

The Phoenix Spirit

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ARTS + EDUCATION ISSUE

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JOHN H. DRIGGS

Why We Keep Repeating Self-Defeating Behavior

"We have met the enemy and he is us."
POGO, A COMIC STRIP CHARACTER

We all know the routine. We promise ourselves to work out at the gym and later find reasons not to. We tell ourselves we've had it with being lonely on the weekends yet we don't join that dating service. We really miss our friends and wish they would call us. Yet do we lift that phone to make the call? Certainly not. We may very well know what's good for us but we certainly don't follow through with doing it. We just can't help ourselves and settle into a pattern of self-defeating behaviors. Irrationally we stay miserable even when we know what would make us happy.

So why do we do it? Living in our technologically savvy world one would think that doing the reasonable thing would only come natural to us. Not so. Over and over again in my psychotherapy practice I see people who routinely don't do what would make them happy even when they know what would. On the surface of things it doesn't make sense. But that's the point. What guides our behavior isn't just on the surface. Welcome to the hidden irrational world inside our brains.

MYSTERIOUS WORLD OF THE UNCONSCIOUS

In his *Outline of Psychoanalysis* of 1940, Sigmund Freud wrote about his most famous discovery—the human unconscious—the clandestine but very real aspect of our identities that actually motivates our behavior. Long before the age of computers and brain scans, he was able to identify that hidden part of our thinking that guides us to make decisions for good or ill. It was an amazing discovery that endures today. Now, thanks to technology, we know that much of our functional thinking occurs in the prefrontal cortex and left half of our brains as we use language, do logical problem-solving and figure out solutions to apparent problems. This is the logical part of our brain. The other parts of our brain—the right brain hemisphere and hippocampus—account for our intuitive intelligence and decision-making based on emotional memories and feelings. This intuitive brain has no words or pictures to explain its analysis and offers answers based on our accumulated relational experiences

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INTERVIEW WITH ANDREW ZIMMERN

Exploring Food, Culture, and Recovery

by Mary Berg / Photo by Madeleine Hill

ANDREW ZIMMERN, CELEBRATED CHEF, WRITER, AND TELEVISION PERSONALITY, IS AN ADVENTUROUS, PASSIONATE STORYTELLER, A MEDIA PRODUCER, AND A PERSON DEVOTED TO LONG-TERM RECOVERY. IN THIS INTERVIEW, EDITED FOR CLARITY AND LENGTH, ZIMMERN SHARES INSIGHTS INTO HIS EARLY LIFE, HIS WORK, AND SOBRIETY.

I had a childhood that anyone would envy. My father ran a big company. We had a lovely first home, a second home. On the outside, I had every advantage, and on the inside, none of it was good enough. I remember having feelings way before my first drink that I would later define as alcohol ones. I wanted things that I didn't have. I thought I needed things I didn't have. I thought other people were the reason I didn't have those things. I constantly blamed the world for all my problems.

We had a series of family tragedies that culminated in a horrific accident involving my mother while my parents were divorced. My father went to his downtown apartment and left me at my mom's apartment with housekeepers, etc., to take care of me. I didn't know it at the time, but that abandonment had a very, very profound effect on me. I didn't want to feel the feelings I was feeling. Instead, I just dove headlong into the very easily obtainable – in the mid 70s in New York City – world of pills, hallucinogens, booze, and weed. By the time I graduated high school, I had bought heroin and loved it. I was not a regular

user, yet. Somehow, I managed to graduate college.

When it came to work, I was very successful. I had one of those double lives – successful restaurant guy by day – Dracula-drug-addict by night. People didn't know I'd become a regular, daily heroin user. So that I could work and not be incapacitated, I mixed cocaine with heroin. I snorted this mixture all day long at work. It kept me evened out. As I began to have profound, serious consequences, the idea occurred to me, 'Well, drugs are the problem.' I quit all my hard drugs. I kept drinking and taking pills, weaning off pills about two years before I sobered up. It was the worst two years of my life. When I solely used alcohol, my life became so unmanageable that I wound up homeless, living in an abandoned building in lower Manhattan, stealing to support myself. I had become purely a user of people and a taker of things. I also crossed every moral boundary there was to cross.

I eventually checked into a fleabag hotel called the San Pedro. I ate a fist-full of

**I had one
of those double
lives ~ successful
restaurant guy by
day ~ Dracula-
drug-addict
by night.**

ANDREW ZIMMERN to pg 6



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LETTER FROM THE EDITOR

The Art of Everything

by *Sharon Chapman*

"This world is but a canvas to our imagination."
HENRY DAVID THOREAU



We live in a world where art is often perceived as secondary to those things of a business nature. "Starving" artists, poets, and writers are "starving" for a reason: You'll never make money from pursuing your artistic enterprises - at least, that is what we are told.

Yet, without art, we would live in a dull world, a monochromatic world. No color, no light, no imagination. If you open your eyes and see what is truly around you, you will discover that all manner of things can be described as artistic. This can include choosing paint colors for your house (something I have been agonizing over for the past month), designing a garden, creating a perfume, studying a creative writing course, playing music - or going to the car wash.

The last one on that list probably made you think. "Wait, what?" Let me explain. I just got a new car and, like all things new, I want to keep it "shiny and new" for as long as possible. So, I decided to go to the local car wash as part of the pursuit of this quest. Bear in mind that I haven't been to a car wash in about 20 years, so I wasn't prepared for the bells and whistles that car washes seem to have these days.

After paying my money at the automatic payment center and then driving forward to the automatic car washing machine, I was told to sit back, put my car in neutral and most definitely do not step

*Without art,
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in a dull world, a
monochromatic
world.*

on the brake (something I failed to adhere to until some frantic waving from the car wash attendant corrected my faux pas).

The car proceeded to cruise along the "conveyor belt" (with myself and my dog inside) and be subjected to the various soap, water, brushes and sponges, depending on what I had selected at the payment center. I began to muse what an "art" this was as various water patterns and bubble formations began to appear on my car. It all could be set to a symphony of music.

But just as I thought it couldn't get any better, various colored lights made up the Grand finale. This was certainly an experience I hadn't had 20 years ago! And then, just like that, it was over, and we were at the end of our 90 second artistic break (yes, it was that quick).

It made me realize that if we took just 60 seconds out of our day, we could see so much art around us; in nature or in humdrum daily tasks like the car wash. There are many artists out there practicing "art" in more places than the usual outlets. Sometimes we just have to see it.

I invite you to take a minute out of your day and spot some artistic endeavors around your town. You will not be disappointed!

Imagining an artistic world,

Sharon

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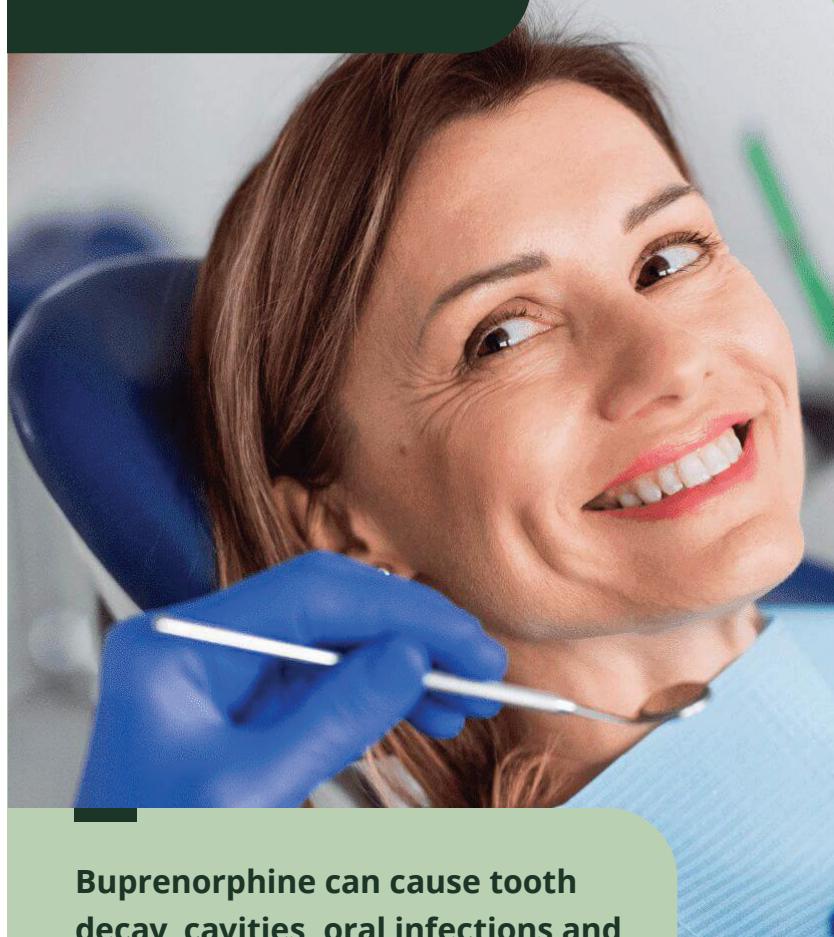
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Dr. Karl Anderson holds a Dental and Masters of Science degree from the University of Minnesota Dental school. He received training at UCLA in the early eighties in Branemark surgical training course, and he is a graduate of the Misch Institute. His specialty degree is in the field of periodontics. Dr. Anderson has placed and restored dental implants since 1985. He has been involved in the development of several implant products. He is a recovering alcoholic with long term sobriety who is passionate about helping others.

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SPOTLIGHT ON MENTAL HEALTH

Becoming the Okayest Version of Yourself

by Seth Perry



The author / Photo illustration by Seth Perry

Hey, you! Yeah, you! What if I told you that in zero easy steps you could become a completely average version of yourself. Imagine if being more physically fit, eating better, reading more, learning more, being more organized, and meeting new people didn't matter because you embraced being a completely unremarkable human being. What if you walked down the street after reading this article and looked at the people that passed by and realized that you were just as ordinary as all of them. If you're ready to embrace being 100% commonplace, then you are ready for my complete guide to mediocrity! Buckle up... or don't... it doesn't matter, because you won't need to brace yourself since you really aren't going anywhere. It's time to unlock the mediocrity within.

You see, six months ago I tried to change everything. Inundated with personal development YouTube videos and books, I thought I would try a wholesale overhaul. In January 2025, I attempted to make small changes every day for an entire year. I developed my own system of self-improvement by borrowing bits and pieces of popular trends. The one catch with me is that I live with a major psychiatric disorder: Bipolar 1. When I began the self-improvement process, in the back of my mind I thought that it was a long shot for me to implement a rigid system of development given my mental health condition. Guess what? *I failed.*

Have you ever heard of the term "failing upward?" Well, that is what happened to me. The entire project unraveled at the 30-day mark. After that, I barely followed my self-improvement regimen and stumbled upon something better. Instead of becoming someone who has a regimented routine of daily reading, exercise, meditation, diet, journaling, habit tracking, and productivity... I embraced mediocrity. Guess what? *I still got stuff done.*

If anyone is selling you a comprehensive plan to overhaul your life in a set period of time, know that there are more people like me, who have experienced a complete personal development collapse, than there are people who live remarkable lives akin to the fabricated façade of your average self-help influencer. You cannot escape the sales pitches for greatness in this day and age. On Sunday morning, many Americans are continuously promised a variety of flavors of prosperity and abundance from the pulpit. Marketing algorithms target the demographic you represent, and any digital snake oil salesman can spend enough money to pitch you their new course while exploiting the most vulnerable aspects of yourself. Around eight new podcasts are released every minute, with 5–10 percent of all podcasts falling under personal development. This means a mountain of unvetted content — overwhelming and impossible to consume — is waiting to induce your next panic attack. All of these points should over-

whelm you, which is why chasing mediocrity is a perfect solution for your life.

If you don't believe that the personal development genre is full of a swath of unoriginal hacks shilling a carbon copy of someone else's intellectual property, take a close look at the main image of this article. In the background you'll see a collage of YouTube video thumbnails created in the last year for videos promising you a plan to change your life in six months. Through a casual 20 minutes of YouTube research, I was able to find twelve identical thumbnails that all have the same title: "Become Unrecognizable." The irony is that these twelve content creators have all just hopped on the most recognizable personal development video trend of the past year. In an attempt to get views, these creators have sold their plan for greatness by simply replicating their competitors. Before clicking on any trending personal development video, ask yourself this: Why would anyone get life advice from a person who has no desire to be their true self? This proves that even content creators are essentially mediocre humans behind their smokescreen of wellness and presentability.

So, what is my surefire plan for mediocrity? To be clear, I am not telling you to simply abandon all routines, schedules, and of course medical or psychiatric suggestions from professionals. Mediocrity is all about giving yourself permission. You have the ability to give yourself permission to sleep in on a weekday, eat a bag of Doritos while wiping your orange fingers on your shirt, leave a book half-read for six weeks because Chapter 4 was uninteresting, take a lower-paying, less stressful job for your own mental health, weigh the cost of your ambitions if you ever actually achieved your loftiest goals, and even miss an entire week of exercise because you're dealing with anxiety. Allow the high-octane and never-ceasing personal development marketing to retreat into the background like the dull roar of soothing white noise. Embrace mediocrity, knowing you can't be everything to everyone — you can only be a few real things to the small circle of people whose names you actually remember.

In closing, here is how mediocrity played out for me in the last six months. I work a lot, and I am professionally mediocre, not a perfectionist. If I were a perfectionist, I would not have gotten the following list done:

- I completed a six-episode documentary podcast series

Chasing mediocrity is a perfect solution for your life.

- I preached at over eight funerals (three of them in one week)
- I organized an educational panel on the opioid crisis
- I promoted a large-scale mental health event
- I attended two conferences
- I conducted seven press interviews
- I celebrated my father's 80th birthday in an extravagant three-day celebration.

What I haven't listed here are the countless naps, the deviations from my diet, my grumpiness, and my disorganized method of getting things done. I achieved my goals by being mediocre, giving myself permission to be ordinary, and by not "Becoming Unrecognizable."

I want to be recognized as the pastor with the Doritos Spicy Sweet Chili-flavored crumbs on my shirt. I'm proud to be a faith leader who folds out the cot in his office and takes a two-hour nap on a Sunday afternoon, complete with noisy snoring. A highlight of my vocation is how I embrace the fact that 80 percent of the time at work I wear drawstring khakis, a T-shirt, Vans, and a baseball hat because it looks average. So, if you think you aren't living to your fullest potential, and you've tried a few personal development schemes only to end up worse off than when you started... try my plan. Embrace mediocrity because being good enough is great.

Seth Perry (he/him/his) is an ELCA pastor, mental health advocate, and creator of the documentary podcast miniseries *Our Stigma*, available on all platforms. Living well with Bipolar I, he speaks and writes about the intersection of faith, mental health, and recovery. Seth currently serves Elim Lutheran Church in Scandia, MN. More at www.ourstigma.com.

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Recognition

by Tina D.

He and my mom never married, but they were together for 35 years, and he was a welcome sober soul at boozy family gatherings. At one point, he had to stop drinking to save his liver, and for a while, he went to meetings. We had sobriety in common until he started to drink socially again. He continued to be an ally after he went against medical advice.

Mom was not supportive of sobriety. Even less so as her dementia progressed. In the end she was drinking a lot of wine, and it became clear why temperance movements referred to the demon, alcohol. My favorite 14th century monk wrote when evil takes human form, some quality of that body betrays the demonic intention. If that's true, the self-referred evil for mom was "nurse."

She had a toxic over-confidence in her past profession. Under her care, it was rare for her partner to see a doctor. She told him to "tough it out" and bragged that she "upped the dosage" on pain meds that, ultimately, masked inoperable cancers and muddled diagnostics when he went for a consult. It was frustrating the day he described the inconclusive results. He couldn't assess his pain through the fog of medication.

That same morning the three of us met for a walk, and he'd tripped and fallen up a curb. I wondered then about his sudden weakness, because he'd always been strong. It was the last time I saw the two of them before his collapse on a too-late trip to the emergency room. Ten long days of oncologists asking, "How does this even happen?"

On discharge, he planned to do chemo. Maybe if he'd begun the treatment while hospitalized, it could have given us another six months – but no more. And he hated the days he was an inpatient. He wanted to go home.

The nurse oversaw his homecare. Like when I asked if he wanted to listen to music, and he said "Yes" but she shook her head, and smirked because she'd won that game for good. It was relatively mild as bullying goes, but I didn't stand up to her. I felt desperate and helpless about his pain, and guilty when I let him see my distress. I tried to be strong to the point of dispassion. Although it's vain to imagine my strength mattered. My nerves were shot, but it wasn't about me. Except, I was losing my ally.

On one visit, he shared that he was having some "crazy dreams" from all the medications. I should have asked more about them. It seemed he had more to say. As I was leaving, I took his hand and said, "We'll see you soon" – and his eyes opened wide as if he'd assigned a deeper meaning to the words.

That was before my own crazy dream.

I didn't immediately recognize the young figure that surprised me at a bus stop (so often it's a bus or train stop in dreams – the modern-world theme for spiritual leveling up). He looked happy to see me. A 20-ish-year-old him that I never knew, 40 pounds lighter, grinning slyly with no beard. I first thought it was a cousin of mine, and then wondered about another lifelong friend, but this presence was younger.

I later understood that it must have been him because who else would it be in those last sad days? It gave me comfort

we might recognize each other if we met again in time, and during my next visit I asked, "Is there anything I should know?"

He was tired and on morphine, and replied, "No ... I don't think so." Then he looked me in the eyes again, and said, "Your mother did a good job." Those were his last words to me.

As I re-read my journal entry from the winter morning he died, written before mom called to tell me he was gone, I still believed he would live a few weeks; even though I'd already let go of hope for the long term because bladder and liver cancers are a horror.

There's a widely accepted emphasis on reconciling unresolved issues before death, but it seems kinder not to impose that process on someone who's very ill. I leave things unsaid in far less painful situations. Growing up, the love in my family was consistently conditional, and resolutions were temporary. I learned to detach and conceal when I was hurt which made me reconsider the words, "Your mother did a good job." He knew I would share them with her. They hid his suffering, and in the end, the nurse wouldn't know how much she hurt him. That's how I would have handled it, anyway (see Adult Child of Alcoholic). Only ... his words seemed unconditional.

If he was playing a game, he might have won the final round. Mom told me it felt like he got her back. That he knew he was ill and chose to hide the symptoms from her. I didn't ask why she imagined retaliation. She did ask if I was sad that he didn't leave me anything.

It was a thoughtless remark, but I hadn't expected an inheritance, and in fact, I was deeply grateful to him. When I saw his lifeless body curled in the lounge chair and smoothed the hair from his uplifted face, my thought was he looked like Jesus (!) which I quickly rationalized: It's because he's so thin.

Sounds unhinged, but it felt real in the moment, and the vision of beauty in death lingered through Lent. Every time I saw a statue or painted figure in that position (which happens during those six weeks), I was reminded of him. He seemed sainted for taking care of her – or was the correct term martyred? It takes two to make a hurtful relationship, and he absorbed the madness that I avoided by meeting them for breakfast and early walks when she was sober and not sundowning. I suspect the deathbed vision was partly a result of my guilty conscience. Strong emotions showed him transfigured. It was him, and he was more.

Easter is all about transfiguration and how it takes time for friends to recognize the risen. As when Mark and Luke meet that stranger on the road to Emmaus but didn't realize who it is until dinner. It's a nice idea that we'll know each other if we meet again in the light – if not right away. To imagine there's meaning in our dream spirits and waking visions.

Still, the only certain takeaway was my gratitude for his caring. Without it, mom's drinking and dementia quickly progressed. Now she's (mostly) sober and in assisted living, and she hasn't mentioned the nurse since the move. We're getting reacquainted on her better days, which helps me accept my ally's last words were heartfelt after all.



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barbiturates and chugged vodka. My intent was to kill myself. As best we can tell, I almost did the job, but I woke up two days later. I wasn't dead. I did something I'd never done in my entire life, which was call another person, and ask for help. That was the biggest change for me. Within a matter of days, I had another intervention. The difference was this time I was willing to go wherever they sent me. I went to Hazelden for five weeks then to their halfway house in St Paul, where I stayed five or six months. That's what kick-started this sobriety in January 1992.

CONGRATULATIONS. HOW DID YOU GET FROM A HALFWAY HOUSE TO CREATING BIZARRE FOODS, WRITING BOOKS, AND BECOMING A MEDIA PRODUCER? DID YOU GO BACK INTO THE RESTAURANT BUSINESS? IF SO, HOW DID YOU STAY SOBER?

Well, at the halfway house, I needed to get a job. I got a spot-job for a week washing dishes. That was miserable, so I got a job as a dishwasher at a coffee shop/diner. I leveraged up to dishwasher in a restaurant, an ambitious Minneapolis French bistro, with 125 seats. About three weeks in, one of their cooks was sick. I told them I could do the job. That day, I helped put out lunch on that person's shift. The owner of the restaurant pulled me aside and asked, 'Why is my dishwasher putting out food that looks nicer than my chef's?' I told him that I'd had a robust, extensive culinary career before I crashed and burned in New York.

Once I got out of the halfway house, I wound up taking over that kitchen. We turned it very quickly into the best restaurant in the city. A lot of great food people come to Minnesota for treatment – from Florida, California, New York. I put up signs at halfway houses and recovery places that a sober kitchen was looking for help. Some really rock star folks cooked with us. It was a wonderful time – doing great things with bad restaurants.

I had bigger stories to tell. I desired a bigger audience. I started writing for a local magazine, working at a local TV station, and doing an hour-long radio show on weekends. I sort of taught myself the media business. After I got enough tape from those local shows, I started pushing ideas around. One of those ideas became *Bizarre Foods*. It was wonderful to take a tiny kernel of an idea and pitch it to a television network. They liked it. I found a production partner. We made the pilot



Top: Zimmern putting finishing touches on a salad / Photo by Madeleine Hill. Right: A young Andrew / Photo provided by Zimmern.



in 2005, shot the first season in 2006, and in 2007 the show premiered. The first episodes did well. On the third episode, an Ecuadorian shaman performed an exorcism on me in a tiny little town called Otavalo. That tape found its way to the bookers for *The Tonight Show*. I went on that show the end of the same week that the exorcism episode aired. *Bizarre Foods* just blew up. If it wasn't for this one booker on Jay Leno's show, I'd be painting houses right now.

YOUR FISHING EPISODE IN UGANDA ON BIZARRE FOODS WAS WILD. WHY DO YOU NOT ONLY EXPLORE FOOD CULTURES, BUT TAKE ON DANGEROUS ACTIVITIES TO GET THAT FOOD?

I like the danger! [Interviewer laughs] I'm serious. I wanted to tell stories using patience, tolerance, and understanding so that people could see all the different

sides of a culture through the food. When I first pitched the show that way, it wasn't met with success. One person at the Travel Channel took the time to tell me that it was too much like PBS – 80% education, 20% entertainment – but if I flipped it around, it would be very successful. So, I flipped it. I focused the show entirely on fringe foods – dishes most people hadn't heard of outside their country or even outside their county of origin. That little change not only sold the show but gave it lasting power.

And obviously, if you're going to eat birds' nests built by swallows on the side of cliffs, you're going to have to go to dangerous places to get them. I could eat them in a restaurant in Chinatown in Queens, but that's not half as fun as finding them in Thailand or the Philippines. Finding food at its source is way more thrilling. Yes, it

comes with a certain amount of danger, but I found that exciting as well.

DO YOU AVOID FOODS THAT CONTAIN ALCOHOL? OR DOES COOKING CHANGE THE EQUATION?

The first 5 - 10 years were a lot different than the last 5 - 10. I cooked with it professionally but avoided alcohol in all forms. I was very, very strict about my boundaries around alcohol. I desperately didn't want to go back to that horrific hell hole I'd worked so hard to escape. Now, after 33 years, I still don't consume raw alcohol. I don't eat a bowl of soup that's finished with a shot of sherry. If I make a beef stew that simmers for two hours and



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I was very, very strict about my boundaries around alcohol. **I desperately didn't want to go back to that horrific hell hole I'd worked so hard to escape.**



Zimmern and his finished culinary creation / Photo by Madeleine Hill.

the red wine is reduced, it doesn't start the phenomenon of craving – for me. But the smell of rum or bourbon or a whiff of coffee liquor in desserts like tiramisu in a restaurant just gets my brain going. I avoid them.

Even though I've been sober for 33 years, I still go to meetings every day. I still do the work to keep myself sober, and I live a life centered on service work. The only reason that I'm still sober today is that I've never stopped working on myself.

HOW MANY PEOPLE ACCOMPANY YOU WHEN FILMING ABROAD?

It's changed over the years. In Season One, it was just three of us: me, a videographer who also handled sound and a second camera, and a field director who directed by day and wrote the episodes at night in her hotel room. We were doing everything by the seat of our pants. By Season Three, we had a team of 14 – 15 people: a second videographer, a sound person, drivers, fixers, security people, the works. Creating an hour-long show overseas requires a large amount of work and talented people.

HOW DO YOU CONNECT WITH LOCALS WHEN FILMING ABROAD?

We hire local fixers. There's no place in the world where you can't find someone to help arrange things. Scouting is

essential. You need to ensure that what you're after is there when you need it. You don't want to get somewhere to find the flamingos have flown away. There's a nuts-and-bolts side to TV production that's not flashy, but it's the foundation of everything you see on screen.

YOU MENTORED YOUR NEPHEW AT THE MINNESOTA STATE FAIR ON ONE EPISODE. DO YOU MENTOR OTHERS?

I've got a couple of twenty-year-olds in my house. I don't know that they'll follow in my shoes. Media today has changed dramatically. Anyone with a phone can make a show and air it online. It'll be interesting to see what that media world looks like, whether my kids participate in it or not.

ARE YOU CREATING NEW SHOWS?

Absolutely. I own a production company called Intuitive Content (<https://intuitivecontent.com>). We make shows that I'm in, but mostly we produce shows with other people. We just got nominated for an Emmy and a James Beard award for *Hope in the Water*, a 3-part PBS documentary series we made in collaboration with David E. Kelley.

Intuitive Content is 10 years old. We're proud to be named a Realscreen Top 100 international production company. In addition to 'Hope in the Water,' (<https://pbs.org/show/hope-in-the-water/>) and season 67 of *Wild Game Kitchen*, we've produced *Field to Fire* for Outdoor Channel, *Kitchen Glow-Up* which is a home rehab show, and Pat Martin's show *Life of Fire*. We do a lot of television."

org/show/hope-in-the-water/) and season 67 of *Wild Game Kitchen*, we've produced *Field to Fire* for Outdoor Channel, *Kitchen Glow-Up* which is a home rehab show, and Pat Martin's show *Life of Fire*. We do a lot of television."

New episodes of *Bizarre Foods* haven't been made since the Travel Channel switched to broadcasting paranormal shows. Instead, Andrew has produced and starred in MSNBC's special series, *What's Eating America*. (<https://www.msnbc.com/whatseatingamerica>) Readers of *The Phoenix Spirit* may especially relate to the segment on addiction. He's also produced shows for Zoe Francois and Yia Vang, for Magnolia Network's 'Family Dinner,' and starred in competitions such as *Beat Bobby Flay*.

IS THERE ANYTHING ELSE YOU WANT OUR READERS TO KNOW ABOUT RECOVERY?

Recovery is possible for everyone – families, addicts, anyone who's struggling. I struggled with my sobriety for 15 years before finally putting the cork in the bottle for good. It's a very difficult process – but the benefits are beyond my wildest imagination. It's available for anyone. I was nobody special, so to anyone who is struggling – keep going.

Mary Berg is a retired associate professor of clinical education, a resume writer, published author, and poet. Her first poetry collection, *A Mystic in the Mystery: Poems of Spirit, Seasons, and Self* was released in 2024. Her website is: marybergresumewriter.com.

Learn more

To learn more about Andrew Zimmern visit:

Andrew's website
andrewzimmern.com

Besides *Bizarre Foods*, Andrew has produced and starred in other series (as well as producing series for other talent such as Zoe Francois and Yia Vang through his production company, Intuitive Content) such as MSNBC's special series, *What's Eating America*, Magnolia Network's *Family Dinner*, Outdoor Channel series, *Andrew Zimmern's Wild Game Kitchen* and *Field to Fire* and the 3-part PBS series created in collaboration with renowned producer/writer David E. Kelley, *Hope in the Water*, which aired last summer and which was nominated for an Emmy and a James Beard Award just a few weeks ago. In addition, he makes appearances on lots of other shows such as *Beat Bobby Flay*, and other competitions.

Everybody has a Story to Share.



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Gambling addiction and the impact it has on loved ones is often a well-kept secret. The stigma is real and significant, often preventing someone from seeking the help they need. By **offering your story**, whether you've been directly or indirectly impacted by gambling addiction, others **can gain a better understanding of this addiction**.



Please visit to share your story.



Art Gallery

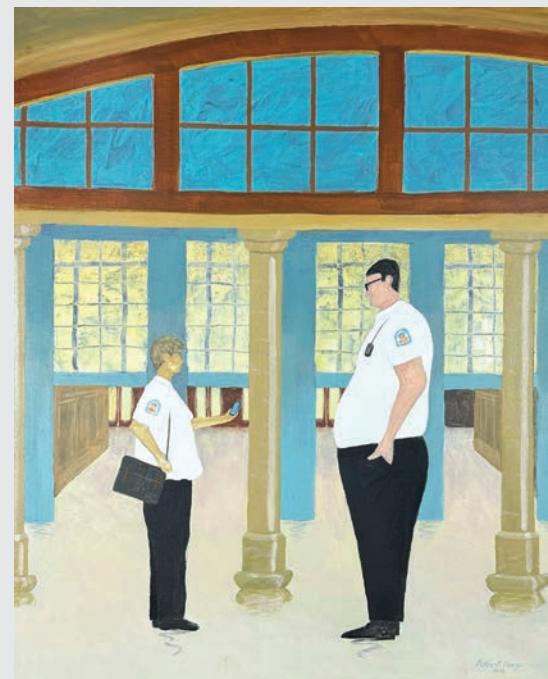
A special thanks to People Incorporated and Missions, Inc. Hart House for providing these wonderful pieces of artwork to share with readers.



"10,000 Lakes" by Virginia Townsend



Diane Peters



"The Security Guards, Union Depot St. Paul MN" by Peter Hinze



"Landscape, Figure" by Michael Conroy



"Moon Ceremony" by Gayle Olsen



"Birds on a Bicycle" by Jill Ness

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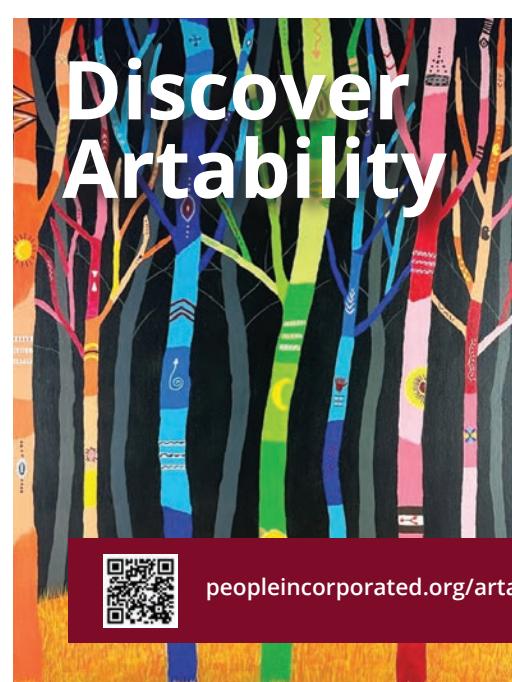
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WE CAN HELP YOU WHEREVER YOU ARE IN YOUR RECOVERY JOURNEY

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Submission event dates:
Aug. 15, 18 & 20, 2025

peopleincorporated.org/artability



Education Directory

The following is a complete list of recovery high schools in Minnesota and a partial list of higher education offering addiction studies.

RECOVERY HIGH SCHOOLS

Apex Recovery School
Rochester, MN
507-328-3999
alc.rochesterschools.org/o/ralc/page/apex-recovery-school

APEX Recovery School offers a school community of support for students in recovery from substance use and co-occurring disorders up to age 21.

Central Freedom School
Mankato, MN
507-387-3047
www.chs.isd77.org

Central Freedom School exists for adolescents returning to the community from recognized substance abuse treatment centers and/or has been identified by support services.

Insight Recovery School
White Bear Lake, MN
651-773-6400
alc.isd624.org/academics/insightrecovery-school-clone

The Insight program is a school within a school which operates within the ALC building, partnering with ALC teaching staff. We seek to support the student in an individual recovery plan

The Lakes Recovery School
Detroit Lakes, MN
218-844-5687
alc.dlschools.net/student-services/recovery-school

The Lakes Recovery School is open to students that have successfully completed a residential or outpatient Chemical Dependency program and have a desire to remain sober.

Lakeside Academy
Buffalo, MN
844-768-8336
boysteenchallenge.mntc.org

Lakeside Academy offers a 4-level program with licensed chemical dependency treatment, mental health and other counseling services, and onsite education including conventional, online, and project-based learning — all in a camp environment.

RECOVERY HIGH SCHOOLS

McKinley ALC Recovery School
Waite Park, MN
320-370-6823
mckinley.isd742.org

A school-within-a-school, creating a supportive classroom setting for youth in recovery to continue their education. Credit is earned daily toward math, language arts, social studies and science, as well as daily recovery group. Credit recovery also offered for students as needed.

P.E.A.S.E. Academy
Minneapolis, MN
612-378-1377
peaseacademy.org

P.E.A.S.E. Academy is here to serve high school aged students, grades 8-12 who are seeking to engage in recovery from substance use and misuse. We offer unique supports and provide a great education to place students on a pathway of lifelong success and founded in 1989, P.E.A.S.E. is the oldest recovery school in the nation.

COLLEGE / GRADUATE SCHOOLS

Augsburg University
Minneapolis, MN
612-330-1000
www.augsburg.edu/msw/dual-degree-and-pathway-options/msw-ladc-pathway/

Augsburg's MSW/LADC prepares MSW students for ethical, competent, and culturally responsive social work practice in the substance use disorders field.

Century College
White Bear Lake, MN
651-773-1700
www.century.edu/programs/addiction-counseling

The Addiction Counseling program is designed for career opportunities in entry-level positions in the field of chemical dependency counseling

Fond du Lac Tribal and Community College
Cloquet, MN
218-879-0808
www.fdltcc.edu/degrees-certificates-certificates-diplomas/chemical-dependency-counselor/

COLLEGE / GRADUATE SCHOOLS

Hazelden Betty Ford Graduate School
Center City, MN
1-855-929-6242
www.hazeldenbettyford.org/graduate-school-addiction-studies

Masters degree in addiction counseling programs are based in addiction studies and the treatment of substance use disorders, but also include intensive coursework and emphases on mental health and co-occurring disorders.

Metropolitan State University
Minneapolis / Saint Paul, MN
651-793-1302
www.metrostate.edu/academics/programs/alcohol-and-drug-counseling-bs

Prepare for a career as an alcohol and drug counselor. Help save and enrich the lives of people struggling with addiction by studying on campus in Saint Paul to earn a bachelor's degree in Alcohol and Drug Counseling

Minneapolis Community & Technical College
Minneapolis, MN
612-659-6000
www.minneapolis.edu/academics/school-education-and-public-and-human-service/addiction-counseling

This program prepares students for Minnesota Alcohol and Drug Counselor licensure.

COLLEGE / GRADUATE SCHOOLS

St. Cloud State University
St. Cloud, MN
320-308-0121
www.stcloudstate.edu/programs/addictions-counseling

Classes and field work experiences introduce you to the best ways to help those with alcohol, tobacco, drug, gambling and other process addictions.

University of Minnesota
St. Paul, MN
612-301-6127
www.ccaps.umn.edu/master-professional-studies-addictions-counseling

Master's in addiction counseling program prepares students to treat clients with substance use disorders by providing strong theoretical and practical foundations in evidence-based treatment modalities, clinical skills, professional and ethical responsibilities, and client advocacy.

Winona State University
Winona, MN
507-353-2551
www.winona.edu/counseloreducation/addictionscounseling.asp

The Addiction Counseling Certificate Program (ACCP) course sequence is intended to prepare graduates for credentialing as a Licensed Alcohol and Drug Counselor (LADC) in Minnesota.

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The direct support for students in recovery is unsurpassed and makes all the difference.



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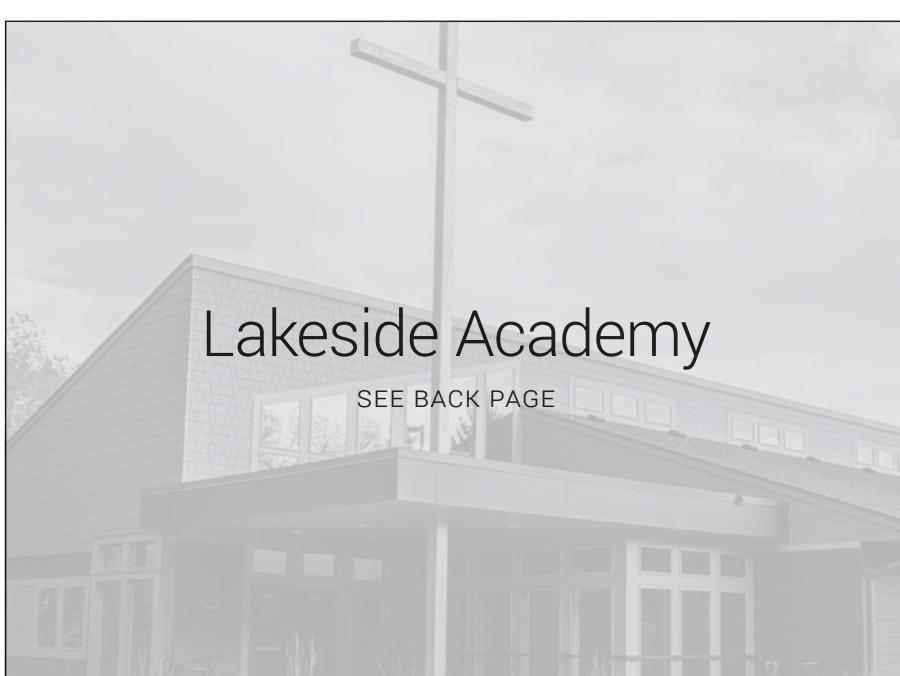


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Lakeside Academy

SEE BACK PAGE





Heather Gallivan
PsyD, LP

Heather is the Clinical Director at Melrose Center. She joined Melrose in 2004 and has worked with eating disorder patients in all levels of care from outpatient to residential treatment settings. She obtained her doctoral degree in Clinical Psychology from the Minnesota School of Professional Psychology. Prior to joining Melrose Center, Dr. Gallivan served 5 years in the United States Navy as an active-duty psychologist. She is a passionate leader and teacher concerning the prevention and treatment of eating disorders, and how societal messages impact our beliefs and attitudes about food, weight, and body image.

Q Can you tell us a little about how you got involved in this kind of work?

I had an interest in eating disorders since I was an undergrad when I did a shadowing experience at an eating disorder (ED) program up in Duluth. In college, one of my roommates also had an eating disorder and I felt helpless not knowing what to do. After graduate school, I was an active-duty psychologist in the United States Navy and often times ended up being the provider treating any service members at my duty station with EDs. When my husband and I pondered the idea of moving “home” to Minnesota after my service commitment was up, I saw a job advertised at what is now Melrose Center and decided to apply. And here I am 21 years later!

HEALING FOR EATING DISORDERS

Chat With a Helper

Q What inspired you to focus on helping people with eating disorders (EDs)?

One of the things I love about helping people with EDs is that it is incredible to watch individuals reach their full potential. I always say that EDs tend to impact people who are really smart, capable, passionate, driven and the ED tamps down their ability to live up to their full potential. So, helping them get to recovery and live a life bigger than the box the ED keeps them in is very rewarding. I also enjoy that in our field there are still a lot of unknowns. In my career I have seen so many changes and advancements. So, I also love always trying to learn and better what we do here at Melrose Center and how we can help patients and families afflicted with EDs.

Q What are some signs that someone might be struggling with an eating disorder, even if everything looks fine on the outside?

It can be tricky as you definitely cannot “tell” that someone has an eating disorder just by “looking at them.” Some common signs and symptoms of a possible eating disorder include noticeable weight loss or weight gain (including significant weight loss in an individual who may be in a larger body), severe, rigid, restrictive eating or dramatic changes to how someone is eating; for example, suddenly not eating foods they once enjoyed, prolonged periods of fasting or skipping meals to lose weight, struggling to eat with others, moving food around their plate, trying to avoid going out to eat or eating in more social type settings or places where they don’t know what may be served, going to the bathroom after meals, exercising excessively such as spending a lot of time working out or working out when they may have already had a sports practice or despite weather conditions. Personality changes such as

increased depression, anxiety, irritability, isolating more and not doing things they used to enjoy doing can be another red flag. Someone making themselves throw up after eating or using excessive diet pills or laxatives is concerning, along with increased focus and preoccupation with their body weight and shape. Physical symptoms related to possible EDs can include feeling cold even on a nice day, wearing lots of clothes even when it is warm out, dizziness or light headedness, brittle hair and nails, dry skin.

Q We often hear that eating disorders only affect certain people. Is that true? Who can be impacted, and what are some common myths?

Yes, I think unfortunately there is still a misconception that EDs impact young, thin, white girls from middle to upper class backgrounds and that is just simply not the case! EDs do not discriminate! They impact individuals of all ages, genders, sexual orientations, which is a wide range of ethnic and socioeconomic diversity. At Melrose Center, about 15-20% of the individuals we treat are male. We see patients between the ages of 8-80, approximately 30% of the patients we see are 35 and older. EDs impact ALL types of bodies and in fact only about 6% of people with EDs are medically considered to be underweight. Although the prevalence of EDs is consistent across ethnic backgrounds, people of color with eating and weight concerns are significantly LESS likely to receive help for their eating issues and are less likely to be asked by healthcare providers about possible eating issues. Gay males and transgender individuals are at higher risk for developing EDs and we know that females diagnosed with anorexia are more likely than females in the general population to be diagnosed with autism spectrum disorder. So, the reality is that EDs can affect anyone and everyone and unfortunately, due to ongoing misconceptions, people struggling often don’t get the help they need.

Q How are eating disorders and addiction connected? Can someone be dealing with both at the same time?

Absolutely! In fact, there is about 25-35% rate of co-occurring ED and substance use disorders (SUDs). In many ways, EDs and SUDs operate in similar ways. Both ED behaviors as well as using substances can serve a “purpose” for that individual to help them manage uncomfortable emotions, stress and distress about things in their life, relationship challenges, loneliness, depression, anxiety, etc. When these disorders co-occur often times, they require co-occurring treatment in order to avoid a “whack-a-mole effect” where in someone may make changes to ED behaviors, for example, but then the substance use gets worse or vice versa.

Q How is working with a dietitian during recovery different from following a diet or eating plan?

There are a number of ways that working with a dietitian in treatment and on a journey towards recovery are different than just following a diet or a meal plan. One of those is that the focus of working with a dietitian during treatment is to help you focus on healing and not with appearance. Our goal is to restore a healthy relationship with food and body and not to change weight or shape. Dietitians, like other treatment team members, take an individualized, therapeutic approach. They will tailor nutrition recommendations based on medical, psychological and emotional needs and help you work towards social “wins” like eating in front of others or at a grad party or going out with your friends. Typically, a “diet plan” is a one size fits all approach and doesn’t address the psychological roots of disordered eating. It tells you only what

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MINNESOTA RECOVERY CONNECTION's
WALK FOR RECOVERY
Recovery Is Everywhere!
Saturday, September 13
10 a.m. - 3 p.m. - Minnesota State Capitol grounds in St. Paul
minnesotarecovery.org/walk

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Tuesday, September 16
6:40 p.m.
Target Field, Minneapolis, MN

Put your baseball cap on and rally for recovery at a sober sporting event!

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Gratitude
breakfast

Thursday, September 25
7:30 a.m.
Hoversten Chapel, Foss Center,
Augsburg University, Minneapolis, MN

Wrap up Recovery Month with a morning of reflection, gratitude and networking.

Keynote Speaker—
John Magnuson, Founder of Relevant Recovery

Purchase tickets at
minnesotarecovery.org/gratitude-breakfast

and when to eat. Dietitians also focus on overall nutrition rehabilitation including helping to stabilize blood sugars, correct nutrient deficiencies and support brain and body recovery from starvation or erratic eating patterns whereas “diet plans” rarely address nutrient repletion. Dietitians also provide behavioral and emotional support with treatment and recovery. They collaborate with the multi-disciplinary team. They can help you to challenge food rules and provide support through fear, guilt, and anxiety around eating. In recovery from an eating disorder, a dietitian is going to take an approach to food and eating that emphasizes food neutrality and not on “good” or “bad” foods. All foods can fit in moderation. Diet or eating plans often label foods as “good,” “bad,” “clean,” “cheat” etc. reinforcing harmful beliefs about food and eating. Finally, dietitians help people work on making long-term changes. Their focus is on sustainable long-term recovery and reconnection with intuitive hunger and fullness cues compared to “diet plans” which are usually short term and not sustainable over time. In fact, they can lead to high relapses of disordered behaviors. Working with a dietitian is an important part of recovery from an eating disorder.

Q What makes the approach at the Melrose Center different when it comes to treating eating disorders?

We have a full continuum of care here at the Melrose Center: Residential, Partial Hospitalization, Intensive Outpatient, and Outpatient programming. So, if a patient needs more support or starts needing higher levels of support they can transition through different levels of our program. We also have a multidisciplinary team that treats the patient and family which may include a psychologist or therapist, registered dietitian, primary care medical provider specializing in EDs, or a psychiatrist. Some of our patients may also meet with an occupation-

al or physical therapist as a part of their treatment. This approach helps to ensure that all aspects of the ED are evaluated and treated. We also have psychologists and therapists who come from a substance use background or have additional training in diabetes to help individualize care for people who may have co-occurring disorders.

Q What does recovery really look like? And how can loved ones offer support without pushing too hard?

Recovery looks different for everyone, and it is important to keep that in mind – everyone’s path is different and that is OK! Recovery looks like taking small steps over time to make changes to thoughts, emotions, and behaviors with the support of your treatment team and supportive people in your life. There will be steps back and detours, but they are all a part of the process and valuable learning opportunities. I have described recovery as a puzzle where there are a lot of pieces that don’t look like anything individually but over time, they come together to create the picture. Eating disorders tend to be very life-limiting and people can feel like they are living in a box. Recovery is living a life full of what you want and dream about without the limitations the ED puts on people. Supportive people are crucial members of an individual’s “treatment team.”

Research shows that people who have supportive people in their lives tend to have a better prognosis and respond to treatment more fully than those who don’t or who won’t allow support to be a part of their care and journey (regardless of age). One way support people can help is to learn about EDs, how they impact people, the treatment process and ways to help. Support people can attend appointments with a loved one with their permission to learn more not only about EDs but ways they can be supportive. Another way support people can help is to speak up. EDs are disorders of mini-

mization and rationalization. This means that often times the person with the ED is telling themselves that their behaviors are “no big deal” or that “no one is noticing” so when support people don’t speak up or are afraid to have a conversation with their loved ones about the concerns they may be seeing, it reinforces that it isn’t a “big deal” and that “no one is noticing.” Don’t be afraid to ask your loved one how you can help and let them know it’s Ok to tell you when it’s too much or that there may be a better time to talk about things. Sometimes family therapy can be helpful to sort through and address any communication challenges or relationship dynamics that may be at play impacting the ED.

Q Is full recovery possible? **Q** What gives you hope in the work you do?

I believe wholeheartedly that full recovery is possible. Although there can be fear about the unknown and what recovery may “look like or feel like.” I’ve never had a person in recovery who I’ve worked with come back and say they regret taking a chance and throwing themselves into making changes to get to recovery. I think also remembering that recovery looks different for everyone and it is not typically a linear path. There will be stops and starts and some detours along the way. It also doesn’t happen overnight and a lot of times you may not feel it really happening until you are there. Watching people get to recovery, living a fuller life and realizing goals and dreams has always given me hope in this work. There are also so many exciting things going on in our field to better understand EDs so that we can develop more effective treatments, and movement in our society, around body image and body acceptance and have more conversation around eating disorder awareness, prevention, and ways to challenge stereotypes about “beauty”, appearance, and bodies.

Learn more

Here's a few resources recommended by Dr. Gallivan:

National Eating Disorder Association
www.nationaleatingdisorders.org

FEAST
feast-ed.org

National Association of Anorexia Nervosa and Associated Disorders (ANAD)
anad.org

The Joy Project
www.joyproject.org

Eating Disorder Hope
www.eatingdisorderhope.com

Academy for Eating Disorders
www.aedweb.org

Eating disorder help in Minnesota reach out to:

Melrose Center
www.healthpartners.com/care/specialty-centers/melrose-center

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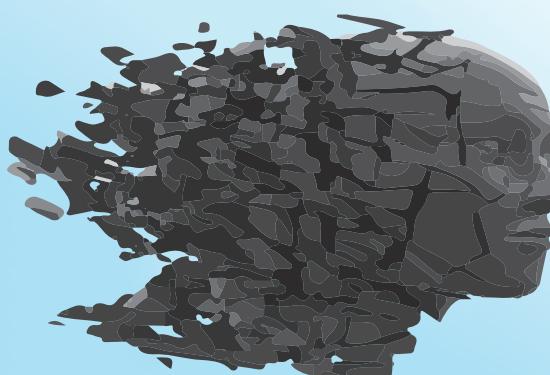
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There are many causes of brain injury, and each brain injury is unique. Our staff members are highly trained to work with people living with disabilities caused by brain injuries.



[763.479.3555 • VinlandCenter.org](http://VinlandCenter.org)



1 : 2

One out of two people living with a brain injury suffer from some form of substance abuse issue, according to the Office on Disability.

Driggs from page 1

At the core of most self-defeating behaviors are two major fears: **Abandonment terror and alarm over unresolved grief**. Our hurtful behavior patterns and addictions are all attempts to cover up feeling these specific fears.

throughout our histories. For example, our memory of how to ride a bicycle cannot be put into words and is stored in our right brains. We can ride a bike but good luck trying to describe how we do it. I tend to think of these parts of our brains as the seat of our unconscious. We make decisions off the stored memories, just like riding our bikes, from this part of the brain. It's the mysterious world of the unconscious.

We all have some idea how our unconscious works. Sometimes our dreams tell us about hidden aspects of ourselves we never knew existed. Sometimes we have momentary glimpses—so called “Freudian slips”—where our unconscious emerges and we have a partial awareness of the link between our past experiences and present behaviors. Say for example we remain hopelessly stuck in a dead-end job even when our work skills are far beyond what our present job requires. If we contemplate interviewing for a more suitable job our brows may start to sweat, our neck might get tense and our breathing could get shallow. We would begin to experience the hidden historical fear that comes from growing up in a family of underachievers and overly cautious people. Perhaps our long-lost great-grandfather lost everything in the stock market and devastated his family. Our intuitive brains would remember our family history and through physical symptoms, not visual images, remind us that all hell will break out if we dare risk getting ahead just as it once did in our family growing up. We may have no idea why we are sweating. So instead of taking the logical step to interview for that new job, we stay safe and stuck at our unfulfilling but familiar jobs for fear of deviating from our family's past. Perhaps we've already taken risks and fallen on our faces, only to reinforce the catastrophic thinking of our family. What seems illogical on the surface actually looks quite smart in the unconscious bigger picture. In essence our unexamined brains help us become self-defeating.

We can't let our limited intelligence get in the way of our progress. Obvi-

ously deeper self-awareness helps. If we were more aware of why our unconscious brains were warning us we would more wisely take ownership over our lives and choose to ignore or modify needless warning signs. Unfortunately some of us remain clueless and suffer. George Santayana, a famous 19th century political philosopher, once said, “Those who cannot remember the past are condemned to repeat it.” Unfortunately too many of us don't see our sweaty brows, tense necks and rapid breathing as a history lesson and remain stuck in old habits. We cannot modify what we cannot see.

WHAT REALLY HOLDS US BACK: ABANDONMENT TERROR AND FROZEN GRIEF

It may seem quite incredible that our past can hold us back when so much of us wants to move forward. We may ask, “How could something that happened so long ago have such a grip on me today?” The trick to understanding self-defeating behaviors is to realize that our pasts are happening to us today. We all live our pasts in our presents. When we're facing a new opportunity a part of our brain scans our past experiences to enable us to cope with present circumstances. Unfortunately such scanning may give us a false reading of danger and we may become helpless in repeating self-defeating behaviors. Often the false reading comes out indirectly in our body sensations and an intuitive sense that something awful may happen when it really won't.

At the core of most self-defeating behaviors are two major fears: Abandonment terror and alarm over unresolved grief. Our hurtful behavior patterns and addictions are all attempts to cover up feeling these specific fears. Let me describe these fears. On the surface losing a loved one to death or rejection may sound very sad but may seem tame in hindsight. However, when we are actually in situations where a loved one has recently passed away or a beloved person tells us the relationship is over, we can be overwhelmed with prodigious feelings of loss, helplessness, self-blame and doom. We may feel abandoned, unlovable and

deeply rejected. Perhaps the worst loss we dread to feel is the loss of ourselves. Growing up in a family that externally provided for us but did not cherish our existence may cause us to be disconnected today from everybody. Since being attached is the most important human need few of us can tolerate the extreme discomfort—like freely falling through space—of being abandoned.

So why do we repeat self-defeating behaviors? It's because they are familiar and seem preferable to re-experiencing our worst nightmares. Let me return to the example above to illustrate what I mean. Say you do decide to take a big risk and interview for that new job. If you were trained as a child to believe that if you attempted to better your life all hell will break loose, you will sweat bullets walking into the interview room. Your discomfort itself may undermine your best interviewing skills. Even if you got the job you would still have to face fears of success since your family may see you as being disloyal to them and too important to be worth their attention. Such threats of abandonment may prompt you to be late for the interview and sabotage your success. As Sheldon Kopp, a famous psychoanalyst, once said, “We prefer the security of known misery to the misery of unfamiliar insecurity.”

ASSESSING OUR READINESS TO CHANGE

Be honest with yourself. Are you really ready for change? Probably not. That doesn't make you a bad person. Some of us are just too scared to change and none of us ought to be disparaged for our fears. We all have them. However you may be fed up with the consequences of your stagnation. What are these consequences? How do your self-defeating behaviors affect all the people in your life? How do you feel about these consequences? Next realize that you need others to bring about the change in your behaviors. If you could change on your own you would have already done that by now. You have to eat humble pie if you want to change. Many of the reasons your problem behavior started are due to relationship failures. To repair these problems you need an extra set of eyes and many good hearts to heal you. If you're not willing to reach out for help you may need to be honest with yourself and realize you're not ready to change. At least you're calling a spade a spade.

FLIRTING WITH CHANGE

On the other hand you may be somewhat open to change. Start by reading *Self-Defeating Behaviors* by Milton R. Cudney and Robert E. Hardy. List your self-defeating behaviors along with how you would like them to change. Get involved with a trusted helper and possibly a support group to help you with the steps you need to take to reach your goals. Use the good advice of peers to direct you to a competent helper and trust your gut instincts in choosing a mentor. Generally you'll need somebody who is practical, holds your feet to the fire and is emotionally warm.

Don't get freaked out by the enormity of your task. Just break bigger goals down into smaller, more attainable pieces. Contract with your helper to follow through with specific homework tasks after you have rehearsed how to handle them beforehand. As you change your behaviors don't be surprised that you

will have unexplained and sometimes overpowering emotional reactions out of the blue. This is a good and necessary sign. Gain and pain go together. Thawing out frozen grief and withstanding abandonment feelings is not small task but gets a heck of lot easier when you're not doing it alone.

Actually going through a change process is a lot like having an operation. You may have intense pain afterwards but it goes away fairly soon and you are on your way to better living. Finally let me tell you a secret. If your support staff is honest, caring, kind and has a wry sense of humor, you can get through anything. Self-defeating behaviors melt away in the warmth of human love.

John H. Driggs, is a retired Licensed Clinical Social Worker, living in St. Paul and co-author of *Intimacy Between Men*.

This article first appeared in the October 2009 issue of *The Phoenix Spirit*. John Driggs is taking a break from writing for a season due to health reasons.

THE 12 STEP CORNER

Step 1

by **Mark Scannell**

“We admitted we were powerless over addictive behaviors – that our lives had become unmanageable.”

There are two words that jump out at me in this Step: Powerlessness and unmanageability. I see these words as relating not only to our addictive behaviors but also to trying to live in a world these days that feels very troubled and overwhelming – wars, immigration issues, unemployment, to name a few issues. This often leads to feeling frustrated and asking the question: “What can I do?” This and our addictive triggers lead us to feel powerless and to believe that life is really unmanageable.

What is important in response to these feelings is the first word of this Step – ADMITTED. “Admitting” and “acknowledging” are important actions, and especially when finding another or others to admit our powerlessness. Put simply, “admitting” can lead us out of denial and shame. And remember that addiction flourishes in isolation, while recovery flourishes in community and in connection.

Thank you for stopping by the Corner. I look forward to seeing you next time around Step 2.

Mark Scannell is an avid 12 Stepper, has been working the Steps for over 30 years and sees them as foundational for a healthy and sane life.

FROM THE STATE OF MINNESOTA

Food as Medicine: A Sacred Path to Healing in Native Communities

by Shirley Cain



In many American Indian communities, food is much more than sustenance. It's medicine. It's ceremony. It's connection to land, to ancestors, to spirit, and to each other. And today, in Minnesota, that sacred understanding of food is helping Native people on the path to recovery and wellness.

At the Minnesota Department of Human Services (DHS), we're proud to support dozens of American Indian organizations and Tribal Nations across the state that provide culturally grounded substance use disorder treatment. Increasingly, these programs are incorporating traditional teachings — such as the concept of food as medicine — into their work, offering a more holistic path to healing.

For the Anishinaabe (Ojibwe), Dakota, and Ho-Chunk people, whose homelands stretch across what is now Minnesota, food has always been deeply spiritual. It's about nourishing the body, yes, but also the mind, spirit and emotions. Meals like Three Sisters soup (made with squash, corn, and beans), venison, wild berries, and manoomin (wild rice) do more than fill the belly. They carry ancestral wisdom, seasonal knowledge, and stories of survival and generosity.

Harvesting this traditional food takes time, care, and prayer. When wild rice is gathered by canoe in the early fall, for example, an offering of *asema* (traditional tobacco) is given to the spirits of the water and the rice in thanks. That same care is offered when maple trees are tapped for syrup, or when deer are hunted, fish are caught, or berries are picked. These are not simply chores. They are acts of reverence.

"Every time we gather food or medicine, we make an offering and say 'chi-miigwech' — a big thank you," says a cultural educator from northern Minnesota. "That practice reminds us to live in balance, to take only what we need, and to recognize that healing comes from relationship — with land, with culture, and with each other."

Traditional plants and medicines — like sage, cedar, sweetgrass and tobacco — also play a central role in this cultural wellness. They are used to purify the

body and spirit, in ceremonies like naming or water ceremonies, and to restore spiritual balance. Others, like wild rose, yarrow, dandelion, and milkweed, are gathered from local wetlands and prairies to treat physical ailments.

Indigenous knowledge teaches that healing from substance use isn't just about quitting a substance — it's about returning to *mino bimaadiziwin*, the "good life," a way of being that is balanced, joyful and rooted in community and tradition. DHS supports this through Indigenous Determinants of Health programs, which reconnect Native people to land, language, food systems, and culture as essential components of wellness.

"It is hard being a human being," writes Giwedino Binesiik, also known as Lindsey Markwardt, a member of the Bois Forte Band of Lake Superior Chippewa. "But we struggle to live in balance. We need to return to teachings gifted by Gichi-Manidoo (the Creator) ... Sometimes all it takes is just putting your hands in the soil and remembering who you are and where you come from. That's where healing begins."

In tribal programs across the state, gardens are being planted, maple sugar bushes are tapped, fish nets laid, and wild rice harvested not just as tradition, but as transformation. These hands-on cultural activities reconnect people in recovery with their purpose, their ancestors, and the natural world — a vital part of healing from trauma and addiction.

DHS is honored to walk alongside Tribal Nations and other partners in this work, recognizing that the most effective care is care that is rooted in culture. When food is treated as sacred medicine, it feeds more than just the body. It feeds hope.

Shirley Cain is supervisor of the Behavioral Health Administration's American Indian Team at the Minnesota Department of Human Services. **Qaiden Smith**, Executive Pathways intern for the American Indian Team, contributed to this column.

CALENDAR

RECOVERY IN THE BAG CORNHOLE TOURNAMENT

When: Saturday, July 26 at 1:00 pm
Where: 499 Charles Ave., St. Paul
Cost: \$50 / per team
Info: www.facebook.com/groups/506869213691292

Grab a teammate and get ready to play. \$50 entry per team. Food, music and merchandise available for sale. Fundraising event

ANNUAL CORNHUSKER ROUNDUP

When: August 15-17
Where: Liberty First Credit Union Arena, Omaha, NE
Info: aa-cornhusker.org

Three days of speakers, friendship, food and entertainment. Also a golf scramble on August 15 (\$75/player).

65TH ANNUAL INTERNATIONAL CONFERENCE OF YOUNG PEOPLE IN ALCOHOLICS ANONYMOUS (ICYPAA)

When: August 28-31
Where: Hilton Minneapolis
Cost: \$40 / pre-registration
Info: www.icypaa.org/event-details/the-65th-icypaa-conference

ICYPAA welcomes you to a "new and wonderful world" annual conference in Minneapolis. ICYPAA is open to anyone who wants to stop drinking, regardless of age. While it's focused on young people, all are welcome to attend and participate.

JULY IS NATIONAL MINORITY MENTAL HEALTH AWARENESS MONTH



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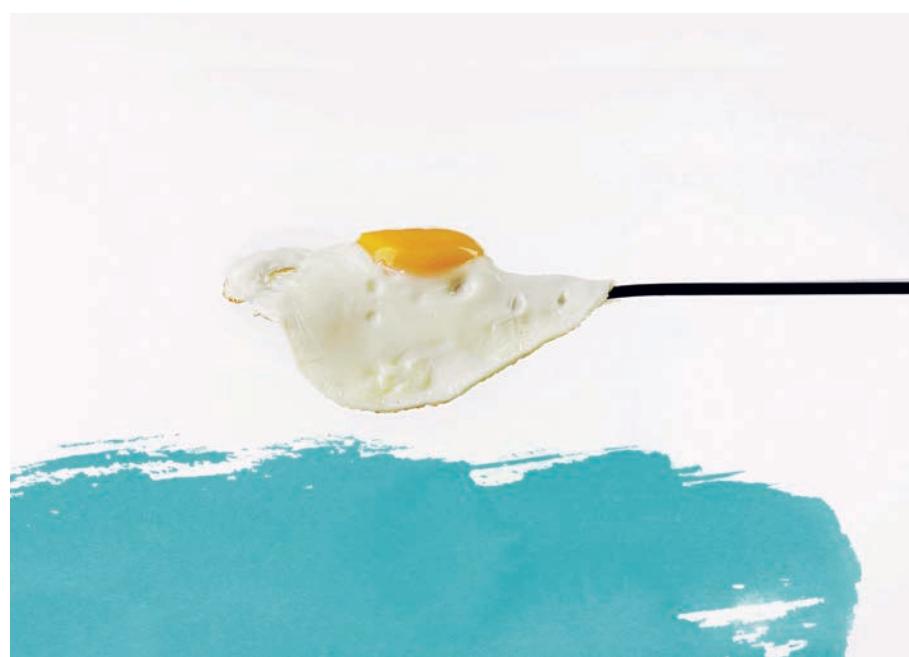
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Food for Thought

by Mary Lou Logsdon



It's growing season in Minnesota. Farmer's markets are bursting with vegetables that tease our tastebuds—radishes, scallions, arugula. Mint and dill transport lettuce into surprise spurts of flavor. The first snap peas pack a crunch when sautéed in a dash of olive oil. Rhubarb's sweet-sour flavor opens doors to generational recipes.

Summer is for eating—eating well, eating healthy, eating together.

Whereas winter meals are constrained by dining space, summer's sumptuous spreads have no walls to limit. The guest list is extensive. Here, in Minnesota, everyone adds to the largesse. *What can I bring?*

I often walk an old city park, the kind shaded with mature oak trees and hedgerows of overgrown lilacs, holding a few remaining tall swing sets that carry its passengers high into the sky. Weekends have people gathering at picnic shelters. Tables topped with red and white checked cloths hold bowls of potato, three bean, and pasta salads. Grills sizzle with burgers and brats. Strollers are parked next to walkers. A badminton net is set up nearby.

Our spiritual texts and traditions speak to the abundance of grace in terms of food. Manna rains from heaven, more than can be consumed in a single day. No need to store the extra, tomorrow's will

be showered upon us again. Two fish and five loaves of bread feed the multitude with baskets of leftover fragments. Eid al-Fitr ends the fasting month of Ramadan with a feast. A widow who uses the last of her flour and oil for a stranger is rewarded with an unending supply. Mahatma Gandhi said, "There are people in the world so hungry, that God cannot appear to them except in the form of bread."

Gathering as family, as friends, as community over an overflowing table, we know we are held not only in an abundance of food, but also in an abundance of love.

I learn a lot about a community when I know what and how they eat. I visit local farmer's markets as I travel to give me a taste of the community and a sense of its culinary specialties. Boston's market includes fruits of the sea as well as of the land, all offered with an Italian accent. I ate some of the best strawberries ever on a September trip to Quebec City, fruit with a French flair. Smells of roasting coffee beans, juicy pineapples, and frying tortillas greeted me at a Guatemalan market, along with colorful hand-loomed weavings. An outdoor fish market in Bergen, Norway, included something that looked like a beautiful piece of beef—whale meat! Not something I would ever find in Minnesota!

I visited a friend in Manhattan in my early 20s. We were invited to her roommate's Italian family's Sunday dinner. I remember being crowded around a table with salad, olives, bread, and a huge, seemingly bottomless bowl of spaghetti. People kept dropping by, just in time to be fed. Everyone talked at once. One person, dressed a little too scantily for Grandma, was sent out for more clothes. Grandma held sway, delighted by the hungry attendees, eager to host and feed the multitude. Though I remember none of their names, I remember the welcome, warmth, and hospitality.

Not only do I enjoy summer's eating, I also enjoy cooking its many offerings, especially after a visit to my local farmer's market. Cooking gives me permission to make a mess, a creative mess, but nevertheless a mess. I unpack my bursting bag with its many splendid finds. I wash and store lettuce and beets, beans and peas, new red potatoes and bright orange and yellow peppers. Later in the summer, tomatoes tumble from the bag as well. I let my creativity flow. *What new recipes can I try? What familiar ones do I revisit or revise?*

I have learned a lot through food—eating it, growing it, serving it. Take presence, for instance. When I am cooking, I need to be present. If I let my mind wander, I risk cutting myself on a sharp knife, missing the moment to turn down the burner before a boiling pot spills over, or burning the last tray of sugar cookies. Cooking takes my full attention.

Food prompts generosity. As I watch my garden grow, I want to share its abundance, whether a bag of freshly picked pea pods or after I have made it into something table-ready. I can assemble a whole dinner party around my urge to make a rhubarb pie.

There is nothing like cooking to give me a lesson in humility—overdressed soggy salad, undercooked Thanksgiving turkey, lopsided birthday cake. Public failures.

Cooking requires planning and organization. A stop mid-recipe to make a quick trip to the grocery store for a missing item disrupts my rhythm. I remember knocking on a new neighbor's door to borrow a cup of flour. She gladly lent me the flour and celebrated that I could be a neighbor to borrow from. Food connects us.

When I moved into my 1917 house on a small city lot, I brought raspberry plants from my prior garden. The best place to

There is nothing like cooking to give me a lesson in humility—overdressed soggy salad, undercooked Thanksgiving turkey, lopsided birthday cake.

plant them was next to my neighbor's chain link fence. We made an agreement. I promised to care for the plants while the berries that grew on their side of the fence were theirs to eat. Soon that house changed hands. A single woman in her 20s moved in and I asked for the same arrangement. She, too, was willing to let me grow them on her fence though she would not be picking them. She didn't eat fruit. I came to learn that her mother died when she was quite young and she hadn't eaten fruit since. She didn't know why, she just hadn't. Her father and stepmother would stop by and help themselves to the fruit, but she didn't. I got to know her through several over-the-fence chats. We talked about jobs, schooling, life. Eventually, during raspberry season, as we talked, she reached out and plucked a berry, popped it in her mouth and kept on talking. Food with friendship heals.

Food reflects who we are. Some of us are tidy and precise. Some are adventuresome and exploratory. Some are safe and some are wild. Food can give us a framework for our day and our week—breakfast/lunch/dinner, Taco Tuesdays, Sunday brunch. It can lead us to new friends and new adventures. It can comfort us when we're hurting and soothe us when we're ill.

Food is a sacred gift. Share it with someone you love.

Mary Lou Logsdon is a spiritual director in the Twin Cities. She can be reached at logsdon.marylou@gmail.com.

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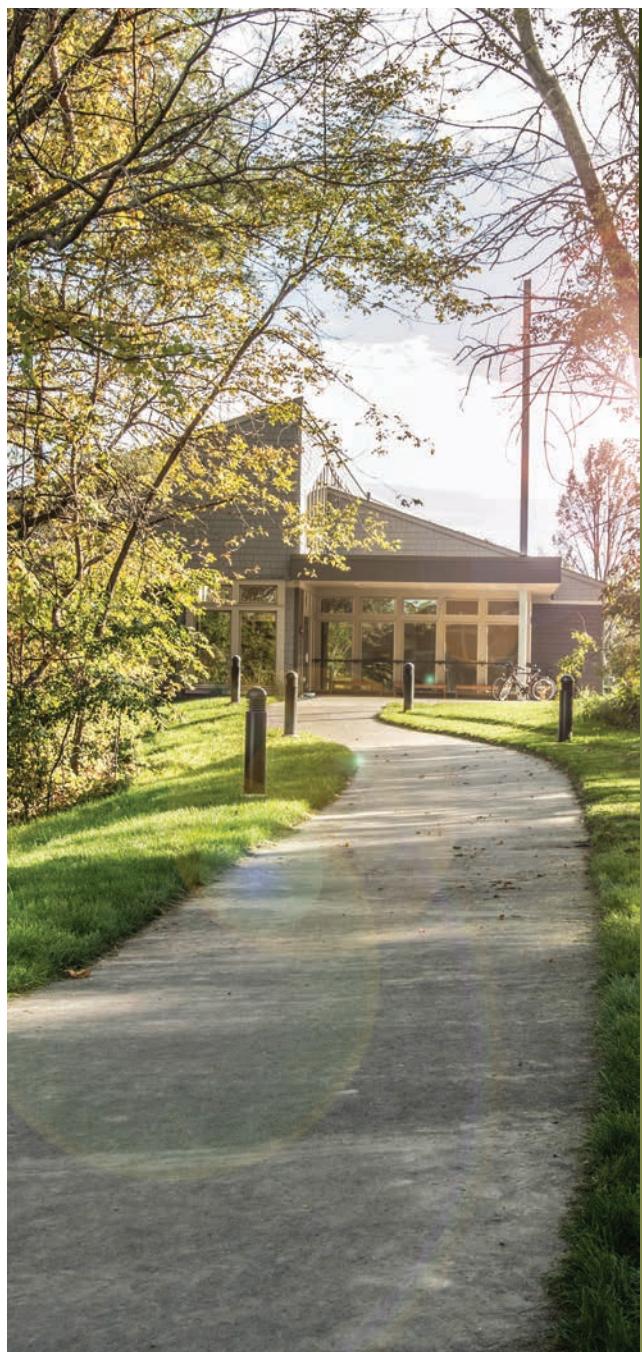
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