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**Principles of The Twelve Steps**

Step #	Principle of that step
1.	Honesty
2.	Hope
3.	Faith
4.	Courage
5.	Integrity
6.	Willingness
7.	Humility
8.	Brotherly Love
9.	Discipline
10.	Perseverance
11.	Awareness of God
12.	Service

**"The principles we have set down are a guide for progress..."**

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HOPE sees the invisible, feels the intangible, and achieves the impossible.



Treatment Newsletter

# HOPE FOR TOMORROW, INC.

Our mission is to professionally, ethically, and empathically incorporate evidenced-based substance abuse treatment so our clientele become empowered to transform their lives, whereby permanently integrating into society as productive, responsible, law-abiding, substance-free citizens in their community.

Hope for Tomorrow "Rebuilds Shattered Lives, Restores Hope to the Hopeless, Strengthens Broken Families & Makes Illinois Communities

A Safer Place to Live".



**Real Life-Changing Testimonials**

Hope for Tomorrow, Inc. client shares how their life has changed.

With the help of Hope for Tomorrow (HFT) had to offer me, I now have a new sense of being...re-connected with my family...been able to maintain my finances, face my problems, and most importantly, I've stayed sober. Before HFT, I didn't know how to live without the use of drugs and alcohol. Today, I can't comprehend how I managed to live with them...I now bring love, compassion, trust, respect, and a helping hand to the table wherever I go...I have a new relationship with myself today. I truly believe that I was looking to be accepted in this world when I turned to alcohol and drugs. As soon as I started to use and drink, I found myself around lots of people. I enjoyed the feeling of acceptance, and I continued to use. When difficult times arose, and I had nothing to offer, I found myself with only myself for company. Everyone that I believed cared about me was gone because I had nothing to offer, or they had nothing to offer me. I knew at that moment that I needed help.

Today, the company that I have is people who share a common story with me, and the friendships I have today are without selfishness. I just want to thank HFT for giving me this new outlook on life, and every tool that I could ever ask for to maintain my sobriety.



From a HFT graduate...

"My life has changed for the better in almost every way possible...before coming into HFT, I could not even make it a few minutes/hours without using...today, I have over 4 1/2 years of uninterrupted sobriety...I have real relationships, including a strong relationship with God...HFT helped me realize that a strong foundation of recovery and support must be built in order to achieve a well-balanced life".

**HFT PROVIDES THE FOLLOWING SERVICES**

- IDHS/SUPR Licensed Level I & Level II (IOP) Treatment for Substance Use Disorders with Adolescents and Adults
- DUI Evaluations & DUI Remedial Education
- Early Intervention & Prevention Education
- Alcohol, Drug & Gambling Interventions
- Men's IDHS/SUPR Licensed Recovery Homes for 23 civilian men
- Opportunity House: A IDHS/SUPR Licensed Transitional Recovery Home for 14 Homeless Veterans
- Certified Pathological Gambling Counseling



**WE'LL SHOW YOU HOW TO BREAK THE CHAINS OF ADDICTION FOR GOOD.**



From the President's Desk: Jeffrey Gilbert, MA, CADC, PCGC, CODP I

## Paradigm Shift on Addiction = Increased Recovery Prognosis

What is a paradigm shift? Stephen Covey (1989), in his book, "7 Habits of Highly Successful People" describes paradigms as the lenses through which we view the world. Paradigms are useful in many ways. However, sometimes our paradigm is not an accurate assessment of reality, as it is also shaped by our attitudes. When this occurs our personal paradigm becomes dysfunctional and caustic. This is especially true for someone addicted to mood-altering substances (e.g. alcohol and drugs). For someone struggling with an addiction, the relationship between the user and their drug of choice is extremely powerful. In fact, it is likely the most intimate relationship the user has ever experienced. Think about it. You and your drug of choice have been together for years, possibly decades. You've shared good times and bad times together, and your drug of choice has always been there to comfort you and console you. As in any bad relationship, the further away we get from the relationship, we have the tendency to minimize the bad times and amplify the good times. As time goes on, the bad times become hard to remember. Pretty soon, our paradigm starts to think the relationship was okay—maybe even good. But, it wasn't. The truth being told, the relationship only produced losses: loss of jobs, loss of family, loss of finances, loss of health, loss of freedom, loss of goals, loss of self-respect, loss of dignity, loss of humility, loss of faith; loss of hope, and loss of the desire/will to live.

The good news is...there is a way to transform a dysfunctional paradigm into a positive paradigm and fully recover from even the worst addiction. I am living proof of this. Ask yourself this question...if your addiction was a significant other, that has caused you as much pain, turmoil, loss, heartache, and other problems that your addiction has caused you, would you still be with that person? Everyone I have asked that question to has replied, "No, I would have broken off from that person a long time ago". Well, what's the difference? You need to see your addiction for exactly what it is! It is not your friend, your lover, or your soul mate. It is the root of all your problems, and you must divorce it in order to survive. For me, I keep my last run very close in my memory. It had stopped being fun 10 years before I stopped, and if I ever forget that, my recovery could be in jeopardy. So, for me, that just isn't an option—period! I call my addiction "slick" because slick is real slick. Slick is also a pathological liar, so I make a conscious decision not to listen to what slick has to say. I see slick for what it is—total destruction. Slick isn't my friend. Slick's primary objective is to destroy me, my life, and everyone and everything that's important to me. This will not change—no matter what slick tells me. Your slick is out to destroy you too!

Total recovery is attainable for everyone—yes everyone! In order to achieve this goal, we must never forget that slick is a boldfaced liar. We also must not forget the feelings of terror, bewilderment, hopelessness, and despair in our final days of addiction. Actually, I encourage you to keep them real close. We must see the addiction for what it is and make the decision to divorce slick forever. Finally, we must "build our life around our recovery instead of building our recovery around our life".® Since Hope for Tomorrow's inception, in 1999, I've received thousands of calls from people seeking help out of the deep, dark, depths of despair. I can honestly tell you that nobody—not one person—has ever called me to tell me how much fun they were having getting drunk, getting high, or facing the consequences of slick. Every call has been the same...I desperately need help, slick is destroying my life, my families life, and I feel hopelessly lost. I tell them they can recover, and we can show them how. Live life to its fullest, but live life in recovery. Jeremiah 29:11 says, "I know the plans I have for you, to give you a future and a hope, says the Lord". Give you a future and a hope; Hope for Tomorrow.

A Recent Graduate of HFT's Recovery Home Program

Admit Date: November 14, 2016

Graduation Date: September 21, 2019 (1,041 days)

Q: How has your life changed since coming into Hope for Tomorrow (HFT)? What differences do you see in yourself and what differences do others see in you?

Response (R): "When first coming into HFT, I was completely hopeless. I had no job, no driver's license (DL), no car, no nothing. I put the Twelve Steps before anything and in that process things started falling in place. Life is not hard if I'm not chasing the high. Honesty, integrity, compassion, and leadership are just a few of the things that others have noticed".

Q: In what ways has HFT assisted you in "Building your life around your recovery"®?

R: "I had no structure. HFT provided rules and commitments. Having to be held accountable to these things helped me establish a daily routine...doing positive things. I had to find a first shift job that allowed me to build my life around my recovery instead of building my recovery around my life".

Q: What does "Building your life around recovery instead of building your recovery around my life."® mean to you today?

R: "For me, it's pretty simple. The Twelve Steps must be worked. They become paramount to everything else. This is my way of life if I want to continue success. When I put anything in front of my recovery things get complicated".

Q: Describe, in detail for each of the areas, how your legal, financial, occupational, relational, spiritual, and any other complications have improved.

R:

Legal—"I came to HFT on parole with a crap load of fines (\$4,700), no DL for ten years. I completed my parole early and also got my DL within 8 months being here by working a basic \$10/hour job, so it can be done.

Financial—I came to HFT with \$40 and a garbage bag of clothes. I worked hard everyday and being grateful most of the time has me in a comfortable position but there is still a ton of room for improvements.

Occupational—I have a job that I started at the bottom. But, living a life of recovery, I moved up quickly and now have more responsibility than I care for, but I'm grateful and still have room for improvement.

Relational—...today, I have true friends. I've learned to be more compassionate and trusting.

Spiritual—I was spiritually bankrupt upon arrival but now my life is full and happy. I have a great personal relationship with my Higher Power that I bounce all kinds of ideas off of, and I enjoy helping others in recovery.

Other (paraphrased) —During my time at HFT, I saw many people come and go...the ones that made it worked HFT's program, as well as the Steps, as they go hand-in-hand...I already miss the camaraderie in the house...grateful HFT and you people were here to help get my life back together...I am completely happy and grateful for where I am today.

Thank you"

## “ Building Lives Around Recovery Instead of Building Recovery Around Lives”®

Hope for Tomorrow’s philosophy is that in order to recover from any overpowering or high-risk disorder(s) (e.g. alcohol, drugs, eating, gambling, pornography, internet, spending, sex, self-mutilation) the afflicted person must “Build their life around their recovery instead of building their recovery around their life”®. To this end, everything a recovering person does (from occupational goals, recreational and leisure goals, relational goals, spiritual goals) — including what music they listen to, what television shows they watch, who their friends are, and what foods they eat — must not take precedence over their recovery goals.

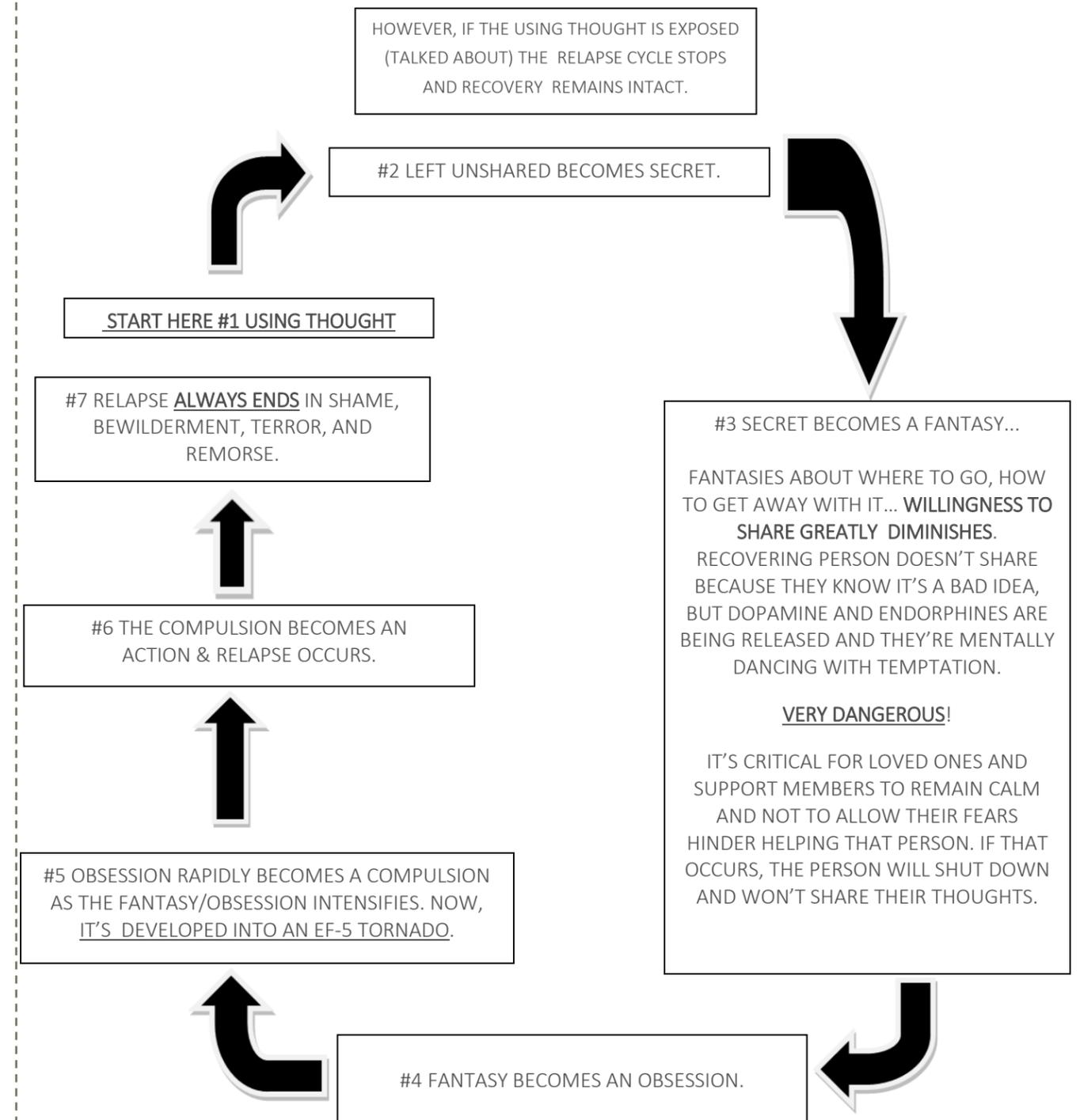


I hear that some counselors are telling clients, “look to your left then look to your right, 8 out of 10 of you are going to relapse (fail)”. Now, look at this, ONE HUNDRED PERCENT OF PEOPLE STRUGGLING WITH AN ADDICTION CAN FULLY RECOVER FROM THAT ADDICTION—YES, FULLY RECOVER—100%. That means you can, the person sitting next to you, as well as ALL THE OTHERS SEEKING TO RECOVER CAN FULLY RECOVER. IT’S REALLY THAT SIMPLE!

However, you have to want recovery, and you have to live your recovery. The only reason that it sounds harder than it really is, is because it’s unknown to you. You either never have lived a recovery lifestyle or it’s been so long you question if you’re too far gone. That is SLICK TALKING TO YOU (go back to my article that discuss SLICK). The truth being told, Recovery is a much easier, softer way of life than addiction. As you progress through the Twelve Steps, you will grow spiritually, you will learn to like, then love, the person looking back at you in the mirror. I encourage everyone to develop an attitude of gratitude, and remember a phrase that a mentor of mine coined, “Attitude can turn adversity into assets” (Henry Tews, 1934-2015). You can do this—really.

## The 7 Stages of Relapse (for any addiction)

Developed by Jeff Gilbert, MA, CADC, PCGC, CODP I



## Recovery Home Program Requirements

### What is the difference between a Halfway House & a Recovery Home?

In short, a Halfway House (HH) is residential treatment with a job. You go to work Monday-Friday and return to the HH at 5:00-6:00 pm for dinner with the other residents, along with group counseling 3-4 times a week. You are assigned an addiction counselor, complete treatment plans, and may have lights out at a designated time. Recovery Homes (RH), by definition, are “peer-led sober living environments whose rules and structure are geared toward the maintenance of recovery”. If we look at HH’s as 4/8th’s and RH’s (also known as 3/4 Houses, as 6/8th’s, Hope for Tomorrow RH Programs are 5/8th’s. They are more structured than normal 3/4 Houses, but not as structured as a HH. They are peer-led but clinically-directed and clinically-managed.

### Do I need to work?

Yes, RH resident’s must secure and maintain legitimate and gainful employment with 7-10 days of admission. Unemployed residents must be out of the house between 8:00 a.m. and 4:30 p.m. actively seeking full-time employment. Resident’s are expected to fill out 10-12 job applications per day. Hope for Tomorrow also has business contacts with employers that like hiring our residents’ Why? Because many employers recognize the fact that when a once this employee gets clean and sober, in more cases than not, they become the employer’s top employee.

### What are the fees to stay in the RH and are there limitations on how long I reside in the RH?

The weekly fees for the RH are \$154, plus \$10 for a weekly 90 minute counseling group. We require a minimal 6-month residency commitment—but we very strongly recommend a longer length of stay (18-24 months). There is no maximum length of stay. In other words, resident’s may remain in the RH indefinitely, as long as they are obeying our policies and benefitting from being in the RH. The best post-discharge outcomes come from former residents that stayed in the RH’s for 18-30 months. These are the alumni that now have multiple years of uninterrupted sobriety (e.g. 5, 10, 15+ years).

### How do I get on the waiting list?

Our clinical team holds an open orientation assessment every Tuesday (with the exception of holidays) at 1:30 p.m. Interested applicants are welcome to attend the orientation. You should bring the results of a “recent” TB skin test, a bio/psycho/social assessment (from your counselor, if in treatment), and your driver’s license or State ID card. The orientation is held at our office, which is located at 479 N. Lake Street, Aurora, Illinois 60506. Applicants must first attend the orientation in order to be placed on our waiting list. Applicants, on the waiting list MUST call in on Monday’s & Thursday’s to remain on the waiting list.

### What about random alcohol and drug screenings?

Yes, our clinical team conducts random alcohol and drug screenings on all residents. Once a resident is asked to submit to a random test, they must produce in a reasonable (as determined by the clinical staff) amount of time (e.g. immediately—30 minutes). If someone cannot produce, the test will be deemed positive for mood-altering substances and the resident could face immediate discharge or referral to a higher level of care.

### Where are the RH’s?

All 4 RH’s are located on the west side of Aurora, close to public transportation, jobs, support groups, shopping, and other necessities required for success. For safety and confidentiality, we do not disclose the addresses of the homes to applicants or outside inquiries.

### How many men are in a RH?

The 3 civilian RH’s (combined) house 23 men (8, 8, and 7). Most of the bedrooms are doubles (2 twin beds, nightstand, dressers, and closet). There are a few single rooms that are occupied by senior residents (stay sober and follow the policies and one could be yours). The homeless veterans RH has 14 beds.

### Phases and curfew:

Hope for Tomorrow’s RH program utilizes a 3 Phase System that rewards residents for their progress throughout recovery.

Phase 1—Every new resident enters the RH in Phase 1. Phase 1 curfew is 10:00 p.m. and residents cannot leave the RH before 4:30 a.m. Overnight passes are not allowed for Phase 1 residents.

Phase 2—As a resident advances in their recovery, they can meet with the clinical team and request permission to submit a Phase Advancement Request. If approved, Phase 2 curfew is 11:00 p.m., and Phase 2 residents are allowed two overnight passes per month. Also, Phase 2 and Phase 3 residents cannot leave the RH before 4:30 a.m.

Phase 3—As a resident continues to advance in their recovery, they can apply for Phase 3. Phase 3 curfew is midnight and Phase 3 residents are allowed three overnight passes per month.

There is no curfew later than midnight. Why...because we all know nothing good happens after midnight.

### Can I have visitors at the RH?

Yes, with restrictions. Visitors are restricted to the 1st floor general living areas and are not allowed in any bedrooms. We strongly suggest that significant others limit their time at the RH. Other visitor policies are in place. Once an applicant is approved, at check-in, a detailed policy manual will be given to new residents.

### Can I bring a vehicle on property?

Yes, if a resident has a valid driver’s license, proof of insurance, and current registration, they can bring a vehicle on property. Resident’s that do not have a valid driver’s license are not allowed to drive a vehicle on or off property and will be immediately discharged if they are caught driving.

### State, local, and federal laws:

Without exception, all Hope for Tomorrow residents must obey all state, local, and federal laws.

### Weapons (of any kind):

Absolutely not! No weapons—of any kind—are allowed in the RH’s.

### Can I smoke?

Smoking is allowed in designated areas—outside—of the RH. There is no smoking inside the RH. Also, electronic cigarettes, vaporizers, and the like are not allowed on property. Any resident violating this policy will be immediately discharged.

### What are house chores?

Each resident will be assigned a “DAILY” house chore. Chores must be completed no later than 9:00 a.m. Everyday (Monday—Sunday). Having said that, any resident that leaves the RH for work or an appointment before 9:00 a.m. must have their bed made, bedroom clean and organized, and their chore completed before they leave the house.

### What amenities does the RH have?

Every RH has cable, internet, Wi-Fi, and a washer/dryer.

### What are the requirements for meeting attendance?

RH residents are required to attend (5) support groups each week. Supports groups can be 12 Step meetings (AA, CA, NA, and/or Celebrate Recovery), professional counseling, or church-related groups (Bible study, church, growth groups). Meetings should be spread eventually throughout the course of the week.