I generally hear in the recovery lexicon. I also listened for the bullshit, but as Michael detailed his experiences, both with his new company, and with Gerry & Jeff's retreat, I started to hear instead words like "transformation", "higher consciousness", "clarity" and "purpose". I made a few more calls, and eventually, got a return from Dr. Jeff himself, who spoke to me not as a five-time Passages drop out, but as an experienced and sober seeker, determined to pave a short cut for others.

I shook Darren awake that morning, proud that I'd kept our furry ballerinas from defecating on the living room floor by running them out between calls. I said, "Do you trust me? Like, really, **really** trust me? Because when we leave here, we are heading to Costa Rica to attend shamanic ayahuasca ceremonies in the jungle. Did you know that ayahuasca literally translates "soul vine" and is said to summon God into your direct consciousness, rapidly transforming your perspective and creating massive healing from traumas?" He rubbed his eyes and countered, "Did the dogs really not soil the living room floor all night?" That morning, we both clung to our individual miracles.

I should probably caveat that as it relates to psychedelics, all the prior experience in our relationship was mine. In the traumatic blur of the early 1990s, I became a frequent attendee of music festivals, and anything related to the Grateful Dead and other aging happy rockers could easily suck me in. It wasn't the music; it was the party favors. I found that I could trade off my days of alcohol-soaked nothingness with days of psychedelics, sunshine and steel guitars, to much the same effect – both neatly obliterated my traumatic memories. Except, I now see a distinction, that with the hallucinogens, I was semi-conscious and had vivid memories of my day, versus the vodka which produced a state of utter unconsciousness.

My last semester at Northwestern, and the summer that followed, included a lot of introductory psychedelic experiences – Mushrooms 101 on Armadillo Day (an annual festival which was may still be the only evidence that Northwestern is actually a university and not just an academic pressure cooker in which young minds boiled), LSD 101 at concerts, Ecstasy 101 (MDMA, we say, now, although I personally think if you scored the moniker 'ecstasy', you should claim it proudly, like "giggly orgasm") with co-workers

from a restaurant. While you might think that daily blackout drinking would be hard to pair with adult responsibilities, it is much more common, therefore acceptable than, say, a daily hallucinogen habit. At least, it was back then. And psychedelics were rare, existing far outside of my organized white collar post-collegiate dynamic, so they were relegated to the status of occasional distraction from the omnipresent alcohol.

Darren and I went to Costa Rica immediately. Rythmia, in our experience, is peerless as a week-long summit – their program is a well-meshed thematic trifecta. There is a strong, at times overplayed, clinical underpinning which is comforting to many western seekers. They pair this with an almost hands-off reverence to the ancient wisdom and shamanic traditions, the ceremonies are facilitated entirely by Indigenous shaman families. Finally, there is an abiding spiritual construct that is presented in a manner accessible to anyone and offensive to none, regardless of your past context for God, the Universe, the Divine.

With about 100 of our new friends, mostly ingénues like us, we dove into every corner of what they offered. Their singular metric is inspired: they track miracle rates. It's a

winning strategy, if a tiny bit manipulated, and their miracle rate is in the high 90<sup>th</sup> percentile each and every week. Which makes for a pretty non-threatening, celebratory environment. The group consciousness, the collective energy, is an intangible but essential ingredient to the healing.

At Rythmia, they're not particularly hung up on how you found them, or even why you are there. They screen for physical contraindications (certain medications and conditions make ayahuasca medically inappropriate, potentially dangerous). They offer a bit of introductory pre-work and collect payment in advance. Their YouTube channel is rich with shorts on "ayahuasca for depression", "ayahuasca for addiction", "ayahuasca as couples' therapy", (kidding, I think, though you might check as they're surfacing new marketing angles all the time) "ayahuasca for ADHD", and dozens of other use cases. While they still fall into that old "labelling the boxes" habit that I find so stifling, in citing all of the potential beneficiaries, they manage to somehow be inclusive, liberating.

The staff and the facilities are top notch. And for a pair like us -- Darren with almost no exposure to psychedelics -- and me with only a dated "shiny, happy people in gypsy skirts

and anklets” context, the way the program unfolded was perfect. If you are feeling called to ayahuasca, you will recognize your own stirrings in these pages.

We both received our “miracle” that week. Unquestionably. But here’s the funny ass-backwards of it all: neither of us was focused on any deep troubling aspects of our health, physical, spiritual or emotional at the time. We were really double agents: curious tourists in this ‘new’ therapeutic land, and hungry for knowledge for our own clients. But, despite our almost “smug” level of mental fitness on arrival, we soon discovered we had much to learn. And that the ‘Trauma Lite’ experiences in our pasts had gathered like so many dust bunnies in the corners of our souls.

This isn’t intended to be a long promotion for Rythmia, though we’re happy to do that. The point is, many years sober, with the oppressive side-effects of my trauma long since resolved with EMDR, enthusiastically geared to take on the so-called recovery institutions and standards, I found that there were lots of little piles of “Trauma Lite” in the attic of my soul, which were altering my outlook and perspective on the world, and holding me back. My own Capitol T traumas, aka the Troubles, which I (and many others)

had judged suitably horrendous to affect their paralyzing grip on my sanity, had provided ample evidence that the world was a place to be feared. But the Trauma Lites had changed my sense of safety and security, the ability to love and be loved, in ways that were just as insidious. And they were still affecting me. Darren immediately recognized the same in his own perspective and psyche. We couldn't believe what frauds we were, thinking we "finally had it all sorted" only to discover that our emotional attics were littered with a lifetime of minor insults with major implications to our bliss.

We experienced all four carefully orchestrated ayahuasca ceremonies; and we got the full money's worth of forecasted "side effects". We forced ourselves to embrace the 'purging' (as undignified as it is to be in room with scores of relative strangers all in the throes of massive intestinal discomfort)...embracing the notion that 'what happens in the maloca stays in the maloca.' With each successive ceremony and class, our enthusiasm grew, and our discomfort receded. The group's consciousness transformed into something indescribably energized, yet otherworldly peaceful. It's been a couple of years since that first experience, which we repeated with Client Zero, Bill. Until our own comprehensive

retreat is launched, we will keep Rythmia on our short list of curated external solutions. We have also branched out into other indigenous traditions including ceremonial DMT, ibogaine, psilocybin and peyote ceremonies, here in Mexico. We have worked with many shamanic families from many indigenous traditions. We have also explored therapeutic synthetics, like ketamine and MDMA (ecstasy) since our first trip to Rythmia.

We recommend Rythmia enthusiastically to friends and family, with one glaring exception: in our esteem, it is insufficient as a complete program of recovery from alcohol abuse. They are exactly what they advertise: a life advancement center, with no particular devotion to any specific area of focus. They describe their offering as “ten years of therapy in a single week”, but the therapy is almost entirely between you and the medicine. They offer a time-limited program extension through a well-constructed app which mostly offers meditations, playlists, and the opportunity to connect live to a weekly guided discussion with other past attendees. They offer paid remote consultations with their staff. It’s extremely comprehensive for a program which is really a one-week ‘transformative time out’. Like so many ‘programs’, it is not enough to

arrest alcoholism. It may, however, be enough to extinguish your trauma, to give you a fighting chance to change your life. Which is Job One.

We're very bullish on the safe and appropriate use of psychedelics. Like EMDR, they can assist in processing the events of your past and how they shaped you. Like hypnosis, you can explore the events and experiences without attaching to them, finding perspective in the bargain. It truly does seem to offer decades of therapy delivered in a matter of days. Magic happens inside these malocas and if it's right for you, pay attention. You've suffered for years, decades. Psychedelics hold the potential to arrest your trauma, make sense of your past, and integrate the insights into a rich and fulfilling life. It can give the alcoholic a chance to embrace the myriad other techniques and tools that will form a fulsome set of recovery resources. It turns the dial from static to a frequency that can pierce the years of failed efforts. It may enable almost anything else to work for you.

We're also worried that Western medicine is poised to really screw up the psychedelic renaissance. The scientific community in the good old US of A, having epically failed to treat any of the diseases it anointed by way of

questionnaire (addiction, anxiety, depression for a start), seems undaunted by their past performance. They're almost emboldened as they seek to rapidly commercialize and exploit these ancient plant medicines and their synthetic offspring. There is little more than lip service being paid to the ancient (some uses are chronicled back 2000 years) indigenous traditions. We're missing a massive opportunity, since the 'clinical trials' have been going on for centuries. We have much to learn, if we stop insisting on our superiority. But there is a startling lack of curiosity, in the face of tremendous experience, that is the hallmark of so-called modern mental healthcare.

Even at Rythmia, where the clinical staff can illustrate the biochemical cellular structure of the ayahuasca, how it interacts with our brains, and attempt to dazzle us with their esteemed clinical explanations, the shaman leaders sit by, visibly amused, but unperturbed, by the gringo doctors and psychologists. The shaman doesn't seem obsessed by the 'why' it's been working in their communities for centuries.... he simply knows that it has. Given the choice between another generation of scientists who are dead sure they know how and why everything should work (while nothing does) or

embracing the shamanic rituals and traditions, *in spite of* not knowing how exactly it works? Well, for this old alcoholic, the choice seems clear.

In an earlier chapter, I mentioned a large recent scientific conference on psychedelics we attended in Mexico City. The sell-out boasted 2000 attendees, evenly split between Indigenous practitioners and Western scientists, and a mix of people interested in creative healing, looky-loos like us. It offered an instructive contrast on where the real knowledge base is. The Johnny-Come-Lately-Label-Makers versus Centuries of Spiritual Plant Medicine Tradition. Unless you give extra points for irrational unfounded confidence, this clash of the titans was hardly of a fair fight.

One of the scientists from California presented the data from an impressive study of psychedelics with trauma patients. The interesting thing is that they were obsessed with matching the therapy to the ‘disease’ of the patient. It was a bit like Lewis Carroll’s Alice – One pill makes you bigger, one pill makes you small. This drug, this dose, this frequently for *addicts*. Another drug, dose, frequency for soldiers with *PTSD*, still another for a specific *eating disorder*. They’re so

proud of their ability to categorize us into minute irrelevant diagnoses they cannot help but tailor the cure based on their own useless pixilating. Having some 28 years of experience with an eating disorder myself, I found the hypothesis that there might be a different dosage for a bulimic versus an anorexic patently absurd. I would have been far more impressed if he'd said, 'regardless of the type of trauma, or the resulting coping mechanism, these are the therapeutic approaches which seem to be working to *arrest trauma*.' The reason they want to 'know us' through their irrelevant diagnoses, is that's how they get paid. To not cure us. We're far more interested in the emerging genetic tests which are predictive about susceptibility to psychedelics, across the portfolio. We're more interested in studies which focus on the beneficial outcome each type of medicine promises, understanding the impact of preparation, setting and integration.

The canary in the coalmine, the harbinger of systemic greed and more tiresome decades and cycles of our sham of a mental health industry, came in the form of a keynote speech. A best-selling author and physician from the Bay Area opened her talk with, "We have a saying in up in Silicon Valley....if you're not microdosing? You're

*microworking.*” Wow; that’s kinda gross, right? Darren and I weren’t shocked, but I honestly had to fight the urge to vomit. The true impetus of Western medicine seems to be more medicine, at any cost. This from your friends who’ve changed your life with your daily dose of their current mood modulators – the Xanax generation is reaching for a different daily dose of checking out. These ancient medicines promise the opposite – the chance to *check in*.

To those who espouse the virtues of microdosing, in the absence of any meaningful data to demonstrate transformational benefits beyond “taking the edge off”, I wait patiently for history to judge you for the snake oil salesmen you are. This isn’t science, it’s spin.

That expression, “life is about the journey, not the destination” doesn’t hold true here. If you are gravitating to the journey, to the trip, and embracing it habitually? You’re probably kidding yourself, trading one problematic coping mechanism for another. Also, working with psychedelics isn’t about the trip at all – that takes care of itself. The medicine is the perfect healer: with no information at all, it takes you where you need to go. It doesn’t need a blood test or a scan or a DSM III

code...all of the answers are inside you, and properly administered, the medicine can help you to bring them to the surface. But the magic is in the three I's: Intention, Insight, Integration. First the setting of intentions, which is about getting clear on the positive outcome you are seeking. Second, unlocking the insights you gleaned in your journey, which is best done immediately. And finally, the integration, which is the buzzword for analyzing the insights after your trip, and incorporating them into your transformed life. If you are considering the rapid transformation that psychedelics promise, we urge you to seek the *destination*, not the constant journeying.

It will course correct, I hope in time, much in the way you can parallel the usage trends in the legalization of cannabis – there's a massive influx of giddy new THC users who flood the market when the previously inaccessible substance becomes legalized, normalized, recreationalized. Think, "Dude, check it out, righteous, four-twenty". It takes a while for them to find their footing and realize that being stoned all day is counterproductive to getting anything else done. There are more dangerous learning curves, leading to overdoses and avoidable contraindications, whenever drugs which were once illegal and

demonized become accessible and acceptable. Perhaps it's an example of Darwinism.

My advice is, use your head. If your goal is to arrest your trauma, ease your chronic, debilitating psycho-spiritual pain, so that you have a chance to allow natural, drug free solutions to reflect off the mirror of your unburdened soul, then be thorough and honest in your pursuits. It takes introspective preparation, thoughtful administration, and disciplined integration. A morning dose of mushrooms or ketamine to take the edge off your 8 am meeting doesn't seem to be in pursuit of those lofty personal goals. And if your goal is to arrest your trauma to gain the control in your life you have ceded to your disastrous relationship with alcohol, perhaps leave the daily microdose of anything a bit further down the menu. Once I was reunited with an unburdened soul, I found it more appealing to live in the real world. Maybe that's just me, but I suspect we can agree in principle.

I have never had a negative experience with psychedelics. This isn't just dumb luck, and there is a roughly 30-year gap in my exposure, so technically, it's apples and oranges. Even in my torment in the early

1990's, when there was nothing ceremonial or spiritual about my experimentation, I had a ritual. I reminded myself that "It's just me and God in here, and neither of us wants to hurt me." It made me a great trip buddy to my sometimes-paranoid compatriots, and the ritual kept me safe in some truly risky scenarios that I would never repeat. God clearly had other plans for me.

Today, I have that same ritual, but it is all about the destination. I have learned that certain medicines and ceremonies seem to naturally pair with certain types of healing, transformation or clarity I am seeking. Taking candy from strangers is a practice that I cordoned off in my 20's and I don't recommend it to anyone. It's also wholly unnecessary, today. As irresponsible and distasteful as the "rush to mainstream and monetize" is, it negates the need to get a tab of acid from a pal behind the 7-11. But it is work, not play. It is intense, should be done in the appropriate, spiritually rich setting, and with proper attention to personal safety, preparation and integration. The destination is the goal, not a constant trippy journey.

There's a lot of polarizing politicisms in play here. I believe we should continue to advance our scientific understanding, pairing *people*

(not pseudo-diseases or coping behaviors) with individualized, tailored therapies. The paths that brought us here cannot be retraced; it's an individual path out of the hole, too. I also believe that it entirely misses the point -- reuniting with your authentic soul – when the spiritualism is divorced from the administration of the medicine. But I am very much a gringa in this world, and I leave room to be wrong.

We also see this as a space where geographically distinct approaches vary nonsensically. Consider ketamine. We have friends engaging in ketamine therapy in New York, where it is administered in the doctor's office, like a chemo suite, but without the community. Our friend describes the Nurse Practitioner sitting in the room with him, typing away at the computer, while an IV drip administers the medicine. He is free to bring headphones and listen to whatever he likes during the “trip”. He was medically screened for contraindications, and he is asked one or two routine questions at the beginning and the end of each session. That's the extent of the preparation and the integration, with a very bizarre setting wedged in the middle. That costs him roughly \$800/visit. He isn't sure if it's helping.

Another friend in Massachusetts receives his ketamine at home, in a blister pack, to be taken orally. He has an app with a lot of playlists and content, and he must have routine video consultations with a counselor between shipments. He is supposed to have a “trip buddy” in his home to ensure his safety, but often, he doesn’t. Neither of these settings seems optimal to us; it’s truly a mystery why one board of medicine would have such radically different requirements and standards from their peers 100 miles away. And, Connecticut, stuck in the middle, has yet another set of protocols.

The Western orientation to mental health is one geared to marketing and monetizing: it is about herding, categorizing, prescribing, and getting paid. Though the physicians, psychologists, therapists have positive intentions, collectively, the system is a self-perpetuating machine, rewarding patient trust with frequent failure. In the final chapter, we will detail our hypothesis for a better approach.

We have much to learn in the west from our friends who have been practicing these ancient rituals and delivering healing with these sacred plants for millennia. We can choose to be curious, to learn. Or not. There

is entirely too much politicizing and cultural appropriation taking place, and as a gringa who has no wish to masquerade as an ancient healer, I will not add my voice to the debate in general. Maybe we'll all be microdosing in the future. Perhaps it will be like a little fluoride in the water. Maybe even the ancient shamanic leaders don't believe the medicine needs to be delivered in a spiritually respectful ceremony. But I doubt it.

My premonition is that history will not be kind to this chapter -- the race to commercialize -- if we don't bridge the cultural divides, shelve the unearned smugness of Western science, and begin to learn from thousands of years of practice.

But as an alcoholic, I know that anyone who is reaching for an external substance to change their emotions moment-to-moment, isn't really recovered. They've just traded one drug for another. The promise IS the destination – the outcome and long-term benefits – but it cannot be reached if you become insatiable about the journeys.

When clients work with us, we take the mystery out of the equation. Your health, and the clinical appropriateness of any psychedelic therapy will be critically,

comprehensively evaluated for potential inclusion or exclusion from your menu. If you're seeking on your own, we implore you to be exhaustive in your research, and thoughtful in what you undertake. The promise is clear, but it takes care for the miracle to materialize.

## Rehab and Other Gap Years

You may know the parable of the man who fell into a hole. Down at the bottom of the hole, shivering in the darkness, he was paralyzed with fear. Clawing at the gritty walls, he could find no way out. A priest walked by, and he called up, “Father, please help me...I cannot get out of this hole~!” The priest said, “I will say a prayer for you, my son,” and continued. A long while later, a doctor passed, and the man again shouted up, “Doctor, please help me.... I cannot get out of this hole!”. The doctor immediately took out his prescription pad, and hastily scribbled, tossing it down into the hole. After some more time passed, a friend of the man happened by. “Friend, please help me...I’ve fallen into this hole and cannot find my way out!” The friend jumped into the hole without hesitation. “You fool, “said the man, now we’re both stuck down here!” “Ah,” said the friend, “that may be true, but I’ve been down here before, and I know the way out.”

When I meet people who never knew me as a drunk, they have a hard time believing what my life was like. Even in the rooms of recovery support groups, where tragedy is woven into the fabric of most of our stories, people often can’t reconcile who I am with

who I was. I have often joked that things would go much faster if we short cut our stories and published trading cards. Here are my statistics from my time in the majors:

- three DUIs (two on my ex-husband's birthdays)
- nine job changes that weren't entirely voluntary
- 21 'missed' flights; 4 involuntarily removals (before take-off or on arrival), 2 completely erroneous arrivals in unintended destinations
- 5 emergency room admissions; 3 longer term admissions, 1 reconstructed right arm, 1 medically induced coma
- 6 trips to rehab: 1 eating disorder, 5 alcohol + sober living
- Personal highest Blood Alcohol Reading: 0.483

I'm tempted to write with humor, or at least irony, about my time at Passages. As unlikely as it sounds, there were lots of laughs. Some of my very best friendships were forged there... although my time at Passages was insufficient in getting and keeping me permanently sober, I regret none of it. I've simply had too much of anything to be dismissive about any of it. Now that you're

recovering from my major league statistics, I'll warn you that my disclosures here are personal. The only individuals whose identities aren't obscured are people whose experiences are a matter of public record – featured by the US Weekly or Dancing with the Stars ilk, but still very public.

I was at rehab with Anna Sorokin...the infamous faux German heiress who entertained and dismayed us in equal measure. I was there when she arrived, with a weak command of German and suspicious lack of fluency in addiction; I was sitting just a few chairs away on the patio when the FBI surrounded Passages and apprehended her. She still owes me nearly \$300 for a golf outfit which was inadvertently my treat (she insisted on joining us at Calabasas Country Club but was under-attired for the outing. And she still owes a dear friend of mine a sincere apology for getting him completely wasted on a rehab field trip to one of the islands off Long Beach. But she's earned enough inappropriate attention from the millions who couldn't look away from the train wreck that unfolded, so I'll leave her to her own devices.

I'm tempted to regale you with stories like being carried out, barely conscious, of a Stevie Nicks concert in Hartford, then,

ironically ending up in rehab with Christie McVie. (It was the thrill of a lifetime for this Fleetwood Mac superfan, but I, don't know any more of her struggle than is available online). I only know that it was an ironic twist in my own story that still makes me wonder about the kind of serendipity that graced my life with her presence for few weeks.

I could reveal that when I was living in the sober house in Santa Monica, Ben Affleck was rumored (in nearly every national tabloid) to have checked into the Passages Malibu campus. Oh, how we all conspired to be readmitted to the big house, just for a gander. During his very public stay, I started enthusiastically attending AA and NA meetings in Malibu and the Palisades, but never managed a close-up sighting (turned out to be an utter waste of lip-gloss) but I hit a lot of great meetings over those weeks.

I could tell you about David X, who was perpetually deposited at Passages by his family – like, *permanently* – who existed in an overmedicated and disruptive haze on the fringes of the campus.

Or how it felt to be there on so many birthdays, and Mother's Days and Christmases (note to self, our clients will

never have to endure 19<sup>th</sup>-century-costumed carolers to make being away from home on Christmas seem even more surreal). I could tell you about meeting Mitch Hedberg on one of the single worst days of my life, with his extraordinary on point sense of the absurdity of practically everything.

But none of those ‘luminaries’, or the scores of other “ordinary people” who are extraordinary in a thousand ways...none of them are the purpose of this story. Celebrities get sober, or don’t, at seemingly the same pace of the rest of us. Their journeys are chronicled on glossy magazine pages and social media, but they look just like yours. And when they fail, or succeed (either way, they seem to publish their memoirs) the failures and successes draw the same threads through the messy fabric of recovery as ours do.

The purpose is to learn the lessons of those experiences so that we can fail – faster – for you. My 32 years of professional toiling in the system, 30 of them as a patient, have produced a lot of firsthand exposure, experience, and led to a lot of dead ends and wasted energy. So, I will focus more on the learnings, and how closing the gaps and confronting the misdeed of the tragic system fuels our philosophy and foundation.

Between 2014 and 2020, I went to alcohol rehab five times. My “residential time outs” lasted two and a half years, cumulatively, including eleven months in a sober living house. The first experience was an unqualified disaster, the next four held promise, but proved insufficient. The intolerable pain remained, and no techniques or resources could permanently pierce the din of the roaring trauma in my mind.

After that very positive experience with treatment for my eating disorder, my first experience with treatment for ‘alcoholism’ was exactly the type of 21-day nightmare I hope to spare you and your loved ones. It should never ever be this way. The story is a bit of murky familial folklore, but I’ll cover the lowlights:

Returning from a week-long business trip to our Connecticut home in midwinter, I was too exhausted to unpack. I wasn’t at all sober in this period of my life, but I was conscious and in reasonable control of my faculties. In the middle of the night, I got out of bed to go down for a drink of ice water. My decidedly American love affair with ice has always been an international inconvenience, but that night, it foreshadowed doom. Clad in sock-feet, I

slipped on the top wooden stair, and unable to grab the banister, I “flew” the entire flight, landing with the full weight of my frame on my right arm, rendering the bones from my elbow to my pinky into jelly and dust. My husband heard, or felt, a deafening “boom” and flung himself to my side, called the ambulance where I was rushed to our local hospital, the upper right side of my body formless, in an indescribable level of pain. I’d been given morphine in the ambulance and was twice blessed that the trauma surgeon on call had just returned from a combat tour in Afghanistan and had a ton of experience with broken marionettes. He later shared that for all the soldiers he’d seen, he had to work on such an unrecognizable elbow. He’d done an exceptional restructure, and with work, I would gain nearly full functionality. God’s grace was true, but fleeting.

When I came out of surgery, I heard my husband telling the team, “She cannot have any pain medication when she leaves here....as soon as she is released, she is checking into rehab for alcohol. I have a bed for her and the treatment center will not administer pain medication.” My failure to unpack the night before proven to be an even more critical oversight than wearing rag wool socks on a polished oak staircase. He’d gone

home while I was in surgery to check on our teenagers and collect my pj's and toothbrush. While trying to liberate my toiletry bag, he discovered six one-liter bottles of Smart Water, filled with Grey Goose. I still don't know how he found the rehab he hastily chose, but he'd secured a bed, and there was no question that I was headed to treatment.

Two days later, on the drive across Connecticut, I begged him not to leave me there. My right arm was in a suspension cast, with a metal brace from the hip to the elbow to immobilize it while the bones and hardware fused. The pain alternated between aching throbs and searing shots from my shoulder to my fingertips. I could barely dress myself, in T-shirts ripped from the waist to the armpit. In abject terror, mixed with enormous shame, I am ashamed that I told him if he left me, I would tell the rehab, the police, anyone who would listen, that he'd pushed me down the stairs. I was inconsolable when we checked me in, frozen in terror. He was resolute. He could not have known.

"The Farm" as it is known in recovery support circles, is the single best example of "Everything We Think We Know About Addiction is Wrong" I've had the personal misfortune to experience. I have since heard

even worse stories, though at the time, it seemed that I had truly been consigned to the seventh circle of Hell. They don't deserve even the veil of anonymity; In my considered personal (and professional) opinion, they should be shut down. Their CEO, is a nasty trick of a female psychologist, who, interestingly was featured in a documentary called, "The Business of Recovery." It's an unflattering, revealing portrayal, inclusive of her bragging about her unscrupulous methods and wildly overstated results. The facilities are 'grubby rustic' and poorly heated, and the entire program amounted to an all-day Introduction to Alcoholics Anonymous, punctuated by chores around the farm, and a nightly "recovery" movie, predictably featuring movie stars in rehab. If I want to dissolve in self-pity, I need only channel those bleak days, barely able to make my own bed, out of my mind with worry and fear, my right arm immobilized in a suspension cast, but still expected to sweep the dining hall.

We weren't really permitted contact with the outside world, other than infrequent "therapy" with or without our families, and for the first several days, I was consumed with mounting panic about what my employer would make of my disappearance, and silence. My husband had called one of my employees to tell them I

was recovering from an accident, while I was still in the hospital, but they hadn't heard from me since. Even recovering from trauma surgery, it must have seemed reasonable to them that I would eventually pop in a set of headphones or make a call from a speaker phone. For 21 days, I was held captive in a world that had become small and terrifying. No healing took place; they peddled in the "break you down to build you up" nonsense form of treatment. Blame, shame, and anguish flowed across the sad campus, bonding the residents like prisoners of war as we lined up for Dixie cups of mysterious medications. It was a truly shattering experience. Though its nickname evokes a pastoral scene in Litchfield County, it was more reminiscent of the One Flew Over the Cuckoo's Nest: Alcohol and Narcotics Edition.

Three weeks later, I was home, living with dull, constant panic at the thought of being 'sent back'; sheer terror and a new, deeper sense of abandonment did keep me sober for a few short months. I attended AA begrudgingly, mollified by meeting fellow POWs from the Farm. With fancy footwork and a barely believable tale, I had kept my bosses at bay, and I returned to my job in Boston, committed to staying as far from my home as much as possible. I knew for sure

that my family were no longer on my team.

I have long since silently forgiven my ex-husband. He, too, was paralyzed with fear, and navigating the fog of society's wrong-minded standards -- medicalization and misinformation. Today, I can look back on the experience with a personal, relevant perspective on the madness of such places I couldn't have gleaned without surviving it myself. You may find yourself now in a similar predicament. But I urge you to make your own conclusions now about how you will choose to treat your loved one: their pain is real and must be extinguished. Guilt and shame are an anemic currency in the economy of recovery. Believe, or Leave.

A few short months later, I was passed out in my permanent suite at the XV Beacon Hotel when the bombers struck the marathon, sending a ripple of loss and terror through the city. I came to during the lockdown and ensuing manhunt which had frozen Bostonians to their television screens. It was many hours later, working my way through the replenished minibar, that the fateful ad for Passages Malibu flooded my bedroom. The founder, Chris Prentiss, seemed the very opposite of the woman at 'the Farm', talking about a 'Cure for Addiction', that it wasn't a

disease at all, but a symptom of unresolved trauma and pain. His son had experienced exactly what I was experiencing; his cocaine use and the futile efforts to curtail it had nearly destroyed his life. Lubricated, but curious, I dialed the 800# and was lucky enough to reach the Program Director himself, who patiently talked me through their approach and philosophy. It is hard to calculate the value of real hope when you've been drinking suicidally for decades. As strange as it sounds, I felt something like excitement, feeling as if the light at the end of the tunnel might finally be actual sunshine, rather than the one-eyed beam of a freight train.

I met many important healers at Passages, some of whom are still in my life today, all have had an enormous impact on my health, and influence our work today. I managed to achieve deep meditative states through hypnosis, traditional meditation, and deep breath works. It was there that I met Athena; while I have a rotation of therapists I call upon for different topics, Athena has been my primary therapeutic thinking-partner since the day I walked into her cozy little office and saw that sign, "if it's not one thing, it's your mother" on the wall. She is persistent, creative and aggressive. Though not a mother herself, she has keen instincts for the family dynamic; like

a great mother, she is fierce about wanting to get her clients whatever they desire.

My lead psychologist, Kieth, was the first to call my marriage accurately. My husband arrived to collect me, with our kids, at the three-month mark. At the end of our first couples' session, Kieth grasped my arm and said, "you know this isn't going to [fucking] work, right?" It was over, and I think we both knew it, but we chose to linger for another five years, and three more long relapse-driven admissions. Betrayal and guilt hung like heavy drapes, but we forced ourselves back to the table again and again, like people who'd pre-ordered the pricey chocolate souffle and were determined to see it through to the final course, not caring that it would be burnt and bitter.

I want to say it did the trick, that first trip to Passages, or the three that followed. It did not. I left with some incredible resources, techniques, new perspectives – tools I carry and use still. I gathered enough hope and enthusiasm to skirt around my symptoms, but it was like a sing-songy melody -- meditation, hypnosis, breath work, psychology, recovery meetings -- badly paired with the bluesy harmony of worry, fear and failure, in a clashing minor key. I was no longer

consumed by singular shame, but I was still gasping for air below the water line of my pain. Abstaining from alcohol with no other sustained relief, often for really long periods of time, set the stage for the hardest period of my life.

Passages had the foundation right, there is no question. First, they believe that treatment should be the end to your suffering, not a new destination for your shame to hole up in. Second, the treatment *was* a little customized. (That said, they still resist personal choice and resonance as barometers, favoring the “we know better than you do what’s right for you” approach.) Third, they know that addiction is not a disease, but the coping mechanism is a habitual trauma response – but none of their therapies touched my own symptoms.

In the same way I have done a fulsome career retrospective to unlock the secrets and lessons therein, I have also carefully dissected what went right at “the Farm” (admittedly, a short list) and at Passages; I’ll also share what went really terribly wrong, and how we bridge the gaps for our clients as we work to arrest your symptoms, and lovingly curate your healing and bliss.

In our experience there are three critical ingredients in the arc of healing from trauma. Then, and only then, we can help you shed your negative coping tactics, well beyond abstinence. We believe pain manifests emotionally, intellectually, physically and spiritually. Everything about our approach is deeply individualized – we fail (fast) and are relentless in helping you to discover your own path. These three critical ingredients happen to be the three biggest gaps inherent in all standard treatment protocols.

First is intense preparation: Getting Really Ready.

Second is arresting the effect of unprocessed trauma, achieving real, sustained healing.

Finally, once you are back home, we never let you go.

A bit more on each will highlight why it is so rare that any of the standards of care currently applied to alcoholism work for anyone at all.

### **Getting ready.**

This cannot be emphasized enough. Most rehabs consider the advance preparation as an on-line or telephonic assessment, which is entirely focused on their capacity to reserve a

bed, your ability to pay. Many clients aren't even involved in the conversation, and most of our families and friends don't know the half of it. On that first trip to the Farm, they were happy to check me out of major surgery and into their 'care' immediately. Another travesty is that most rehabs quietly encourage you to arrive drunk. If possible, very drunk. This has its genesis in the freakishly mistaken notion that if you can pull yourself together to arrive sober, then outpatient might be enough treatment intensity for you. You will likely spend time trying to substantiate your continued need for treatment for the entirety of your stay; arriving with a stagger is more convincing than arriving with swagger.

Welcome to the Stumble Inn.

In our opinion, the healing begins long before your arrival at any retreat or rehab. To engage in your own care and discovery, you must be clear-minded. Clinical detoxing is a must for some. It was for Bill, aka Client Zero; he can relay with some chagrin how challenging he was as a detox-at-home patient. We're undaunted by whatever it will take to get you momentarily sober....we've seen it all. For others like me, who've never even had a hangover, there may not even be the need to clinically detox. Either way, to spend good money to detox in some

depressing wing of the rehab or nearby hospital is a damned expensive way to get achieve momentary sobriety. Unnecessary at best, dangerous at worst – but, we work with whatever we've got. We have yet to be completely stymied by a client's circumstance.

We help our clients get and stay alcohol-free for up to a month before the on-site retreat portion of their healing.

In addition to white-knuckling a challenging month of sobriety – which is really very difficult -- we believe that the “getting ready” period of the arc is also the right time for all up-front assessments. Most treatment centers struggle to comprehensively assess their clients after they've arrived, even failing to really unlock the underlying issue before they're discharged. We perform detailed psychological, physical, emotional, family, trauma and spiritual assessments – our clients can expect to spend about four or five hours a day working remotely with our (and as appropriate, their) physicians, therapists, nutritionists, healers, culminating in the permanent pairing with their Sherpa (their personal guide through the Kaleidoscope). We perform focused lab tests, and the care team looks holistically at the whole person, not a pixelated mash-up of diagnoses and historical treatment failures. There is simply

no short cut to a fulsome assessment if you expect individualized treatment. Anyone can market the illusion of bespoke treatment – but without an intimate knowledge of the whole person, what factors will their treatment recommendations possibly rely on? Their own experience is an 85% failure rate. Not much foundational support for a “standard” protocol. Even your own caregivers only know what you’ve told them, rarely reaching across the corridor for a holistic view. We also don’t reinvent the wheel. With our client’s permission, we do grand rounds between our team and their own past care givers, friends, family members, and situationally, even colleagues. We leave no stone unturned in our preparation, because if we don’t know the whole you, then how can we expect to address your terminal uniqueness? If that sounds scary and intrusive, compare it to arriving at rehab drunk, with no more than your payment certainty having been assessed, to discover your ‘custom agenda’ consists of little more than 12 step meetings and group therapy.

This is also the time, with intense supervision, to titrate off low utility or contra-indicated medications. Most of us with prior treatment history end up on a carousel of inert (at best) -- sometimes dangerous and contraindicated --

medications that need to be stripped out of the vanity. We also find that typically, clients have not given their physical health the attention it deserves. Chronic heavy drinkers tend to present with a variety of nutritional and other physical deficits which can begin healing immediately, but only once the suicidal drinking and pharmaceutical musical chairs are addressed. To evaluate and curate the right path for you, we need to get you in fighting form, understand your personal health risks and needs, and create a safe plan from the outset. And that typically can be tailored to allow it to begin in the comfort of home.

For clients who aren't in safe, supportive home environments conducive to the first month of getting ready, we offer an on-site approach. We find that most of our clients can adjust their environment with constant support from us or locally coordinated resources to fit the needs of that first month of preparation. Where that's impossible, we adjust it for them, and in rare cases, bring them to the retreat environment sooner.

Finally, Getting Ready includes setting goals and objectives...intentions for your healing, but more, for the post-healing reentry to a real life you can cherish. As Johann Hari reminds us, the opposite of addiction isn't sobriety, it's

connection. Those pathways and critical intersections are identified right up front, and continuously adjusted. You will return home transformed; don't assume that your friends, family and colleagues have made any changes at all. The absence of drinking is a critical enabler to begin to repair the dynamics, but most people find that while they are all still puzzle pieces – mother, wife, daughter, sister, friend, boss -- they no longer fit the way they did during their active drinking. Your family goals may be achievable, but we like to begin working with family system from the very start, as there is always a heavy lift in breaking down the conditioning and misconceptions.

### **Intensive Healing.**

Second in the arc is meaningful healing. Your trauma must be processed. You must reframe and resize your perspective on the events of your past without reliving them, without strengthening your seemingly inexplicable bond to them. You need to twist the kaleidoscope in a serious way, with real healing. It isn't irony – it's the system performing as designed – that the biggest gap nearly all treatment protocols have in common is that no actual healing is delivered.

Your trauma is real. Challenging to uncover as the traumas may be, they must be resolved if you are to have any hope of achieving sobriety. I am always sad when I hear a friend or client dismiss their drinking as inexplicable with “I had a really great childhood,” or “It was just social drinking that got out of control.”. AA gets one thing wrong, in my view, consistently – alcohol is powerful, sure. That’s why we choose it to check out. But it isn’t cunning, it isn’t baffling. It’s just the perfect medicine to check out. Once you decide to check in, we work tirelessly to curate the right, relevant, and immediately effective treatment for you.

We support a vast and growing number of therapies, including, where appropriate and resonant to the client, the ceremonial administration of psychedelics. They aren’t right for everyone, and sometimes, they aren’t right, yet. For the clients who are contraindicated or resistant to psychedelic interventions, we offer a wide array of non-invasive and innovative therapies, and we work until the core underlying issues are brought to the surface, made sense of, and resolved. There’s no “we’ll cover that next time” sense of drawn out, endless talk therapy. Based entirely on you, we will help

you discover what works for you, and curate that.

When you ask about length of stay, most treatment centers answer with a version of, “as long as possible, or about a month”, which is a lazy way of saying, “whatever your insurance company will pay for.” At Kaleidoscope, because we don’t restrict ourselves to the protocol of failure (a.k.a., the useless ‘standard of care’), we’re unburdened from things like third party influences. I could still be at Passages, still traumatized and living in fear, these many years later. Had it not been for EMDR successfully extinguishing my pain, the cruel tricks of my memory halted, I could not have hoped, or even really wanted, to stop drinking.

In addition to arresting your trauma, there are a host of key elements to understanding the insights you’ve gained and determining how to integrate them into your life. We map connections to bliss – family, vocation, avocation, community – and provide master classes in the areas of your life that are screaming for transformation. We seize the moment of your newly healed consciousness, when you are flooded with perspective and insight and not yet distracted by re-entry. Before you leave, you and your sherpa will

have developed a master life plan, facilitated by experts in family, career, and various creative passions. The plan is organic and continuously changing as your needs change.

In short, we not only ensure that meaningful healing occurs, but we supercharge it with a belts and suspenders approach to maintaining all of the benefits.

As bullish as we are on radical healing approaches, we have also experienced first-hand the power of immersive sensory experiences to adjust and reset our emotions. We offer an onsite immersive showcase that literally demonstrates to clients how visuals, sounds, temperature/barometric pressure, taste and smell can instantly transform our mood. We are currently developing a bespoke version – a digital Kaleidoscope if you will – that will be delivered to clients daily, initially programmed from their responses we gleaned from them onsite, then continuously adjusted based on your unique reactions. Over time, we will integrate with vital signs and other indicators (like what's on your calendar, your local weather, your mood tracker) to deliver a daily short program each client can use in to set, or reset, their emotional frequency. Our vision is to give you a daily 'soul orgasm'.

**Aftercare? No, ForeverCare.** Finally, the deceptive “Aftercare”: most treatment centers approach aftercare like an afterthought...a referral to a local therapist or a list of local recovery meetings and yoga studios in your geography. Hastily mimeographed CBT worksheets. A goody bag of prescriptions to keep you on the pharmaceutical carousel. Most rehabs require that you sever all contact from the healers you worked with onsite. Which is fine, as too often, no actual healing has taken place. At Kaleidoscope, our attitude is a bit different. We call it “ForeverCare”.

From the very start, you are paired with a personal sherpa, and you are central to determining that pairing. Your sherpa is with you from the beginning -- while you are getting ready offsite, throughout the onsite healing -- and is your personal ‘bliss coordinator’, **forever**. Many investors have balked at this model – how can you offer unlimited personalized support, forever? Isn’t the better question, How can you *NOT*?

We provide clients a custom app, theTwist™, which provides digital content, a telehealth platform for continuing supportive care when you leave, and all of the resources and tools to help you integrate the insights from your

healing and embark on your newly minted happiness practices. We study the impact of the recommendations in the app and continuously adjust to drive greater success. Simply put, if it works for you, we do more of it; if it doesn't, we seek to understand why. We adjust constantly.

Community, connection, is essential to all we do. We've found that people experiencing radical life transformation often get as much value from their 'posse' than from any practitioner. In addition to group forums, we offer ways for our clients to forge and nurture powerful connections to their peers. It's a little extra effort to ensure that the community doesn't devolve into a half-cocked lay advice line, but we acknowledge that the power of these connections and double down fearlessly.

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If you or your loved one choose to work with a less radical orientation, we hope that our philosophy may bolster your success and refines your own evaluation. The work we do is not for the faint of heart.

Many families and alcoholics are still looking for the quick fix, the daily pill to dampen cravings which are purely emotional, the genetic marker that can be somehow

addressed. Bill calls it, the quest for “the alcoholic carwash” – one of those full-service outfits where you pay up front, drop off your vehicle, and pick it up, sparkling clean on the other side. I am sorry to report that after some 30 years of looking for just such a recovery franchise myself, it doesn’t exist. But if you have reached the end of the vine, so to speak, and are ready to embrace a new manner of living, rich with connection and purpose, we can help you twist your own kaleidoscope.

You already have nearly everything you need inside you...we will help you find the rest.

Until then, Godspeed.

## Without Warning: An Epilogue of sorts

I am still in the middle of my own story. If emotions were Crayola colors, I am pleased to report that I am able to feel mine with all of the variety held in the 64-crayon-with-built-in-sharpener-box. Even Raw Umber, lol. I am not a person who needs low points to accentuate the highs. I am a self-acknowledged hedonist. My favorite emotion is “giggly orgasm” and I can sincerely say, given my druthers, I would happily keep the dial set there, all day, every day. But I have come to understand and be curious and hold space for all my emotions. Even the ones that are dangerous to feel for very long.

As my partners and I are bringing Kaleidoscope to life, so that we can turn tens of success stories into millions, we have anticipated, and have encountered, resistance at every turn. But the enemies of the revolution can already spot the leading indicators of their own defeat. Once you have thrown off the yoke of a system intent on imprisoning you, once you find your bliss, the real addiction becomes nurturing, enriching, cherishing it. No warning labels, no labels or label-makers, no negative side effects or contraindications.

After you have encountered a radical shift in your own perspective and begun to master the flow of your own emotions, it can be tempting to reject the negative ones. I'm often annoyed *at the fact that I am annoyed*, or angry, or otherwise agitated; my own work is to remain curious about them, where they come from, which memories they attach to, where I feel their sensation in my body. My soul is whole again, and perfect in its imperfection. So, while I don't need a thunderstorm to appreciate a sunny day, I am still learning to relish the contrast in my own emotional spectrum.

New events will trigger old emotions. Fact. Even when you have experienced incalculable healing and transformation, you will still have the ability to access the pain of your past and bring it into your present. Sometimes, it's reflexive. Sometimes old emotions remind me of exactly how I used to resolve them. That isn't "my disease" beckoning, as they urged me to believe, it isn't a "pre-lapse"; it's just my history. Suicidal drinking will always be a part of my old story. The trick of it, for me, is not to judge any of it. To welcome the experiences and the memories, as they have literally made me who I am today. And then, I work to move the negative ones out of my consciousness, as my memories do not define who I will

become today.

I am also learning to lean into failing, even faster. Both for the business, where it is essential that we accept failure as part of discovering “what works for you”; we are a culture where curiosity is rewarded, and certainty is viewed with suspicion. I am also learning to anticipate and welcome failure in my own practice, soul-nourishment, and continued struggle. What worked yesterday often doesn’t work today.

Every day, I start with a routine, and perfectionist that I am, I tune into the failure points. Like life, my morning practice is just a series of interpretative exercises. I do a few digital word puzzles with my sister. She always rises ahead of me, already having won that game, then she smokes me on the mini daily crossword; I usually give up when my time clock reads 5x her score, and blame lack of coffee for my befuddlement. I don’t care how many guesses it takes me to get the Wordle, even compared to her, so long as I solve the puzzle. I’m obsessed with the unique combination of wrong guesses that eventually lead to the right word. It’s a literary kaleidoscope, its own enigma to solve. I confess I usually read my horoscope (then, for competitive insight, I read all of yours); I check

in with the phase of the moon, any upcoming celestial shenanigans, the weather, my calendar, and then, still propped up against pillows and under a comforter whose goal it is to keep me in bed, I check in with my emotions. Sometimes, I need more, sometimes, I'm moving through certain activities by rote, sometimes, as I open my correspondence, the day is off to a truly disastrous start. I adjust. Immediately. Constantly. No judgement. If it isn't working, I do something else. As silly as it may sound to you, I might pull a tarot card, throw on a song guaranteed to elevate, or even, reset the alarm and take a five-minute power nap, then begin again. This is my own routine, borne of a lot of failure, and not an invitation to set your own snooze alarm. We set about to help you discover your own path, interests, emotional enhancers. Your own version of 'giggly orgasm' is waiting to be discovered.

I believe in synchronicity, destiny, and that the signs are all there, waiting to be read, if only we allow ourselves to see them. Sometimes, they're in the windscreen, as warnings, or encouragement, or prophecy; often they're in the rearview mirror, but I can learn to recognize them faster down the road. I am beginning to believe that achieving higher consciousness has a half-life effect, and that

when we reach it, it will be only because this chapter of our struggle is at its end.

So don't be afraid of the "without warning" emotions. They aren't really "without warning" at all. I'm warning you now, they will come. Welcome them.

I've encountered a lot of challenges in my own life *after alcohol*. I've had to work through losses, fear of financial ruin, crushing disappointment, legitimate despair. But unlike the uninvited guests these negative scenarios used to be, I've created space, techniques and an outlook that supports me when I feel the universe resisting my will. Today's struggle will be different than yesterday – so my defenses are constantly adjusting. I am literally a different person than I was yesterday, and each day, I am fortified with the lessons of the previous day. Now that I know the answers are all inside me, I'm on my own timeline.

Like the family members that you love, yet fail to like; the negative emotions are yours to keep. Just don't collapse under their all-too familiar weight, don't sit in them for longer than you need to. Instead, learn to fail fast, and get ready to throw yourself a dozen ticker-tape parades a day for your triumphs through

the rough spots and beyond.

What's coming is going. It is all happening the only way it could have happened.