

# C.A.N.A. NEWS

Capital Area Narcotics Anonymous, Harrisburg, Pa. November 1988 Issue IV, Vol. I

## ***Recovery, pain & agony***

By Pedro O.

Hi, my name is Pedro O. I'm a recovering addict. Let me tell you, we recovering addicts go through some pain and agony in our recoveries. I would like to share my experience, strength and hope.

It all started in the last week of June, 1987. According to my routine, I went to work at 5:30 a.m. When I got there, I realized that I was going to be busy, so I was rushing around like a madman.

I work for a company that uses large, industrial machines. When I was working on one of them, my finger got caught and the tip was almost pinched off. I didn't feel the pain immediately, but I knew by the way my finger looked that I

had to go to the hospital.

When I reached the hospital there were no doctors available

### ***I was rushing around like a madman***

and during my waiting period the numbness started wearing off and I could feel the pain. I had plenty of time to think about all I had been taught in the rooms of N.A. and I knew I had to tell the doctor that I was a recovering drug addict. I did this while he bandaged my finger and prescribed a non-narcotic drug.

An appointment was set up for the following week but during that time, without my realizing it,

### ***I had to go to the hospital***

my finger became infected and I was in severe pain. The unbearable pain caused a lot of tears and all I knew to do was pray all night long.

When I got to the hospital for my appointment I had to wait longer than usual filling out paper work. This was the day I found out

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# I told him I am an addict

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about the infection and it was recommended that I go into the hospital before it spread.

I was in for a week taking antibiotics and I felt the hope that my finger would be healed. When I returned for my appointment the next week, the doctors decided that the tip of my finger needed to be amputated. This was the scariest point in my recovery. I notified my family and my sponsor and expressed how absolutely terrified I felt about having to take medication. I was really confused because I'd heard in N.A.

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## The unbearable pain caused a lot of tears

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not to pick up under any and all circumstances. For me, as an addict, I knew that if I put any kind of drug into my system that it would lead me to crave more because the disease wouldn't allow my body to realize that this time it would be for health reasons.

My operation was successful but I was in a lot of pain and I felt as though I needed the drugs they were giving me. My mind was distorted because of the drugs and I felt guilty because of this cunning, baffling and powerful disease. As I

look back on it today I feel grateful towards my sponsor and other recovering friends because they were there for me. This was something new because in my addiction I didn't have people who cared this way.

Now I know just how important it is to have a good support system and to work the program. My sponsor went to my home group and arranged to have a meeting held in the hospital for me.

Boy, did I ever need it. What an overwhelming experience! This something that I'll never forget.

As soon as I got out of the hospital, I went directly to a meeting and shared how I was feeling. I was confused because I was going through obsessions and my disease was trying to take me out of the rooms of N.A. I went against those feelings by attending as many meetings as possible and spending a lot of time with my sponsor during my time off work.

It took about three weeks before I really felt comfortable about staying clean. Today I'm coming up on three years because I don't consider that I lost my clean time during this period.

Today, I realize how important it was for me to let my doctor know that I was a recovering addict and to let people in the fellowship know what I was going through. #

## **Thoughts on steps six and seven**

*By Bill S., New Cumberland*

What held me back from working the sixth and seventh steps - becoming entirely ready to have God remove all my defects and then asking Him to remove them - was my believing that there were some shortcomings that I would never get rid of. I had them for a long time; I liked them; and I rationalized not letting go of them. They were like old friends. But holding on to those defects was a hindrance to my growth and recovery in N.A. When the pain of holding on to them became greater than the pain of letting them go, I knew it was time to make some changes.

Making positive changes has always been difficult for me. Yet, I can make a whole lot of negative changes in a short amount of time without giving it much effort. When I finally got the guts to make some positive changes and get rid of some major defects, I felt one of the best feelings in my recovery. I can only compare it to the point we come to in our recovery when we know that we truly want to stay clean more than we want to use drugs. These feelings are what people refer to when they told us in the beginning, "Work this program and things will happen beyond your wildest dreams."

Working the sixth and seventh steps to the best of my ability has helped me realize why we do the 12 steps in order, one step at a time. Each step prepares us for the next one.

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I can now look back at the fourth and fifth steps and realize that writing down my inventory and telling someone about my defects and telling about shortcomings is not as  
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## Letter to the Editor

Dear Editor,

My name is Jerry C. I am a recovering addict. As an active addict, I have, in the past, lived most of my life in the throes of emotional extremism. Common life circumstances for others became cataclysmic crises events for me. I, being able to perceive only the (black and white) extremes of my life situations, and very little of the shades of grey in between. For most of my life, I made decisions based upon those predominantly distorted and often erroneous perceptions; acted and reacted in haste and in the extreme. And, thereby, continued to perpetuate the emotional (yo-yo) pattern of my, crisis-oriented, addicted life.

These impulsive and compulsive behaviors combined with issues of control and a (fix-it) mentality stemming from having been raised in a dysfunctional family was where I was at. This was the personal emotional legacy which I carried to my intimate, family and social relationships; to my recreational, career and business life. As an ad-

**... the emotional  
(yo-yo) pattern of  
my, crisis-oriented,  
addicted life.**

dict, I would immediately react with the ferocity of an emotional 16-pound sledge hammer; when often, the reality of the situation called for nothing more than the gentle tap of a tack hammer to bring things back into line. I didn't know the difference then; and, there are still times when I don't. But, I'm getting better at it thanks to the program!

Why do I bring all this up? And what does any of this have to do with H&I? Since having come into the fellowship- I have been continu-

***This was the personal  
emotional legacy which I  
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and social  
relationships***

ally reminded by those who have come before me that I am not unique. That in fact, we as addicts have a communality of shared behaviors and character defects which we help each other with by sharing our experiences, strengths and hope.

I remember when I first came into this fellowship, almost two years ago, every meeting schedule contained H&I meetings and a fellowship contact person if such

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## Letter to the Editor

*(Continued from previous page)*

was required; and, other information pertaining to clean-time requirements, etc. It may not have worked "perfectly;" but, it worked! "Occasionally" some recovering addict would "make the mistake" of showing up at a penal institution without "Being Cleared" or at a rehab "without fulfilling clean-time requirements" and would have to be turned away from the institution. A small price to pay for carrying the mes-

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sage from my perspective; just part of accepting life on its own terms.

The H&I committee's solution this problem was to drop all H&I meetings from the schedule; perhaps, a sledge hammer approach? Perhaps, a concerted long-term approach by the committee to educate the fellowship on H&I meetings and procedures might have been at-

tempted? Perhaps, drafting a "Master List" of people willing to make short-term and long-term H&I Meeting commitments could have been tried.

Perhaps... and perhaps... and perhaps. The possible solutions are only as limited as our imaginations and our resources! I don't recall - though I'm the first to admit to a faulty memory - the decision to drop H&I meetings from the meeting list completely coming around for group conscience. Nor do most of institutions have not had meetings

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**The H&I  
Subcommittee is  
desperately seeking  
support for the  
Monday night  
meeting at Camp  
Hill State Prison.**

**Any men interested  
in starting a meeting  
at Dauphin County  
Prison contact Tony  
at 540-1814**

# ***Things will happen that are beyond your wildest dreams***

*(Continued from page 3)*

difficult as actually letting go of those defects. And completing the sixth and seventh steps is probably not as hard as the eighth and ninth steps will be. You mean I actually have to go to all the people I make

amends to them all? Oh s - - t!

Trying to work the steps to the best of my ability, for me, is hard work. But the benefits are absolutely beyond my wildest dreams. #

## ***Letter to the Editor***

*(Continued from page 5)*

the people I've discussed this problem with. A number of us have contacted members of H&I within the past six months to volunteer and have never been recontacted. Is this just an oversight of committee members? Is it indicative of a breakdown in the process? Or, has H&I taken it upon themselves, either individually or collectively, to determine who will or won't speak at H&I meetings? Why is it that some institutions have not had meetings in months? Is it that an H&I committee member going to a dance was more important than fulfilling a commitment he had previously made to speak at a rehab facility? There seem to be many questions that could be asked - but, there is only one important one- Are we in CANA, the committee (our trusted servants) and the fellowship (us) working together doing the best we can to carry the message to hospitals and institu-

tions in this area - and if not, what must we do to accomplish that? I would suggest to the H&I committee that they reconsider reinstitution of H&I listings on the meeting schedules. I would suggest that perhaps, they have a well-publicized meeting, at a convenient time and place, to get suggestions and make contact with people who are concerned about the problems of H&I and who further might become part of the solution!

There is an old saying, "Out of sight, out of mind;" and presently, this seems appropriate to H&I meetings in CANA. Perhaps, it's time to review the problem once again... We owe it to the addict who still suffers who can't get to us!

**Jerry C.**

## **One member's viewpoint: Thoughts on our fifth tradition**

*By Greg B.*

Each group has but one primary purpose to carry the message to the addict who still suffers. Why is this tradition so important? What can I as a member of N.A. do to live this tradition? How have I abused this tradition?

In the traditions we hear about groups, but what is a group? A group is many individual members of N.A., so these traditions DO apply to all of us when we are assembled in an N.A. group.

Tradition five says that our primary purpose is to carry the message. That message is that an addict - any addict - can stop using drugs, can lose the desire to use and find a new way to live.

How do we carry this message? By providing a suitable and reliable meeting place. By keeping the message clear and understandable and by not exploiting newcomers. The group is the most powerful vehicle we have for carry-

ing the message. Each addict must be able to trust the group. It's our basic responsibility to make the newcomer and old timer feel comfortable in our meetings. Our fifth tradition is very clear about our primary purpose as a Narcotics Anonymous group: we are all we have and we are here to stay clean and help other addicts find recovery. #

**Unity thru  
Service  
M.A.R.L.C.N.A.  
Five**

***Submit ideas for  
designs that  
include:***

- \* Dates (Feb. 24,  
Feb. 25, Feb. 26)***
- \* M.A.R.L.C.N.A.***
- \*Unity thru Service***
- \*Lancaster, Pa.***

**Views  
expressed are  
those of the  
authors, not  
N.A. as a whole.**

**For  
information:  
John 396-9528  
Andy 393-7905**

# Local Events

**Nov. 5:** Mid-Atlantic Regional Learning Convention of Narcotics Anonymous Number Five (MARLCNAV ) People Raiser dinner, workshop and dance from 5:00 p.m. to 1:00 a.m. at the Lancaster Recreational Center, 525 Fairview Ave., Lancaster. This event is designed to recruit members to help with the convention. Two dollars per ticket. For information, call Andrea R. 898-8562 or Jackie M. 394-5223.

**Nov. 25:** Third Annual No More Cold Turkey Banquet sponsored by SCP Area. All N.A. members are invited to join in this celebration of recovery to be held at the Continental Inn, Lincoln Highway East, Lancaster. Social at 6:30 p.m.; Dinner, 7:00 p.m.; Speaker, 8:00 p.m.; Dance, 9:00 p.m. Ten dollars for everything. Three dollars if you only go to the dance. For tickets, call: Julie B. 464-3793 or Kathy W. 393-8032.

**Nov. 26:** York Area Narcotics Anonymous Activities Committee (YANAAC) Thanksgiving Dance, door prizes and 50/50 drawing at Grace Lutheran Church, 150 Jefferson Ave., York. For information, call: Bob G. 755-9403 or Brenda 843-8417.

**Dec. 26:** I Can't, We Can York Area Activities Committee Holiday Banquet at Martin Arts Hall, York Fairgrounds. Dinner, 6:00 p.m.; Speaker, 7:30 p.m.; Dance 9:30 p.m. All for an \$8.00 donation, Dance only - \$2:00 donation. For information, call:

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GSR.**

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the  
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committee  
at the  
Area Service  
Meeting**