



# St. Athanasius Theological Seminary

A Program Under the Coptic Orthodox Diocese of the Southern United States



## Pastoral Theology II – (Counseling)

# Addiction

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***All things are lawful for me, but not all things are helpful. All things are lawful for me, but I will not be brought under the control of any (1 Corinthians 6:12)***

# Addiction

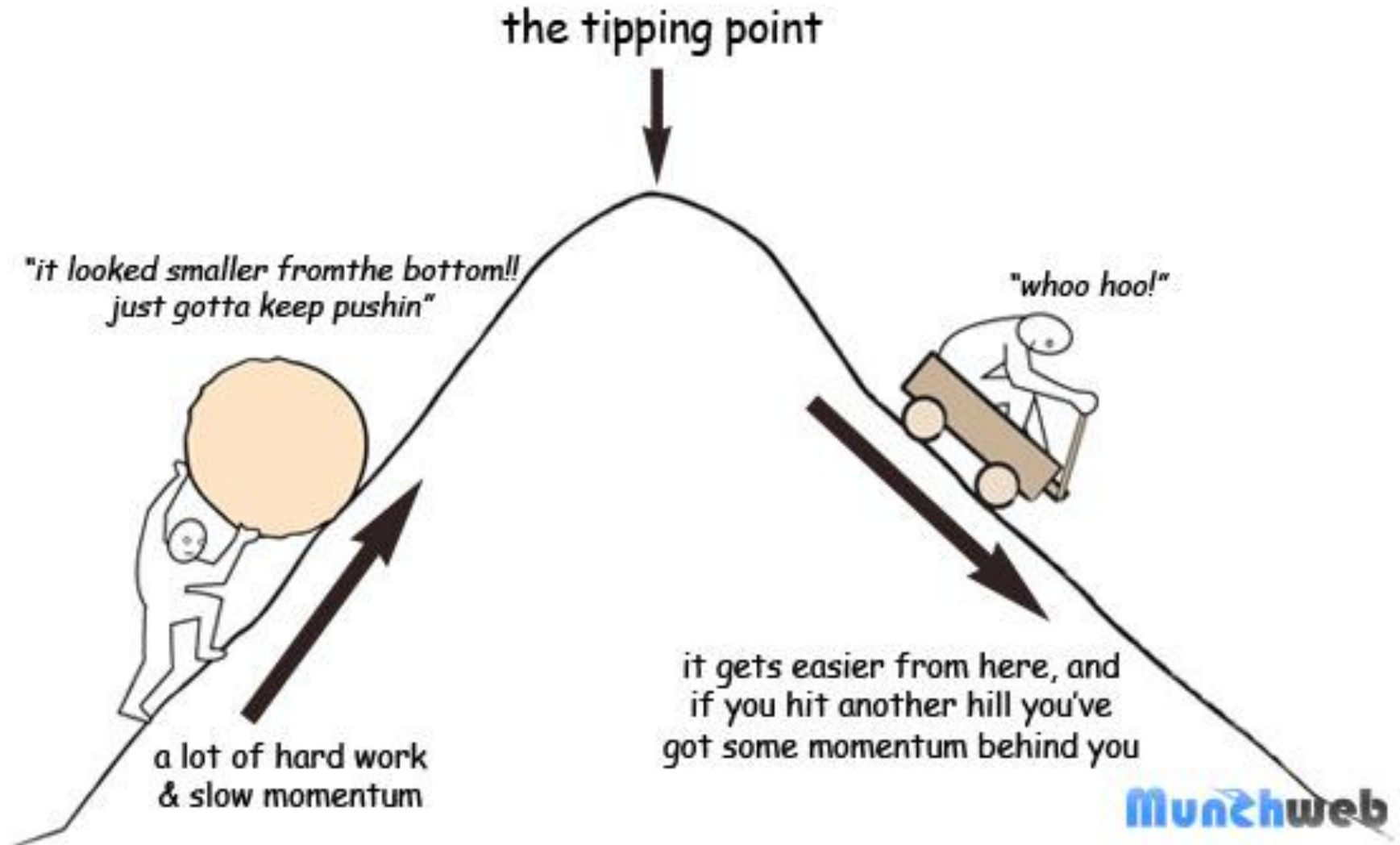
- **Addiction: various definitions in textbooks and dictionaries: e.g. “Addiction is a brain disorder characterized by compulsive engagement in rewarding stimuli, despite adverse consequences” (Wikipedia)**
- **In the *Diagnostic & Statistical Manual, 5<sup>th</sup> Edition* (DSM-5), “substance use disorder” has replaced the two categories in DSM-IV: “substance abuse”, and “substance dependence”**

# Addiction - Basics

- **Hedonic stimulus:** a stimulus that would evoke a pleasurable feeling or experience. This may be a substance, a 'call' for an activity, or an action.
- **Reward system:** the mechanism or channel that results in reward
- **Behaviorism:** psychological approach to studying factors affecting learned behavior, outside of cognitive or "higher" mental processes
- **Reinforcement:** strengthening or encouraging a behavioral response
- **Extinction:** weakening or discouraging a behavioral response

# Addiction - Basics

- **“Hitting bottom”**: reaching the lowest point morally and emotionally (the individual feels helpless, hopeless, sometimes suicidal)
- **Tipping point** – point at which there is a dramatic change of behavior.
- **Yielding**: giving way under pressure - to temptation or to the Spirit. *“Neither yield ye your members as instruments of unrighteousness unto sin: but yield yourselves unto God”* (Rom 6:13) KJV



***The battle does not end here, but you get momentum for the next hill...***

# Addiction - Aspects

**Addiction is the best example of the interplay between biology, psychology, and theology.**

- **Biology: neurotransmitters, receptors, physiological pathways of reward**
- **Psychology: reward vs. aversion**
- **Theology: sin vs. purity**

# Dimensions of Addiction

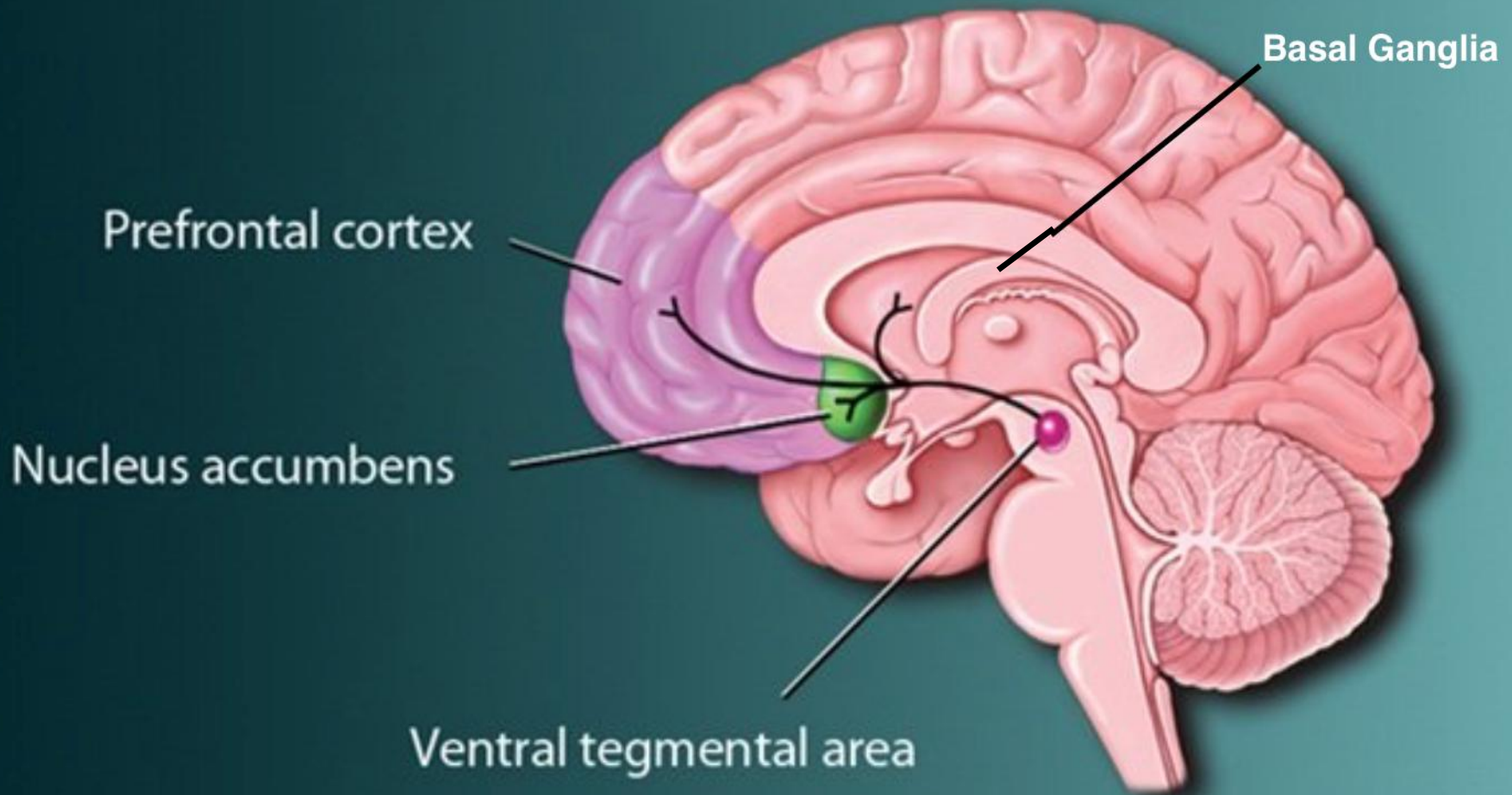
- Physical/biological: involves the patterns of neurochemical changes mentioned above.
- Psychological: “Psychological dependence, also referred to as *habituation*, is characterized by a continuous or intermittent craving (i.e., intense desire) for the substance to avoid an unpleasant state” (Sadock, 11<sup>th</sup> Ed)
- Spiritual dimension: based on desires of the flesh as explained in the Bible – usually ignored in secular circles.

# I. Biological Dimension

- There are common neurochemical and neuroanatomical substrates found among all addictions, whether it is to substances or to gambling, sex, or eating: these involve specific reward areas of the brain, such as the ventral tegmental area, the locus ceruleus, and the *nucleus accumbens*.
- Dopamine 1 (D1) receptors , especially in the *nucleus accumbens*, have been implicated in the reward and reinforcement process (E. Nestler)



# Reward Areas and Hedonic Centers



# Abuse vs. Dependence

- **The DSM-IV gave clear distinctions compared to the DSM-5, with detailed criteria.**
- **Brief definitions:**
  - **Abuse: use of any substance in a manner that deviates from social or medical patterns**
  - **Dependence: develops when the neurons adapt to the repeated drug exposure and only function normally in the presence of the drug (NIDA)**
  - **Withdrawal: When the substance is withdrawn or stopped abruptly, several physiologic symptoms occur. These could be mild (e.g. caffeine), or severe (e.g. alcohol)**
  - **Tolerance occurs when the person no longer responds to the drug in the way that person initially responded. Stated another way, it takes a higher dose of the drug to achieve the same level of response achieved initially.**

## II. Psychological Dimension

- **Loss of control involving repetitive use of a substance or doing a pleasurable activity**
- **It is usually a chronic situation**
- **Does not involve the use of a chemical substance: e.g. sexual addiction, media (e.g. effect of “likes” on Facebook)**
- **The cycle: often starts with curiosity, exploration, experimenting, reward, repetition, increased use, loss of control**

# III. Spiritual Dimension

- God's purpose for us is to have abundant life (John 10:10) - but:
- God's will is our sanctification - 1 Thes 4:3
- God's desire is that our joy be complete – John 15:11
- Only God can provide the condition of “wholeness” in all dimensions: *“Now may the God of peace himself sanctify you completely, and may your whole spirit and soul and body be kept blameless at the coming of our Lord Jesus Christ”* - 1 Thes 5:23

# **Spiritual Dimension: Difference between Joy and Pleasure**

## **PLEASURE**

- 1. Superficial – skin, eyes, taste, feelings**
- 2. Temporary**
- 3. Depends on circumstances**
- 4. Based on senses**
- 5. Physical & emotional**
- 6. Negative consequences (e.g. legal, financial)**
- 7. Often sinful**
- 8. Leads to bondage**

## **JOY**

- 1. Deep, in the heart, not from senses**
- 2. Enduring**
- 3. Resistant to circumstances**
- 4. Based on faith in Christ**
- 5. Biblically: fruit of the Spirit**
- 6. Positive consequences**
- 7. Not sinful**
- 8. Rooted in freedom**

# **Spiritual Dimension: The Desires of the Flesh**

- **The Bible often refers to the “flesh” and the “Spirit”, or the “inner man” and “outer man”, or the “old” and “new” creation.**
- **The works of the flesh are clearly described in multiple parts of the Bible, in lists, with many emotional and mental ramifications**
- **The Bible and the history of the Church are replete with examples of people who gave way to the flesh, and others who surrendered to the Spirit.**
- **The road to addiction is when pleasure becomes a master or a god.**

# Spiritual Dimension: Loss of Control

- Almost 2000 years ago, the apostle St. Paul said by the Holy Spirit: *“But know this, that in the last days perilous times will come: For men will be lovers of themselves, lovers of money, boasters, proud, blasphemers, disobedient to parents, unthankful, unholy, unloving, unforgiving, slanderers, without self-control, brutal, despisers of good, traitors, headstrong, haughty, lovers of pleasure rather than lovers of God, having a form of godliness but denying its power. And from such people turn away!” 2 Tim 3:1-5)*
- Note the competition between “love of pleasure”, and “love of God”
- The fruit of the Spirit includes self-control (Gal 5:22)

# **Works of the Flesh – More than Biology**

- In the first century, the main known drug was alcohol (probably also cannabis). The focus was on sinful, pleasurable desires of the flesh**
- Eph 5:3-6: “But fornication and all uncleanness or covetousness, let it not even be named among you, as is fitting for saints.... For this you know, that no fornicator, unclean person, nor covetous man, who is an idolater, has any inheritance in the kingdom of Christ and God.”**
- Matt 15:19: “For out of the heart proceed evil thoughts, murders, adulteries, fornications, thefts, false witness, blasphemies. These are the things which defile”**



# Works of the Flesh – Loss of Control

- **Galatians 5:19-21:** Now the works of the flesh are evident, which are: adultery, fornication, uncleanness, lewdness, idolatry, sorcery, hatred, contentions, jealousies, outbursts of wrath, selfish ambitions, dissensions, heresies, envy, murders, drunkenness, revelries, and the like; of which I tell you beforehand, just as I also told *you* in time past, that those who practice such things will not inherit the kingdom of God.”
- **1 Cor 6: 9-10,** “Do you not know that the unrighteous will not inherit the kingdom of God? Do not be deceived. Neither fornicators, nor idolaters, nor adulterers, nor homosexuals, nor sodomites, nor thieves, nor covetous, nor drunkards, nor revilers, nor extortioners will inherit the kingdom of God.”

# The Battle Between Flesh and Spirit

- We are all addicted to sin, *“All have sinned and fallen short of the glory of God”* – Rom 3:23
- It is a daily battle: *“I say then: Walk in the Spirit, and you shall not fulfill the lust of the flesh. For the flesh lusts against the Spirit, and the Spirit against the flesh; and these are contrary to one another, so that you do not do the things that you wish. But if you are led by the Spirit, you are not under the law.”* (Gal 5:16-18)
- It is a bloody battle: *“You have not yet resisted to bloodshed, striving against sin.”*

# The Biblical Approach

- The Perfect One is Jesus Christ: subjected to temptation (Matt 4), without sin: *“For we do not have a High Priest who cannot sympathize with our weaknesses, but was in all points tempted as we are, yet without sin”* (Hebrews 4:15)
- As long as we live in the flesh, we will struggle with sin. The best description of this struggle is in Romans 6 and 7.
- Victory is in Jesus Christ: Romans 8.
- The Coptic church gives us excellent means of spiritual disciplines for purity: confession, guided prayers, vigils, *fasting*, examples (e.g. saints), means of grace (Holy Eucharist, sermons, Bible studies, retreats, meditation)
- Practically, loving God with all our being (Matt 22:37) will quash sinful desires.

# **Biblical & Church Examples**

**Practical/emotional consequences:**

- **Of pride: king Saul – confusion, failure, suicide**
- **Of adultery: king David – depression, family feud, son committed rape/incest**
- **Of victory: Joseph, son of Jacob (Gen 39)**
- **Of betrayal: Judas Iscariot – suicide**
- **Of desires of the flesh: Essau – loss of birthright, grief & anguish**
- **Of repentance, freedom, and peace in the Church: St. Moses the Strong, Baeesa, St. Mary of Egypt.**

# Addiction: Traps

- 1. Free time**
- 2. Lack of supervision**
- 3. Loneliness**
- 4. Sense of void, loss of purpose**
- 5. Need to “escape”**
- 6. Having the means: e.g. pay day**
- 7. Peer pressure**
- 8. Curiosity and jealousy**
- 9. Bad company or “friends”**
- 10. Distraction from heavenly goal**

# **Addiction: Behavioral Signs**

- **Secrecy, sneaking, isolation**
- **Declining performance (work or school)**
- **Unexplained behaviors (e.g. being out of sight, closing door, distancing from family)**
- **Unexplained outings, long hours**
- **Giving unconvincing explanations, lying**
- **Excessive or unexplained spending**
- **Disappearing from church**
- **Mood changes, depression, hopelessness**
- **Thought changes – paranoia/delusions**
- **Distraught family coming to spiritual leader**

# **Addiction: Physical Signs**

- **Appetite change, weight gain (e.g. marijuana) or weight loss (cocaine, stimulants)**
- **Sleepiness or sleeplessness**
- **Changes in energy levels**
- **Pupil size (small - opioids; big – stimulants)**
- **Tremor, sweating, vomiting, muscle twitches**
- **Subjective complaints: dizziness, nausea, blood pressure changes, palpitations, diarrhea, etc**

# **Addiction: trails**

- **“Stashes” of drugs/substances**
- **Emails, texts, files, bookmarks, Facebook posts, Internet history**
- **Drug paraphernalia e.g. pipes**
- **Notes**
- **Financial statements, copies of checks**



# Substance Use Disorders

- **The DSM-5 specifies two categories of substance-related disorders:**
  - **Substance use disorders**
  - **Substance-induced disorders (e.g. psychosis or depression due to substance use)**
- **These substances produce such intense activation of the reward system that normal activities may be neglected.**

# Substances of Abuse

## Categories:

1. **Depressants (alcohol, benzodiazepines, barbiturates)**
2. **Stimulants (e.g. amphetamines, methamphetamines, cocaine)**
3. **Opioids**
4. **Hallucinogens**
5. **Inhalants**
6. **Cannabis (marijuana)**
7. **Others (e.g. nicotine, caffeine, DXM, bath salts, etc.**
  - *Note: Alcohol is kept as a separate category from other CNS depressants*
  - *Phencyclidine (PCP) is kept as a separate category from other hallucinogens.*

# **Substance Use Disorders - General**

## **General Criteria (per DSM-5)**

### **Problematic pattern of use:**

- 1. Larger amount/longer than intended**
- 2. Unsuccessful efforts to cut down or control**
- 3. Activities and efforts to obtain the substance**
- 4. Craving**
- 5. Failure to meet obligations due to use**
- 6. Continued use despite bad consequences**
- 7. Encroachment on regular activities**
- 8. Use in hazardous situations (e.g. driving)**
- 9. Use despite knowledge of the problem (addiction)**
- 10. Tolerance (more is needed to get the same effect)**
- 11. Withdrawal when stopped (if applicable)**

# Alcohol Use Disorder

- **Prevalence varies markedly by age, gender, and race (4% to 16%)**
- **Likely to start in the mid-teens**
- **Course is variable – usually remission and relapse. “Binge” pattern common.**
- **Genetic and cultural factors are influential**
- **Has a well-known withdrawal syndrome – the “shakes” (delirium tremens)**
- **Tolerance very common**
- **Multiple known medical complications**
- **Spiritual – described in the Bible (e.g. Prov 23:21; Eph 5:18; 1 Pet 4:3; Prov 20:1; Rom 13:13; Gal 5:21, etc.)**

# Depressants: Benzodiazepines

- A family of controlled substances (Schedule IV), that are medically used for anxiety, detox from alcohol, and some neurological conditions
- Very popular and common on the streets
- Examples: Valium, Klonopin, Ativan, Xanax, Librium
- All are CNS depressants, work similarly. Tolerance very common. Main difference is onset and duration of action
- The short acting (e.g. Xanax) ones are “more addictive” than the longer acting (e.g. Klonopin)
- Withdrawal syndrome is serious and dangerous – similar to alcohol, up to seizures.

# **Depressants: Barbiturates**

- **Are not as commonly used as before**
- **Examples include phenobarbital, pentobarbital, secobarbital, amobarbital**
- **Still used on the streets (barbs, blue devils, goofballs)**
- **Dangerous due to causing respiratory depression**
- **Main medical use is for seizures treatment**

# Depressants - Intoxication

- **Similar features for alcohol, benzodiazepines, and barbiturates**
- **Cross tolerance occurs**
- **Features: disinhibition, slurred speech, unsteady gait, impaired memory, poor coordination.**
- **Respiratory depression (more than additive if alcohol + depressant drugs used)**

# **Depressants - Withdrawal**

- **Very similar for alcohol and depressant drugs**
- **Nervous system arousal: tremor, insomnia, severe anxiety, up to seizures**
- **High pulse, blood pressure**
- **Hallucinations – mostly visual**
- **Delirium – confusion, disorientation**
- **Starts about the second day, and may last for a week (depending on severity of abuse)**



# Stimulants - General

- **Examples: generic names: amphetamine, dextroamphetamine, methylphenidate (C II)**
- **Brand names: very commonly used illegally: Adderall, Ritalin, Vyvanse**
- **Street drugs: methamphetamines (crystal meth), “speed”, “ice”**
- **Smoked, snorted, or ingested (pills), or injected (powder, crushed pills)**
- **They produce alertness, euphoria, increased energy, decrease appetite/weight loss**
- **They can cause paranoia in higher doses**

# Stimulants: Cocaine

- **Causes intense stimulation, with rapid pulse, high blood pressure, tremor**
- **Stroke & heart attacks are not uncommon**
- **Quick effect, but brief high, followed by 'crash'**
- **Tolerance develops to the "high", but paranoia increases**
- **Can be snorted, smoked ('crack'), or injected**

# Stimulant Intoxication

- **High pulse, blood pressure, palpitation**
- **Dilatation of pupils**
- **Nausea, vomiting**
- **Agitation, tremor**
- **Confusion, fatigue**
- **Sweating, chills**
- **Decreased appetite**

# Stimulant Withdrawal

- **Fatigue**
- **Unpleasant mood, irritability**
- **Tiredness, sleepiness**
- **Vivid, unpleasant dreams**
- **Increased appetite**

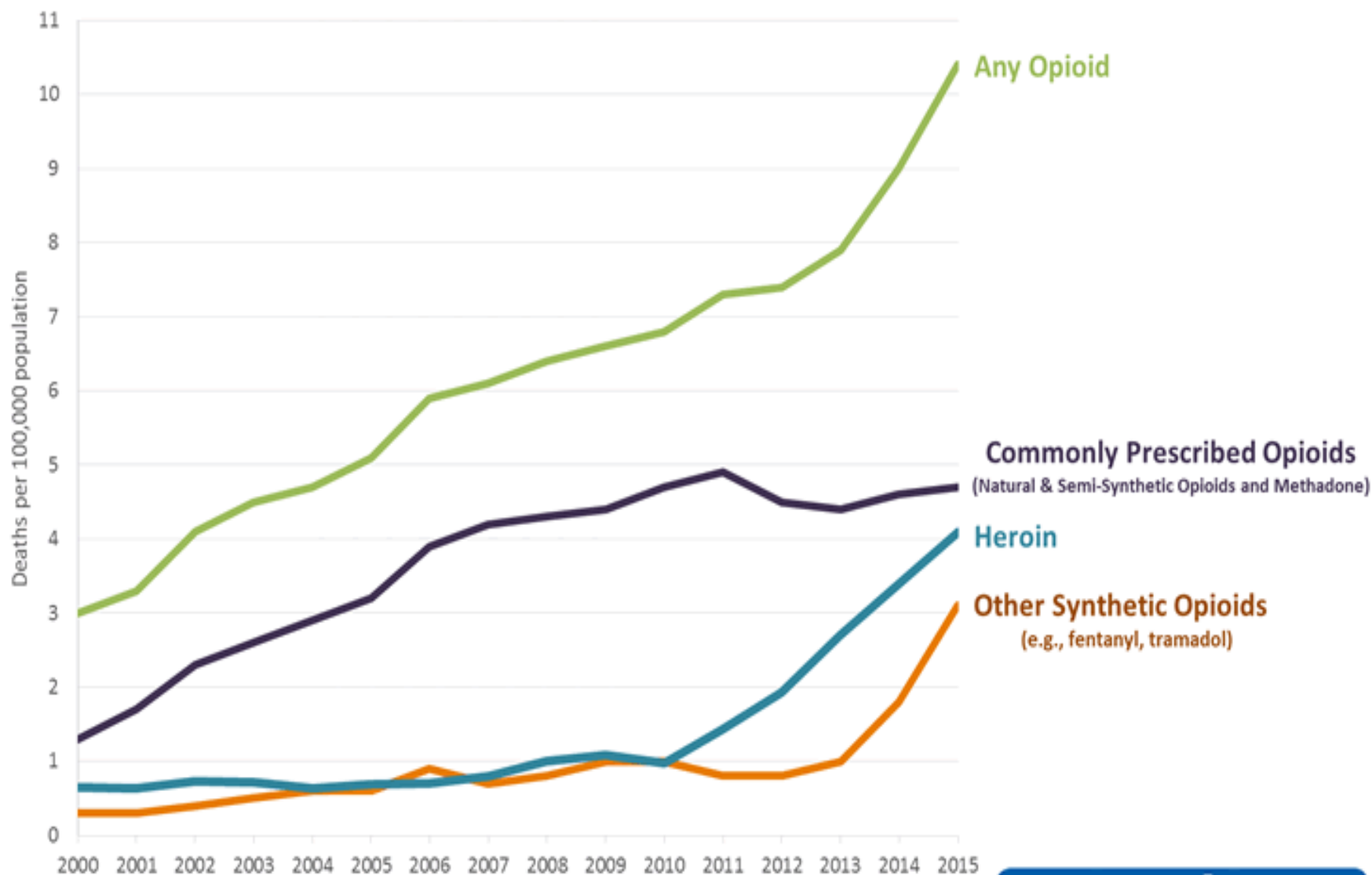
# Opioid Use Disorder

- Narcotic pain killers – very commonly used after surgical or dental procedures
- Not all pain killers are opioids. There are many prescription meds of different types
- Examples: generics: hydrocodone, oxycodone, methadone, morphine, codeine, *heroin*
- Brand: Lortab, Percocet, Dilaudid, Demerol, Norco, Tylenol No. 3, etc.
- Used as tablets. Some by injection (e.g. heroin, morphine). Illegally crushed and injected.

# **Opioid Use Disorder (cont.)**

- Suboxone: introduced to treat opioid addiction, but has also been used illegally.**
- In the past several years, the epidemic has been alarming – numerous deaths**
- Cause of death – respiratory depression**
- Most potent agent: Fentanyl (patch)**
- Most dangerous if added to other respiratory depressants – e.g. benzodiazepines**

# Overdose Deaths Involving Opioids, United States, 2000-2015



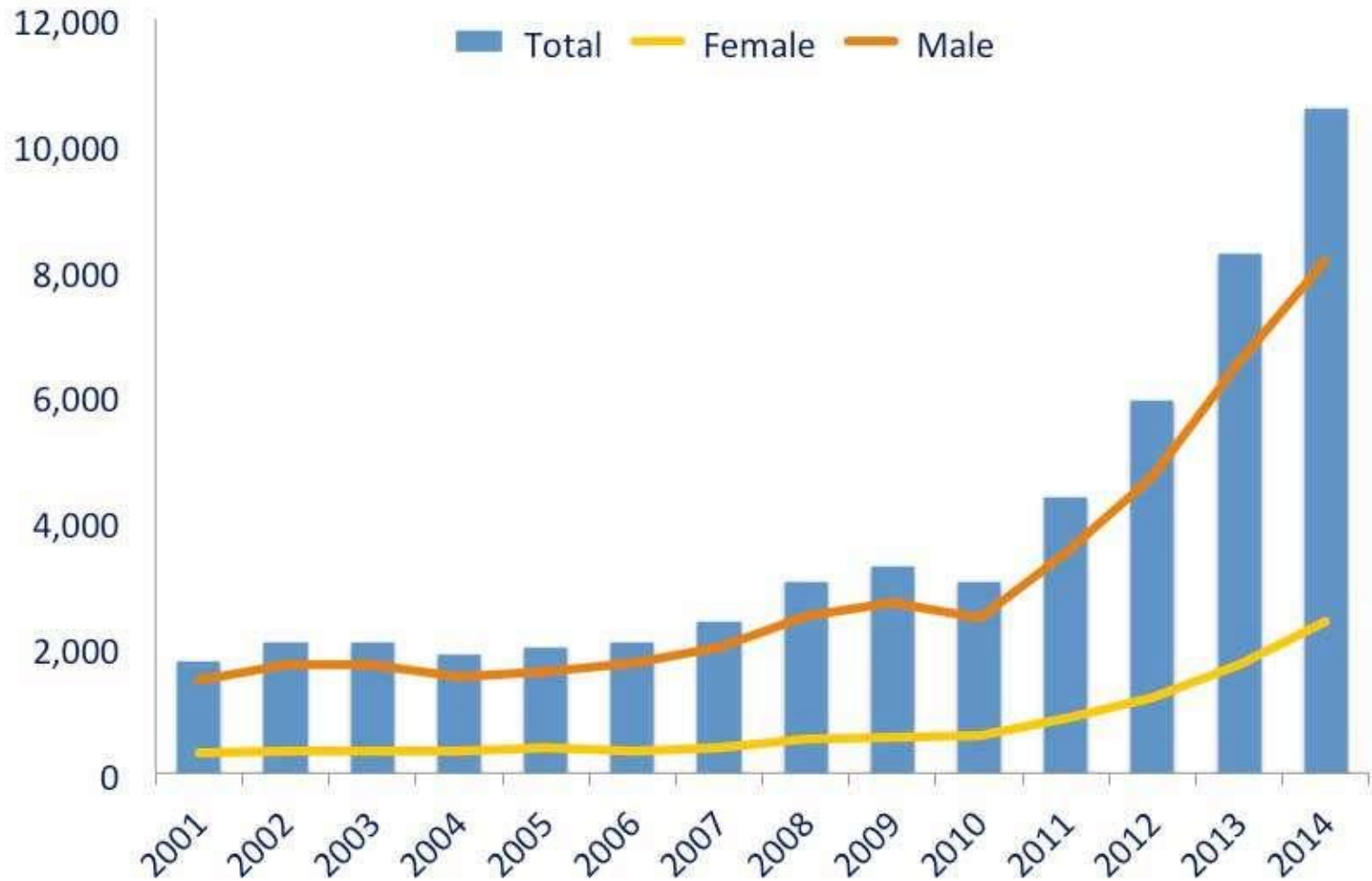
SOURCE: CDC/NCHS, National Vital Statistics System, Mortality. CDC WONDER, Atlanta, GA: US Department of Health and Human Services, CDC; 2016. <https://wonder.cdc.gov/>.

[www.cdc.gov](http://www.cdc.gov)  
Your Source for Credible Health Information



# National Overdose Deaths

## Number of Deaths from Heroin

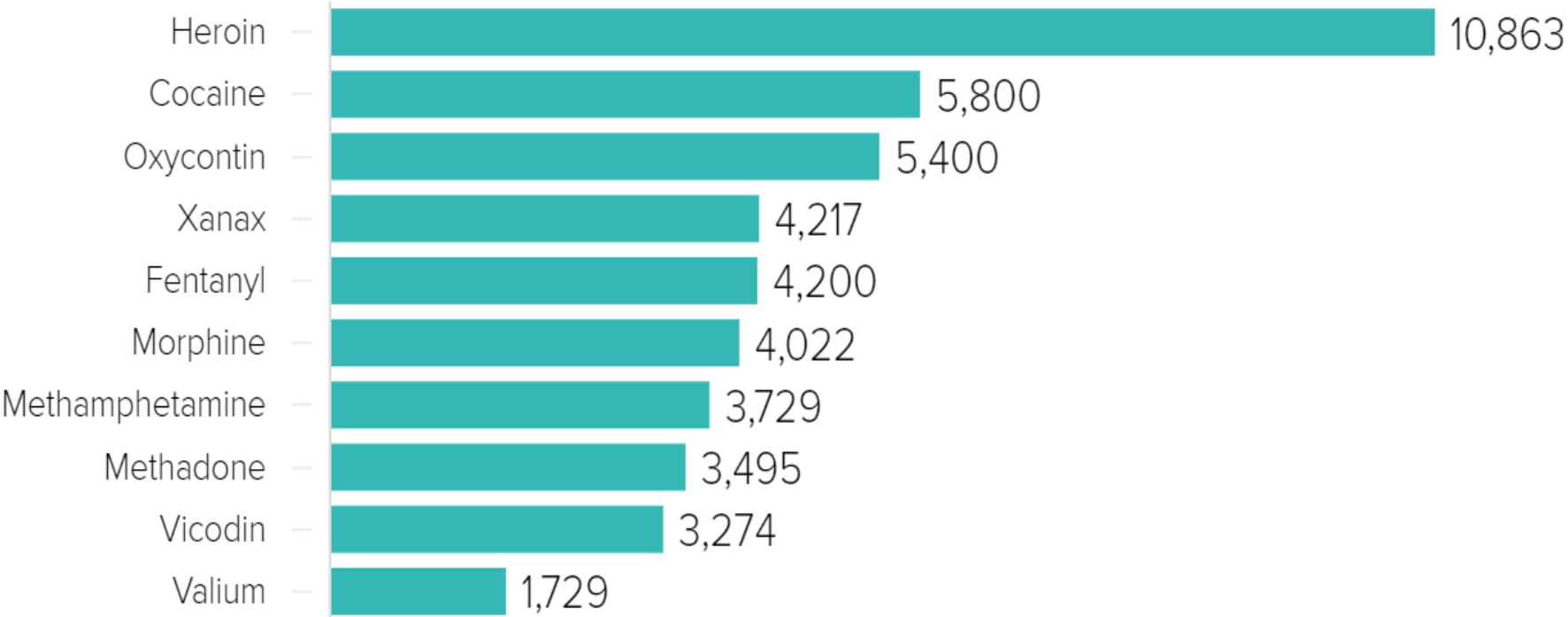


Source: National Center for Health Statistics, CDC Wonder



# Drug Overdose Deaths in 2014

## Deaths



# Hallucinogen Use

- **Hallucinogens: a diverse group of substances that, despite having different chemical structures, produce similar alterations of perception, mood, and cognition in users**
- **In the DSM-5, it is classified as:**
  - **PCP (phencyclidines – including ketamine) related disorders**
  - **Other hallucinogen related disorders**
- **Same broad criteria of misuse, including tolerance**
- **Other hallucinogens include: mescaline, LSD, psilocybin, MDMA (ecstasy), DMT, others**
- **Usually taken orally. PCP is smoked, ingested, snorted, or injected.**
- **Cannabis is not included in this category in the DSM-5 (different symptoms & features)**

# Hallucinogens: PCP Intoxication

- **Behavioral effects: belligerence, assaultiveness, impulsiveness, unpredictability, psychomotor agitation, impaired judgment), or hallucinations during or shortly after use.**
- **Physiological effects: high BP & pulse, numbness, sensitivity to sound, nystagmus, gait disturbance, muscle rigidity, poor articulation (dysarthria)**
- **Dissociation may occur: feeling of disconnection of mind and body**
- **Some long-term users of PCP are said to be “crystallized,” a syndrome characterized by dulled thinking, decreased reflexes, loss of memory, loss of impulse control, depression, lethargy, and impaired concentration**

# Inhalant Use

- **Inhalants: volatile hydrocarbons - toxic gases from glues, fuels, paints, thinners, propellants, sprays, etc.**
- **They are easily available, and cheap**
- **Most common among the poor, adolescents.**
- **Often co-occurs with conduct disorder, mood disorders, suicidality, and physical and sexual abuse or neglect.**

# Inhalant Intoxication

- **Behavioral features: apathy, diminished social and occupational functioning, impaired judgment, and impulsive or aggressive behavior,**
- **Physical features: by dizziness, slurred speech, incoordination, unsteadiness, nausea, anorexia, nystagmus, lethargy, tremor, weakness, diplopia (double vision)**
- **Residue on clothes, smell, may be noticed**
- **Many result in delirium. Long term → dementia**

# Cannabis (Marijuana)

- The most widely used illegal drug in the world
- Legal in some states. Active ingredient: THC
- Implied in: pot, weed, grass, joint, blunt.
- Usually sought for its “relaxing” effects
- Does have significant side effects (memory impairment, increased appetite and weight gain, increased insulin resistance<sup>1</sup>)
- Effects vary with different individuals. Psychotic symptoms depend on duration and heaviness of use, and epigenetic factors.

*1. Diabetes Care, 3/25/2013*

# Cannabis (Marijuana)

- Per DSM-5, it follows the usual pattern of: use disorder, intoxication, tolerance, *and* withdrawal
- Individuals who regularly use cannabis can develop all the general diagnostic features of a substance use disorder\*
- Intoxication features:
  - Behavioral: Impaired coordination, euphoria, anxiety, sensation of slowed time, impaired judgment, social withdrawal
  - Physical: red eyes, rapid pulse, increased appetite, dry mouth

\* DSM-5

# **Cannabis Withdrawal**

- **Recognized in DSM-5**
- **Results from abrupt cessation of daily or near daily use**
- **Features include: irritability, anger or aggression, anxiety, depressed mood, restlessness, sleep difficulty, and decreased appetite or weight loss. Relief by use.**



# Cannabis Use - Consequences

***“Periodic cannabis use and intoxication can negatively affect behavioral and cognitive functioning and thus interfere with optimal performance at work or school, or place the individual at increased physical risk when performing activities that could be physically hazardous (e.g., driving a car; playing certain sports; performing manual work activities, including operating machinery). Arguments with spouses or parents over the use of cannabis in the home, or its use in the presence of children, can adversely impact family functioning and are common features of those with cannabis use disorder” – DSM-5, p. 511 [sic]***

# **Behavioral Addictions**

- **Involve a similar reward mechanism as substance use disorders**
- **Only Gambling Disorder is included in DSM-5**
- **Others include sexual addictions, internet addiction, and social media**
- **Statistics may not be accurate due to the secret nature of the practices**
- **Societal and cultural factors are influential**

# Sexual Addictions

- **Different classifications: e.g. heterosexual, homosexual, paraphilic (voyeurism, exhibitionism, fetishism, etc.)**
- **Availability and declining values have increased it exponentially**
- **Very common in church circles, both genders**
- **Past trauma may be involved (e.g. abuse)**
- **Often co-occurs with other addictions**
- **Management approach – psychological/12-step, spiritual, or ideally - both**

# Statistics - Examples

Pornographic websites	4.2 million (12% of total websites)
Pornographic pages	420 million
Daily pornographic search engine requests	68 million (25% of total search engine requests)
Daily pornographic emails	2.5 billion (8% of total emails)
Internet users who view porn	42.7%
Received unwanted exposure to sexual material	34%
Average daily pornographic emails/user	4.5 per Internet user
Monthly Pornographic downloads (Peer-to-peer)	1.5 billion (35% of all downloads)

## Women and Pornography

Women keeping their cyber activities secret	70%
Women struggling with pornography addiction	17%
Ratio of women to men favoring chat rooms	2X
Percentage of visitors to adult websites who are women	1 in 3 visitors
Women accessing adult websites each month	9.4 million
Women admitting to accessing pornography at work	13%



Source: Family Safe Media

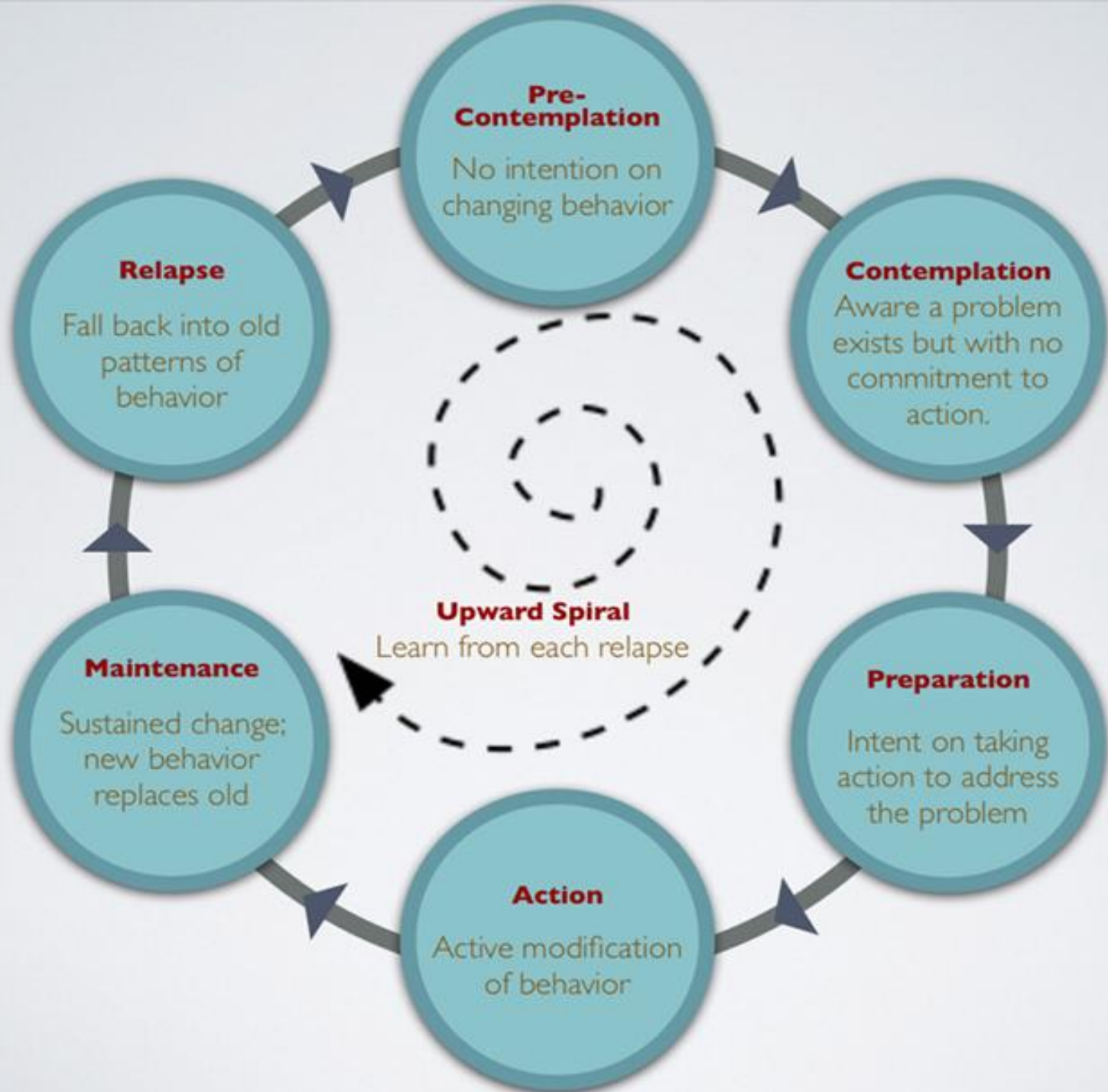
# **Sexual Addiction - Suggested Signs**

- **Persistent pursuit of the behavior**
- **Feeling of shame, distress, or failure (or arguments if confronted, depending on insight)**
- **Repeated attempts to limit or stop the behavior**
- **Irritability, isolation, or depression**
- **Loss of control**
- **Secrecy, excessive spending (time, money)**
- **Engaging in hazardous behaviors (e.g. illegal)**

# Motivational Interviewing (MI)

- **MI is a goal-oriented, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence**
- **Key points:**
  - **Motivation to change is elicited from the client**
  - **Counselor to avoid urge to “persuade” or warn**
  - **Induction by eliciting information from client**
  - **Questions assist in self examination**
  - **Rapport by partnership**

# Stages of Change



# The Three-Dimensional Approach

- The two dimensional approach has been widely used, with degrees of success.
- National efforts in the battle against addictions are huge: NIDA, NIAAA, SAMHSA, etc.
- The three dimensional approach takes in the spiritual side in addition to the biological and psychological
- The “disease” concept, and spiritual disease
- *Is it that easy?!*



# The Gift of Insight

- **Insight: intuitive understanding and discernment of the nature of a person or thing (“seeing inside”)**
- **Applicable to mental health - “Doc, I don’t have a problem, I don’t need fixin’”**
- **The word of God: a spiritual mirror:**
  - **“For the LORD gives wisdom; From His mouth come knowledge and understanding” (Prov 2:6)**
  - **“Who can understand his errors? Cleanse me from secret faults” (Psalm 19:12)**
- **The Holy Spirit is not a “concept”. He is GOD.**
- **Spiritual blindness is the most common disease – due to pride and self-righteousness**

# Studying Romans 6, 7, 8

- **Rom 6 sets the stage: comparison between “slaves to sin” and “slaves to God”**
- **Rom 7: the war between the “law of the flesh” and the “law of God” – leads to St. Paul’s cry, “O wretched man that I am! Who will deliver me from this body of death?” (Rom 7:24)**
- **Rom 8 gives the key to victory – “But if the Spirit of Him who raised Jesus from the dead dwells in you, He who raised Christ from the dead will also give life to your mortal bodies through His Spirit who dwells in you.” (Rom 8:11)**

# Temptation: The Ancient Problem

- “I can resist anything except temptation!!!” (Oscar Wilde)
- Prayer – “Lead us not into temptation”
- God never tempts anyone (James 1:13) but He does allow tests (James 1:2)
- The Cross of Jesus – the ultimate approach: *“Look to the cross, think of the cross, meditate on the cross — and then go and set your affections on the world if you can!”* (J.C. Ryle)
- Confession & the Holy Eucharist



**Oscar Wilde**  
*Playwright*

# The Satisfied Soul

- **A satisfied soul loathes the honeycomb, but to a hungry soul every bitter thing *is* sweet (Prov 27:7)**
- **Learning to reach the deep-seated joy and satisfaction in God and His word.**
- **“It is to set our hearts upon the supremacy, sufficiency, and beauty of the Lord Jesus Christ. It is in this posture of continual satisfied delight in Jesus that the lusts of our flesh and this world evaporate” *Erik Raymond***



# Saying “NO”

- The three saintly youth said, “No”
- Joseph said, “No, how can I...?!”
- *“If we are not walking against the worldly and fleshly current in pursuit of holiness than perhaps we are lifelessly floating downstream.”*

*Erik Raymond*

# **Triumphant Christian Recovery Center**

- **Under the Coptic Orthodox Diocese of the Southern U.S. and the supervision of H.G. Bishop Youssef. The campus is located in Brooksville, Florida.**
- **Goal is building a refuge for the spiritual, emotional, and physical regeneration of men who struggle with addiction**
- **Prayer, Bible studies, devotions, group therapy**
- **Divine liturgy regularly, and sacraments of confession and Holy Eucharist**
- **Activities, campus chores, and sports.**



**THE MIND SET ON THE SPIRIT IS LIFE AND PEACE**  
**- ROM 8:6**