

# FIRST STEPS TOGETHER

FAMILIES IN RECOVERY SUPPORT

## NEWSLETTER



### THIS ISSUE: GROUPS

The [Center for the Study of Social Policy's Strengthening Families: A Protective Factor Framework](#) is backed by research and intended to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. [One of the five protective factors that families need is social connections.](#) According to CSSP's website, **"Several research studies have demonstrated that—for both mothers and fathers—high levels of emotional, informational, instrumental or spiritual support is associated with positive parental mood; positive perceptions of and responsiveness to one's children; parental satisfaction, well-being and sense of competence; and lower levels of anger, anxiety and depression...** Constructive and supportive social connections help buffer parents from stressors and support nurturing parenting behaviors that promote secure attachments in young children."



**Groups are a core component of the FIRST Steps Together program and a key tool in maintaining participants' recovery. FIRST Steps Together provides over 20 groups serving over 100 participants statewide each week. In this issue we will spotlight a group that is being held at the sites across the state.**

*I think this really gets at the heart of what we do in FIRST Steps Together. It's not just about physically or virtually bringing people together; it's about creating safe spaces and building trust for people to share their truths and build mutually supportive connections with each other.*

Clare Grace Jones  
Training/Technical Assistance Director for FIRST Steps Together  
Jewish Family & Children's Service

## GROUPS IN THE MIDST OF COVID

Isolation is a risk factor for many things, including depression and other mental health challenges. This is particularly true for those in the postpartum and early parenting periods. Isolation can also lend itself to an increased risk of relapse, especially for those navigating early recovery.

There has never been a time more isolating, for many, than this past year. We struggled to care for ourselves and each other, to pivot to online learning, and to online service provision. People were afraid for their health, their housing, their finances. People lost jobs and loved ones. All of the best practices we encourage- routine, structure, advance planning, social supports, self-care- suddenly felt out of reach.

For parents juggling multiple services, the shift to telehealth sometimes allowed for greater access and participation. Parents could dial into appointments regardless of what else they were managing at the time, and barriers like lack of transportation or child-care became less of an issue. There was a general trend towards more flexibility and a shared understanding, as service providers themselves were impacted by this new way of life.

Unfortunately, this shift also allowed people to miss appointments, get lost, fall off the radar, suffer in silence, and isolate maybe more than they should. Staying connected for many seemed harder when getting through the day, on most days, was already a lot. **As helping professionals, we know the importance of social support and connection. During the pandemic this past year, we were tasked with finding creative ways to bring people together at a time when the world was dependent on us staying physically apart.**

Groups are a foundation of our program and for good reason. In order to thrive as parents and people in recovery, we need community, accountability, and non-judgmental support. We need to feel and know that we are accepted, good enough, and loved. We need to hear from others who are walking the same path, to see that they are doing it and that it can be done. We need to be told and to come to believe that we can do it too. We need to receive and internalize the message that being a parent in recovery isn't shameful, it is a strength. This is the power of peer work. And this is the power of mutual aid groups. Groups offer an opportunity to share experience, to develop skills, and to build community. Growing a strong support system of other parents in recovery is an integral piece of establishing and maintaining long term recovery.

We want to thank all of our sites for maintaining their groups despite all the challenges this past year. For more accounts of the importance of groups and the challenges specific to maintaining connection in recovery throughout the pandemic, please visit:

[How Those in Recovery Are Staying Connected During COVID-19](#)  
[Psychology Today](#)

[8 Tips for Keeping Up With Recovery During a Pandemic](#)  
[healthline](#)



Sophia Terry, LICSW,  
Program Specialist  
Jewish Family & Children's Services

# DADS IN RECOVERY

**What** The group I co-facilitate is a **Dads in Recovery Group Peer Support (GPS)** based group. The group members can get very in depth and very open with their feelings. It is for anyone who identifies themselves as being a father – either biological or if they have step kids or if they are going to be a father then they are welcome in the group. Group members also identify themselves as being in recovery. We meet on the 4th Tuesday of every month in the evening, 6 – 7 pm.

**Why** This is a passion thing for me, I feel like fathers in general are so underserved. Especially dads in recovery. There is something about being a father that is about needing to be strong all the time so that we can't (or don't have a place to) express our feelings openly. It is nice to be around other guys who understand what we are going through and where we have been, and we see others opening up and it feels safe to open ourselves up.

It is interesting, a lot of times I see guys come in and are stone faced and don't want to get too deep with what is going on and then after they see others sharing they begin to feel more comfortable. Guys come in all hardened and in a couple of meetings they let their guard down and feel safe in sharing.

With the GPS model, the facilitator always shares first. So they see me, this big tattooed Viking, put it all right out there. I think last time I shared how I cried in the first 10 minutes of watching the movie UP. The hope is that it makes them feel more comfortable.

**Reflections** Even as a facilitator of the group it helps me out immensely. The best thing I ever gained from my recovery is the ability to be my true, honest self and allow myself to find a safe space to be vulnerable. This group is about that trust – trusting people with who I really am, and hopefully supporting others along a similar path.

Our discussion themes vary and you can sense where people are at based on their shares. Some may be having difficulty with their child's mother, DCF, parenting challenges, or not having their children around. Then you see some people get really deep. My check in question last month was "How is self-centeredness affecting your life today?" You can see where people are at based on that question. Some flipped the focus and turned it back to their kid's mother, some said it was not in their vocabulary, others dove in. Even if someone is not willing to take a look at themselves at that moment, it plants a seed that at some point, they will come back to this.

Some fathers find true connection with other dads in the group. At the end I always say I feel so connected with all the guys in the group. **The opposite of addiction is not abstinence, it is connection.**



## DADS IN RECOVERY

with Danny Rodrigues LICSW and Adam Schwamb

4TH TUESDAY | 6:00PM | VIA ZOOM

Connect with other dads who understand what it is like to raise a child while in recovery, or working towards recovery. Explore strengths and challenges with parenting while build a support network. Meets the 4th Tuesday each month via zoom (until in-person meetings can safely be resumed). Register by email: [CapeDadsGroups@gmail.com](mailto:CapeDadsGroups@gmail.com)



Sponsored by The Coalition for Children and Cape Cod Children's Place FIRST Steps Together



FIRST Steps Together is the Coordinated Family and Community Engagement (CFCE) Grant. Our organization does not discriminate on the basis of race, color, sex, gender identity, disability, religion, marital status, national origin, age, sexual orientation or any other class protected by federal, state or local law.

**Adam Schwamb**

Cape Cod Children's Place  
Family Recovery Support Specialist

# YOGA POSES & BREATHING TECHNIQUES

## What

In many residential programs, they do a morning meditation. Our FIRST Step Together participants liked that and wanted more. I started a daily yoga practice a while ago and it changed the way I felt about myself. I have continued with it every day and this practice has been a staple in my recovery. In sharing about my yoga practice with my co-workers, the idea came up to try a simple yoga group.

## How

We make sure we use the Zoom security features so that everyone feels confident that no one is just going to pop into the space unexpectedly. We are meeting only virtually currently but have been brainstorming ideas about when it might be safe to do an outdoor meditation at a park where participants can bring their babies or toddlers with them.

It is ok to come as you are, and we just kind of deal with what is happening in the moment and stick to mindfulness and simple yoga. When the group is wrapping up, I leave them with something such as setting an intention or ways to pay attention to their breathing.

## Why

It is so important in recovery to establish healthy routines. In my early recovery, I struggled with keeping a routine and sticking to things or even keeping appointments regularly. Anxiety can cause us to avoid things we do not want to deal with and then something becomes a big crisis of "Oh my gosh I missed this." It helps to find ways to divert from that behavior.

In early recovery there can be some disconnect from what you are thinking and what you are feeling. I always share the scientific evidence behind why mindfulness practices are effective in terms of the brain and body connection. Participants have said they felt a notable shift and that their anxiety has really lessened. Understanding what is happening with your body systems under stress, and then really feeling the difference after practicing some of the techniques is helpful and it is pretty profound to see these results as well.

## Reflections

Seeing the members of the group taking these skills home with them is great, even if they are able to get in five or ten minutes of doing some conscious breathing. They are beginning with this little thing, but it is an important place to start with establishing the habit and routine of taking time to breathe and check in with themselves throughout the day.

One participant said since joining the yoga group she started practicing it on her own time. She noted that she has to wake up with her baby anyway, so she is starting her day that way then moving on to things she needs to do, and her day just goes smoother. **FIRST Steps Together is all about empowerment and finding your voice and taking your power back and this just fits so well with the whole program and what we are all about.**



**FIRST STEPS TOGETHER**  
FAMILIES IN RECOVERY SUPPORT

*Yoga Poses & Breathing Techniques*

Chelsea is a Family Recovery Support Specialist with FIRST Steps. She will be taking you on a journey each week of self-discovery. She will be using yoga poses and breathing techniques to assist you in mindfulness and self-awareness in your recovery and on your personal journey.

You should dress comfortable, and have either a yoga mat or towel to spread on the floor. Please also have water available for yourself. Please remember to only do what you can do comfortably and safely, every skill may be modified to suit your personal needs. Please free to ask Chelsea questions or for help when needed.



**BEGINS THURSDAY JANUARY 28TH**

**WHEN: THURSDAYS 9:00AM - 9:45 AM**

**WHERE: ZOOM, INVITES WILL BE SENT OUT WEDNESDAYS AFTER 4:00PM**

**For more information please contact your FRSS:**

FRSS Chelsea: [cpeters@macinc.org](mailto:cpeters@macinc.org)

FRSS Caitlin: [caleary@macinc.org](mailto:caleary@macinc.org)

Peer Coordinator Alvina: [aduffy@macinc.org](mailto:aduffy@macinc.org)

\*Chelsea is not a certified Yoga Instructor

**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration



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**Chelsea Peters**  
Making Opportunity Count  
Family Recovery Support Specialist

# FAMILIES IN RECOVERY

**What** Families in Recovery meets every Wednesday from 10:30 – 11:30 am.

We talk about being in recovery and how our addiction may have impacted others, such as our family members. We discuss things that came up when we were struggling and maybe we were not able to think about who else was affected or also hurting during those times.

**How** Especially during COVID, with kids at home, it can be easy to forget so we send an extra text on the day of the group to remind everyone. We tell people they can just come to listen even if they can't talk.

As we start, I introduce myself and I love saying "You know what today is: we are taking our power back." We go around and introduce ourselves and share one thing we are thankful for that day. After the introductions, I explain what today's group will be about. I usually ask a question and we go through and discuss that topic, and at the end I ask people what they got out of it.

Yesterday was a good group. We were talking about generational curses and the group members thought about how things are passed down from grandparents to parents can be positive and/or negative. For some things we want to change, we need to take the power to end it right here with ourselves.

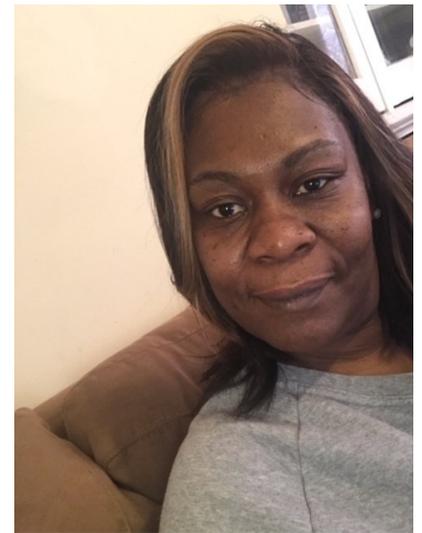
Sometimes group members are having a hard time or getting frustrated. Then another group member will share a similar experience or story and it can really help. It gives others hope and sometimes gives people the words to describe how they are feeling, and everyone feels supported. **We are not there to judge, we are there to help.**

**Why** I think this group is important because it gives a vision for some of the participants to see that "Wow, I was in my mess and I hurt a lot of people," or "I changed and now the people I hurt are the people that I am helping now. We may have put some of our loved ones through a little hurt but they forgave us and love us now."

Just showing us about how our paths can have an effect on members of our family and how our journey can reflect how our family is proud of us is part of the discussion.

**Reflections** **This is the first time I have led a group and what I tell the group every week is that I am learning more and more about myself as a result of being the facilitator. It is new and refreshing to me and what I like about it is that we are all there together telling our stories. By sharing my story, the group members may feel they can open up to me and the rest of the group, and they think to themselves "she cares about what we have been through." What you tell about your story can help others with their journey.** If I bring up a topic that someone does not yet want to talk about, they can still see how others handled it, and then think about ways that they could deal with or talk about the same situation in the future.

My biggest tip – be yourself!



**Kenyarda Dickerson**  
Family Recovery Support Specialist  
Center for Human Development

# CLAS CORNER

According to the Hazelden Betty Ford Foundation, [recovery equity](#) is “the ability for anyone and everyone to, one, access culturally responsive treatment and recovery services and, two, receive the support needed to experience healing, find freedom from substance use and mental health disorders and nurture their wellbeing.”

This is especially important when considering how to structure, promote, and implement groups. The Hazelden Betty Ford Foundation created an excellent webinar series that focuses on how to promote recovery equity. From their website:

“What can be done so individuals, families and communities everywhere and anywhere who are faced with addiction and mental health conditions have access to the help they need and deserve—in the ways that best meet their specific needs? Welcome to the [Recovery Equity Video Series](#), a space for us to reflect on hard truths, consider promising initiatives and imagine new possibilities. We hope you will join our conversations and our commitment to learn together, listen openly, appreciate diversity, amplify unheard voices, think differently, challenge the status quo and take action to effect change.”

Most of the videos range from 15-25 minutes. We definitely recommend checking them out.

[Recovery Equity Video Series | Hazelden Betty Ford](#)

 <p>26:01</p> <p><b>Are We Ready to Talk about Recovery Equity?</b></p> <p>First, let's get some definitions in place, starting with privilege, intersectionality, historical trauma and non-stigmatizing language.</p> <p><a href="#">WATCH &gt;&gt; ARE WE READY</a></p>	 <p>15:35</p> <p><b>Treatment Access: How Culture Opens the Door</b></p> <p>What do effective, culturally specific behavioral health services look like? The people they serve. Hear how culture connects people to healing.</p> <p><a href="#">WATCH &gt;&gt; TREATMENT ACCESS</a></p>	 <p>17:49</p> <p><b>How Racism and Trauma Impact Youth Mental Health</b></p> <p>Neglect and abuse in childhood are strongly linked to poor health outcomes later in life. Racism and community trauma pose similar risks.</p> <p><a href="#">WATCH &gt;&gt; YOUTH TRAUMA</a></p>
 <p>15:20</p> <p><b>Cultural Humility: A Practice of Self-Reflection</b></p> <p>With no harm intended, we're all capable of perpetuating racist, sexist or classist behavior in our interactions. How to tell? How to change?</p> <p><a href="#">WATCH &gt;&gt; CULTURAL HUMILITY</a></p>	 <p>25:31</p> <p><b>Empowering Recovery: Detroit's Homegrown Success</b></p> <p>How has the peer-led Detroit Recovery Project become such a beacon of hope and healing for the community? By meeting people where they are.</p> <p><a href="#">WATCH &gt;&gt; EMPOWERING RECOVERY</a></p>	

# INFERTILITY AWARENESS WEEK

Trigger Warning (TW): Infertility and Miscarriage

This year, the Center for Disease Control (CDC) has established April 23-29 as [National Infertility Awareness Week](#). I first became immersed in the world of infertility in 2017. After a year of trying to conceive, I was finally diagnosed with polycystic ovary syndrome (PCOS), and eventually used fertility treatment to conceive my daughter, who will be two this year. In May of 2020 I conceived on my own but lost the baby at 10 weeks and required a dilation and curettage procedure (D&C). I conceived with treatment in November and made it to 13 weeks, but our daughter had a genetic issue that caused me to miscarry again, which required another D&C. Additional complications from back-to-back miscarriages required me to have two additional surgeries in early 2021.

In the wake of all of this, I struggled with my mental health in a huge way, and as someone who abstains from opioid use, being offered pain medication four times in nine months was hard. While on my personal infertility journey, I have thought a lot about how amplified the mental and physical pain of infertility and pregnancy loss is when you are struggling with substance use or mental health. As providers working with pregnant and parenting women, infertility is something that most of us are somewhat familiar with, but in our specific field, it is not well understood. Recent statistics from the CDC note that in the United States, 1 in 8 women experience infertility, 1 in 4 women experience pregnancy loss, and 20 million adults have a substance use disorder. It is impossible that there is no overlap, yet there is almost no research regarding the relationship between the two.

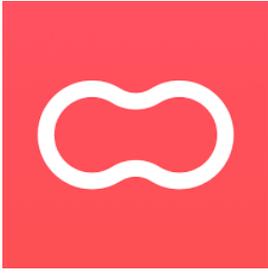
At Bay State Community Services, we have recently seen an increase in moms who have used in vitro fertilization (IVF) or other treatment to conceive, and many more who share with us that they have had a loss. One participant who underwent IVF, and subsequently relapsed during her pregnancy, states that “The number one reaction I got when people found out I was using and it was an IVF pregnancy was shock and judgment. How could I do this to a baby I wanted so badly and worked so hard for? I felt looked down on by my doctors and even by the other pregnant moms in my Alcoholics Anonymous (AA) group.” Infertility is isolating as it is, but the lack of support felt by this participant, and many others in spaces meant to lift them up is disheartening. Although we’ve made strides in compassion for pregnant women who use substances, women who struggle to achieve pregnancy in the first place are being left out of the conversation.

From my personal experience (since we are lacking in research), I would argue that women who struggle with substance use and infertility likely have similar, if not higher rates of relapse in pregnancy. The combination of artificial hormones, invasive procedures, physical pain, grief, and the time and effort that goes into conception is daunting on my most positive day. Those feelings certainly didn’t disappear any time I have been pregnant. Infertile moms in recovery deserve research, understanding and support. This fertility awareness week, I encourage you to look into resources, talk to someone going through infertility, and be a safe place for your participants to share their fertility stories.



**Madeline Tarbox**  
Clinical Supervisor  
Bay State Community Services

## RESOURCES



### [Peanut](#)

*Peanut is a social networking app to meet, chat and learn from like-minded women. We provide a safe space for mothers, expectant mothers and those trying to conceive to build friendships, ask questions and find support.*



### [RESOLVE: The National Infertility Association](#)

*We believe all people challenged in their family building journey should reach their resolution by being empowered by knowledge, supported by community, united by advocacy, and inspired to act.*



### [The Birth Hour Podcast](#)

*The Birth Hour is not only a place for sharing birth stories but also pregnancy and postpartum struggles, triumphs and resources.*

**I am  
1 in 8**

national  
infertility  
awareness  
week®

#NIAW2021  
#WhatIWantYouToKnow  
April 18-24, 2021



**[Empty Arms Bereavement Support](#)** serves individuals and families in Western Massachusetts whose babies have died through miscarriage, stillbirth, or early infant death. By cultivating personal connections, creating a compassionate community, and fostering professional collaborations, we provide grieving parents with valuable resources and validation as they navigate the murky days, weeks, and lifetime without their baby. **Empty Arms offers Group Peer Support (GPS) style groups.**

# TIPS FOR RUNNING SUCCESSFUL VIRTUAL GROUPS

## Nicole Walden

Family Recovery Support Specialist, Center for Human Development

**Doing a fun check in question always help set the tone for how the group will go. It helps lighten the mood and get members engaged with each other.** Here are some examples:

- If you could travel anywhere, where would it be and why?
- If you could be one superhero, who would it be and why?
- Weather forecast on how you are feeling today.
- If you were stranded on an island, what are 3 things you would want to have with you?
- If you could sit in your peaceful place and have one person sit with you, who would it be?
- If you could choose an age to be forever, what age would it be and why?

## Jennifer Hinton

Family Recovery Support Specialist, Center for Human Development

**At the end of the group I check in with everyone attending to be sure everyone is alright.** I do this due to the nature of some of our discussion that can be upsetting to members. I always advise them to reach out to their clinician or FRSS if they need to talk privately. It's sometimes hard to tell on Zoom if everyone is feeling safe.

## Mori Boudreau

Program Supervisor, Making Opportunity Count

We, like many other teams, **have a system so that no matter who is running group, the outline looks the same, even though each person running the group brings their own individuality.** We do introductions every meeting, then we do a group wide ice breaker. We have lists of ice breaker ideas. If anyone shows up late we make sure to acknowledge them and introduce them as well. We introduce the topic and invite all group members to share. We allow space and time. **We do reach out to individuals that may have had an emotional or troubling time during group** and notify their FRSS and clinician. We always also make sure to let everyone know that their FRSS and clinician are available to them if groups brought up any feelings or emotions. We also are sure to end with a thoughtful closing. We allow clients to share ideas and thoughts with each other as well if it is not a specific GPS group.

## Melanie Bilodeau

Family Recovery Support Specialist, Center for Human Development

**I think groups are meant to be fun.** For example, I was doing a check in with my members and I asked them to describe how they were feeling today by asking "What kind of candy bar are you feeling like today?" The answers were pretty funny! It was a great opening to make members smile and laugh. I have also asked members to **close a group by sharing a song that has helped them in their recovery. If they choose to they can share their song at the end of a group and that is fun and lets other members see that, as humans, we are real. Being real is the best recovery anyone can do for themselves.**

# PARENTING JOURNEY IN RECOVERY

## What

I facilitate a [Parenting Journey in Recovery](#) group, which is a 14-week program, with one of our clinicians, Lucy. We have asked participants to commit to the full 14 weeks in order to build connection and feeling of safety within the group. After the first three weeks, we close the group to any new people joining so that it is the same women for the rest of the time together. We meet on Thursdays from 10-12 pm. We have nine participants, which is a nice sized group. I love using a dual facilitation model with Lucy. My role as a person in recovery is to do the activities and model by first sharing my reflections on the question and topic we are discussing. Lucy, as a clinician, may have some different awareness and feedback than I, and that makes for a nice balance. Lucy also handles the technical side of managing the Zoom room and does a wonderful meditation for all of us as well.

## How

What I love about this program is the structure. It starts out planting that seed or awareness about parenting in recovery and how we, ourselves, were parented. It is really taking a look at that and how some of those traits were brought forward to our own parenting. I like how the curriculum builds. The first few sessions are about trust with honesty, and then building on that trust and honesty, and then who we are right now. We focus on getting stronger. One exercise is writing a letter to our addiction and really building an awareness on what our addiction has taken from or given us. We have a “pass rule” because very intimate things are being shared and having an option to pass creates and supports that safe container for everyone. Last week we talked about secrets and fears in recovery. Lots of moms have shame and guilt and I think it is a wonderful opportunity for moms in recovery to know that they are not alone. Most of the moms in our group are involved with DCF and many have lost custody of children with some in the process of working toward reunification. When we know better, we do better, and when we bring awareness about how the past affects the present, we can start to stretch ourselves around making progress toward our goals and also build each other up.

## Reflections

We, of course, discuss all of the challenges people are facing but we always start out with sharing about our week and I have noticed that many choose to share about positive things that are happening. **The group is women really opening up to each other's stories and then being able to recognize and share those successes with each other. I wish something like this had been around when my children were young.**

The group is really building connection and that is what I love most. The moms are already talking about continuing to meet outside of the group and that is the outcome I would like to see – building relationships with other moms in recovery, building awareness with themselves and their children and building community and connection.



**Julia Brachanow**  
Family Recovery Support Specialist  
Jewish Family & Children's Service

Center for Early Relationship Support<sup>®</sup> Caring for Generations  
Project NESST™ JF&CS  
Jewish Family & Children's Service

### Join our Parenting Journey in Recovery Group!

- Engage in a structured small group with activities and discussions in a supportive environment.
  - Build strong positive relationships with your children.
  - Discuss recovery, communication skills, and managing emotions in a safe and caring setting.
  - Build a network of parents working to be the best parents they can be.
- This group is FREE and meets for 14 weeks on Thursdays from 10 a.m. - 12 p.m. starting February 4, 2021. Upon completion of the group, you will receive a Certificate of Completion and a gift card!



Date: February 4 - May 6, 2021  
Time: 10:00 a.m. - 12:00 p.m.  
Location: Online, via Zoom video conferencing



For more information and to complete an intake, please  
contact Lucy Fisher, LCSW at 781-227-7367 or [lfisher@jfcaboston.org](mailto:lfisher@jfcaboston.org).

Joining us | 781-847-8122 | See Our Events | [Facebook](#) | [Twitter](#) | [LinkedIn](#) | [YouTube](#) | [Instagram](#)  
Waltham | Hingham | Hingham | Canton | Central MA | North Shore

# FIRST STEPS FIRST

## **What**

FIRST Steps First is a group where newer participants can hear from people who have completed the program. We started it wanting to do a women's empowerment group, with our main goal to bring in those who graduated and keep them engaged. We felt like we needed to find a way to avoid just breaking ties with people who are graduating. Former clients, current clients and those who are planning to enroll are included. It is a great way for new clients to start to participate and this works as an extension of our outreach and engagement. We meet on the last Wednesday of the month from 10:30-11:30.

## **How**

The FRSS staff rotate as facilitators and each time we will include sharing time from a former participant. We also do polls with the group participants to get their input on things like the name of the group and what time is best for them to meet.

We support the alumni guest speakers to share what they are comfortable with. We will do a Zoom session prior to the meeting date to brainstorm suggestions of things they could touch on. Things like how they found FIRST Steps Together, what was helpful about the program or what could we have done differently.

We would like, as the group grows, for it to happen weekly with a different theme and we can engage all in our catchment area through different ways. We want to start a second group like a walking club next. We have all of these new moms in early recovery and they feel isolated. Having these options creates an easy way for moms to connect with other moms and to be able to lean on each other.

## **Why**

The main goal of the FIRST Steps First group is to provide a way for graduated participants to stay engaged with our program and to connect them to the newer participants. As a FRSS, I was finding it a challenge to work through next steps with those who were completing the program. Having this group helps with this transition and is a way for participants who have met their goals to stay involved. Alumni can continue to get support as well as help others.

## **Reflections**

The first alumni mom who shared her story said coming back to talk with our group reminded her of how far she has come and inspired her in continuing the work to maintain her recovery.

This has felt successful from the beginning! We all get a huge energy boost from this group. It is a beautiful piece of the puzzle. I used to dread graduation as we are so highly involved in these participant's lives and then we were not. Now they graduate and are part of this group to help other moms. Everyone has a different style and alumni can talk to the current participants about what worked for them, what did not work for them, and what they needed support with. This has also been a great way for our site to get feedback in order to refine or change the service we are providing.



**Kristen Moore**

Bay State Community Services  
Family Recovery Support Specialist

# MOMS IN RECOVERY

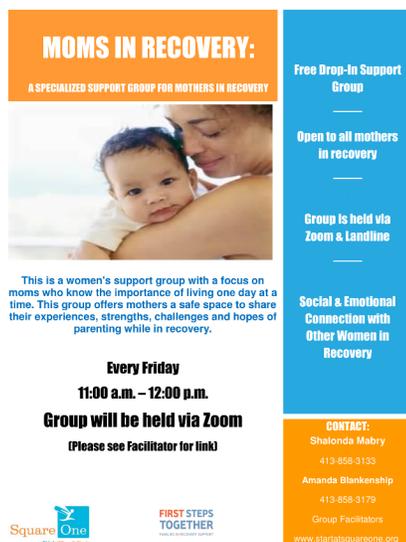
**What** The group has always been called Moms in Recovery, long before I joined. It started over ten years ago and evolved with staff and volunteers co-facilitating it. The group is open to the public to engage the community that needs it. We encourage people to bring along others who might want to join us. In our current virtual format, we meet on Fridays from 11 to 12. When we were able to meet in person, we provided food and local restaurants donated pizza, bagels, or other snacks. When in person, we start a half hour earlier for some social interaction time and food and then people can settle into the meeting.

**How** I start out by introducing myself and then share a topic-based reading, sometimes from Narcotics Anonymous. We follow the Group Peer Support (GPS) model using realities and principles that relate to the topic and then participants reflect on the topic and share whatever they would like to. I share first and often another co-worker may also share to get things started. We leave it open, you can share about whatever you want, you don't have to follow the topic. Some people just want to share if their week was good or bad. We like to do the announcements about upcoming events at the end in case someone joins late. I will also stay later if anyone wants to continue to connect or talk.

**Tips** I have found that you can prepare as much as you want, yet sometimes participants will take the meeting in a different direction and you just need to run with it. Give yourself a place to focus and start there but understand that the group may want to branch off of the topic in their own way. It is fine to adapt and recognize that and also good to remember that everyone there may not be in the same place in terms of values, faith, or where they are in their recovery. Be flexible!

**Why** Our group is effective because it is low-key and advice free. A lot of moms have had bad group experiences in the past where they were not comfortable. I feel like our style of group is welcoming, without judgement and open. It is refreshing, relaxed and confidential. People have the opportunity to talk but they can pass if they like or share as little or as much as they like. We want it to be a space for them to talk about whatever it is that they are feeling. The main thing is that we want women who attend our group to feel safe.

**Reflections** **It is really nice when I get to sit back and watch or listen to the women develop their own community with each other.** Some attendees have been really anxious before their birth and other people in the group have lifted them up and reflected back to them how much work they have done to prepare, including getting their binders and Plans of Safe Care in place. **Moms in Recovery allows the women to develop a relationship-based foundation for support in recovery. Because you can't do it alone.**



**MOMS IN RECOVERY:**  
A SPECIALIZED SUPPORT GROUP FOR MOTHERS IN RECOVERY

Free Drop-In Support Group  
Open to all mothers in recovery  
Group is held via Zoom & Landline  
Social & Emotional Connection with Other Women in Recovery

CONTACT:  
Shalonda Mabry  
413-858-3133  
Amanda Blankenship  
413-858-3179  
Group Facilitators  
www.startatsquareone.org

Every Friday  
11:00 a.m. – 12:00 p.m.  
Group will be held via Zoom  
(Please see Facilitator for link)

This is a women's support group with a focus on moms who know the importance of living one day at a time. This group offers mothers a safe space to share their experiences, strengths, challenges and hopes of parenting while in recovery.

Square One  
FIRST STEPS TOGETHER

**Amanda Kelley**  
Family Recovery Support Specialist  
Square One

# RECOVERY WELLNESS

## What

Groups have always made me nervous. I remember the first group I was a part of when I first started my position as a FRSS and I was so nervous. I could not even talk and sat there very quietly not knowing what to do. But that was a while ago! In my own growth over the last year and a half, and also with the help of taking the Group Peer Support (GPS) Training course for running a group and practicing, I can say I'm getting there. I am realizing that groups are not only a big learning and sharing experience for our members, but I also am learning. Groups have expanded my view of the recovery work that we provide to our members. Facilitating a group has also strengthened my own personal recovery and has brought out more of my own self-esteem, even though I have been in recovery for eleven years. When I am running a group, I am learning more about myself each week right alongside of each of my members--who knew that would happen? And when I share my experiences in a group with my members, I like the fact that it helps show them that change is possible.

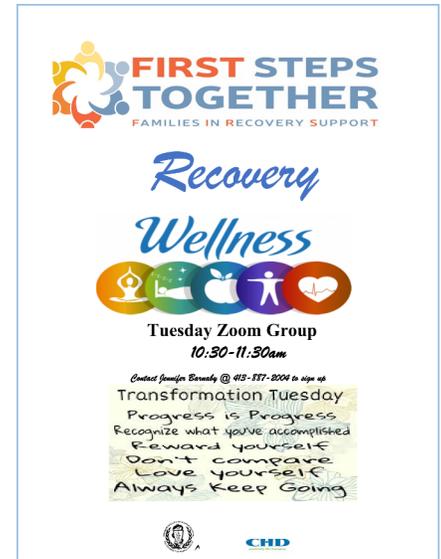
## How

I chose Friday afternoon to run my Recovery Group so that members could have a little extra support facing their weekend coming up when we are not available to assist them. It really seems to help to be able to talk about if they are feeling any triggers or stressors that they may be facing with the upcoming weekend or holidays that fall on a weekend.

In addition to the GPS group, I am running a Recovery Relapse group with our clinician Heather. We are using a book by Paula A. Freedman called, *The Addiction Recovery Workbook: Powerful Skills for Preventing Relapse Every Day*. This workbook is amazing. It identifies that humans are complicated and with being complicated, we have trouble looking at the whole picture of recovery and addiction. This workbook helps us to address all aspects of a person's life in recovery, their history of trauma, experiences of grief and loss, disordered eating, chronic pain, job dissatisfaction, family tension, stressors and depression. I like the fact that in many parts of each chapter in this book it does not declare that relapse is a failure, but it builds a person up.

So right now, in our Friday group we are identifying the six stages of change: Precontemplation, Contemplation, Preparation, Action, Maintenance, and Termination. We are not rushing through each stage and only address two stages each week, reading the chapter and sharing experiences. I personally love this part about doing a group. It makes everyone in the group, members and facilitators and coworkers, feel they are not alone in their recovery. Group members benefit when someone else shares their experiences and how they got through it and it makes them say to themselves, "I can do this too!!!"

*continued on next page*



**Melanie A. Bilodeau**

Center for Human Development  
Family Recovery Support Specialist

## Reflections

One day one of our participants was having a horrible week and a horrible day and she came and joined our group. She talked about what was going on, including showing other members through her tears that she was hurting and needed support. The other people who were in the group that day, some of which this member had never met before and were strangers on a screen that day to her, built her up. They gave her inspiration to keep fighting and to not give up on herself or give up on her sobriety. After the group that day, the clinician was able to personally reach out to her and supported her in staying focused and helped her with a safety plan. That is what we do. We help, we teach, and we learn.

I love the fact that I'm learning and I'm helping our members stay sober. It's the baby steps that count for everyone. Groups, to me, are a weekly classroom where we learn. Yup and there are times we are going to fumble running them. We get lost in our words, or sometimes even lose track of the subject, but by using groups we are teaching each other how to be better parents, how to stay sober, self-care in our recovery and how to be in recovery when we have a family that we need to take care of.

My best tip for running a group is don't give up even when you are nervous.

***FIRST Steps Together** is a home visiting program that offers community based and/or virtual services, delivered by a parent in recovery with training to support both recovery and parenting journeys. We also offer groups, care coordination, and the option of working with a mental health counselor. FIRST Steps Together is open to any person 18 years old or older, who has used opioids and/or stimulants, and who is pregnant or expecting a child, or has at least one child who is 5 years old or younger. Participants do not have to have custody of their children or be actively parenting.*

*For more information about our program, including contact information for each program site, please visit*

[\*\*mass.gov/FIRST-Steps-Together\*\*](https://mass.gov/FIRST-Steps-Together)

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# FIRST STEPS TOGETHER

FAMILIES IN RECOVERY SUPPORT

**MARCH/APRIL**

**2021**

**For more information:**

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