Loving Families for Growth and Change, Enablement Prevention

Presented by TLPI
1. Educate the professionals and community members about the dynamics of enablement.
2. Demonstrate how substance abuse infiltrates and damages culture and traditions and how to prevent further damage.
3. Propose possible solutions to reverse cultural drain/enablement continuation on a community.
4. Demonstrate the importance of a healthy community with safe zones for healthy community members while promoting healthy community values and safety.
Have you ever felt like loving your family member just wasn’t enough to help them.

Hearts will never be practical until they are made unbreakable." – Wizard of Oz
The Ebola Virus

3D model of Ebola virus, the causative agent of a severe form of viral hemorrhagic fever in human with a 50–90% fatality rate. The Ebola virion is 80 nm in diameter and up to 1,400 nm long. It contains both virus-encoded proteins (maroon shades) and structures taken from the host cell (gray shades). The model is based on X-ray analysis, NMR spectroscopy, and general virology data published in the last two decades.

GP is a transmembrane fusion protein. It forms trimers on the virion surface and mediates virus attachment and entry to the host cell. [1]

The viral membrane may contain human proteins, such as components of the histocompatibility complex or other surface receptors [2], which — in some cases — can increase the infectivity of the enveloped viruses. [2, 4]

VP40 and VP24 are Ebola major and minor matrix proteins. They form a layer beneath the membrane and are crucial for virus budding. [5, 6]

Ebola RNA is packed with the NP protein. Together, they make a nucleocapsid — a spiral structure in the very center of the virion. [7]

L stands for the large Ebola protein — the polymerase. It is responsible for the synthesis of positive-sense virus RNA. [8]

VP35 and VP30 are minor Ebola proteins. They act as interferon antagonists and transcription activation factors. [9, 10]

The budding viral particle is wrapped in the lipid membrane taken from the human cell. [11]

*For more information and references visit www.visualsciencecompany.com/ebola
Fever
Severe headache
Muscle pain
Weakness
Fatigue
Diarrhea
Vomiting
Abdominal (stomach) pain
Unexplained hemorrhage from body orifices
OMG HOW MANY HAVE DIED FROM EBOLA IN THE USA ????????????
So far, eight *Ebola* patients have been treated in the USA for Ebola: Six became infected in West Africa: three doctors, three nurses, an NBC News cameraman and Thomas Eric Duncan, the first to arrive undiagnosed and the first to die. Eric Duncan was the *ONE* USA causality to EBOLA.
LETS MAKE OUR OWN DISEASE
FIRST LETS LIST OUR SYMPTOMS
Some Suggestions

Vomiting
Shakes/Tremors
Diarrhea
Headache
Bloodshot eyes
Inability to sleep
Excessive sleeping
Chronic pain
Deterioration of physical appearance
Unusual smells from body and breathe
Impaired Coordination
366 Billion Dollars
196 People Per Day
196 People a day
Love can help a loved one fight through a disease with support but it can’t help cure it.

In fact this horrible disease will use your love to help to keep your family member/friend sick.
Yes it is a disease
An addict in active addiction does not see that there is a choice. It takes an intervention for the addict to realize that there is a choice. Abstinence is the only way to start to make rational choices. This requires the drug has to be out of system.
When actively using, the addict is not in control, the drugs are in control. The only thing your love is doing is allowing yourself to be victimized by the disease and allowing the disease to have a stronger hold on your loved one.
Very RARELY IS SOMEONE LOVED INTO RECOVERY

Don’t rescue the alcoholic or addict. Let him experience the full consequence of his or her disease.
The addict is powerless against the substance as long as the addict is actively using and stimulating the pleasure center of the brain.
Avoid anger as anger leads eventually to pity and enablement.
Don’t financially support the addict or their addiction.

Anything can become currency to a Substance Abuser.
Only set boundaries you can keep.
Don’t make idle threats.
Don’t accommodate the illness

Dim and Dash
BEING A HOUSEGUEST

Dim overstays his welcome.

Dash knows fish and visitors stink after three days.

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Initiation into excessive substance use may occur during periods of rapid social change, often among cultural groups who have had little exposure to a drug and have not developed protective normative behavior.

This leads to trauma of a community system and a warping of traditional cultural values.
Anomie, or loss of a healthy ethnic or cultural identity or a warping or blending of the substance abuse culture into the normal culture creating a type of Frakenculter.
A drug culture has its own history (pertaining to drug use) that is usually orally transmitted.

It has certain shared values, beliefs, customs, and traditions, and it has its own rituals and behaviors that evolve over time.

Members of a drug culture often share similar ways of dressing, socialization patterns, language, and style of communication. Some even develop a social hierarchy that gives different status to different members of the culture based on their roles within that culture.
People start to identify with the culture they are exposed to the most and start to identify more with a subculture more.
So which culture is exposed more to the most those most vulnerable
Must create safe environments for sobriety
Must treat this as **SERIOUSLY** as ANY OTHER DEADLY DISEASE
Must have the entire system on board
Community
Family
Must be a united front
Abusers

A pattern of the following for 1 year or more:

- Work/School performance are negatively affected.
- Takes part in reckless behaviors.
- Continued use even though it negatively impacts life, work or relationships.
- Legal problems, financial problems, problems w/law enforcement as a result of substance use.
Addiction

Addiction is more severe than abuse.

Use leads to tolerance (one needs to use more substances to get the desired affect)

Being unable to stop once use starts. (One is too much and 1000 isn’t enough)

Exceeding self-imposed limits (I’ll only have one hit)

Spends excessive time getting or using drugs

Taking a drug despite deteriorating health

Binging
Withdrawal
Craving/Compulsion
Fine line or edge between addict and abuser. Once that line is crossed there is no going back.
The Three “ENDS” of untreated addiction

I told you
I was sick.

Sue Rangell
1964 - 2013
For More Information . . .

TLPI believes in providing resources free of charge, or at minimal cost, whenever possible.

Visit www.tlpi.org

or

contact:

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