



Read: Matthew 7:7-12

What if we as United Methodists, located in every corner of the West Virginia Conference, really took the time this Lent to fast, pray and listen for God's call to respond to the opioid epidemic?

Fast: What if we set aside food for a day or a meal? What if when we felt a pang of hunger, we stopped what we were doing and prayed

for those who hunger uncontrollably for an opioid? What if we took the time to think about how the addicted person hungers every day for this drug, to the expense of their health, their family and their future? If skipping a meal makes us miserable and irritable along with that little voice in our head that tries to get us to cheat on our fast, how does the person caught in addiction feel every day?

Pray: What if we set aside time to ask God for guidance? What if we honestly asked God our questions about addiction, and shouted out our fears and frustrations about the addicted? What if we asked God to make clear what our (mine and yours) calling is to respond to this epidemic? What if we asked what our church's calling is? What if we intentionally prayed for the healing of those who suffer from substance abuse disorder, healing for their families, and healing for our communities?

Listen: What if, throughout this time of Lent, we listened for God's call on our lives? What if we listened for a loud booming voice or a still quiet voice or God's guidance in a trusted friend or in the voice of a complete stranger? What if we listened for God's guidance in the crazy busy-ness of the day and in the quiet of our nightly dreams?

Respond: When God calls the body of Christ – everybody part must respond. Now is the time. We all have a calling. We have all been blessed with specific gifts and graces that are needed to end the opioid epidemic. Is this scary? Yes indeed. Is this unfamiliar territory? Yes again. Is God with us? Absolutely!

It is not enough for us to open our church doors and wait for the epidemic to end. We must leave our sanctuaries and enter the battle. Onward Christian Soldiers!

WEEK 1 / DEVOTION



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WEEK 1 / DEVOTION

Opioids – One Family of Drugs

Our current epidemic with opioids began thousands of years ago when someone, most likely in the current area of Turkey, was looking for something to eat and decided to try some part of the seed pod of a poppy. This person's hunger was satisfied, and they had a unique feeling of wellbeing along with their headache being gone! This person told another person, and before long people were harvesting the poppy seeds and brewing them in tea or mixing them with wine.

Homer, the Greek author of Iliad and Odyssey wrote, "Into the bowl in which their wine was mixed, she slipped a drug that had the power of robbing grief and anger of their sting and banishing all painful memories. No one who swallowed this dissolved in their wine could shed a single tear that day, even for the death of his mother or father, or if they put his brother or his own son to the sword and he were there to see it done..."

Over time chemists changed the molecular makeup of the poppy and created opium. Just before the American Civil War, morphine was created from opium. Around the same time came the invention of the hypodermic needle, which helped morphine become a miracle drug for wounded soldiers facing horrible battle field surgeries. Unfortunately, opium and morphine, while great at curbing pain, were very addictive. Heroin was created later during WWI with the hope of making morphine stronger but less addictive...it did not work.

Scientists later were able to create a manmade form of the opioid molecule and thus created hydrocodone, oxycodone, fentanyl and carfentanyl. No longer were the opioid painkillers labor intensive with growing and harvesting poppies, but could be massed produced in factories at a fraction of the cost. These manmade opioids were created for post-surgical use and end-of-life care (to comfort dying cancer patients).

Today we are caught in an addiction epidemic that can be fueled by opium, morphine, oxycodone, hydrocodone, heroin, methadone, fentanyl or carfentanyl, all chemically related to the poppy.

When your physician is helping you deal with pain issues, always ask if what you are being prescribed is an opioid and have a frank discussion about possible addiction issues and other pain reducing drugs that might not be so addictive.



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WEEK 1 / EDUCATION



Read Luke 15:11-32

Jesus' parable of the Prodigal Son is a familiar one. All of the characters and actions in this parable resemble the characters and actions in our opioid epidemic. A child leaves home, parents worry every day, the lost child in their addiction lives in a "far away land," by the grace of God the child may "come to himself" and return

home. The parents and community celebrate the return of the lost child, but the older brother is not thrilled. Did Jesus have our family, church, and community in mind when he told this parable?

Over the next several weeks we will use this familiar parable as our guide to honestly look at the opioid epidemic and ask "What If...?" The hope is that we will not spend our devotion time wondering what if the parents did something different, or what if the prodigal son did not leave, but asking God what can I do to keep this from happening again? What can I do when I meet a child lost in a faraway land? What if I, what if we as the church, were involved in this parable? How could God have used us to prevent, comfort, care for, support and rejoice with the family of the prodigal son?

Read the parable again slowly. Give the characters in the story names of people you know who are directly involved with the opioid epidemic. Ask God where we should be in this parable.

What if God answers our petition?

It is not enough to open the doors of our sanctuary and hope the epidemic ends. We must leave our sanctuaries and enter the story.

WEEK 2 / DEVOTION



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WEEK 2 / DEVOTION

Why We Become Addicted

Have you ever tried to hold your breath for as long as you can? Our brains are created in such a way that we cannot hold our breath too long and lose consciousness on our own. The part of the brain responsible for breathing will override the foolish part of our brain that is trying to harm our body by withholding oxygen. This is the same part of the brain that lets us keep our balance, walk, keep the proper heart rate and breathe all at the same time, without having to consciously think about it. It is the small part of the brain that sits at the top of the brain stem where the nerves enter the brain from the spinal column called the Limbic System. It is in this very powerful area that opioids affect the brain.

When we see a person who is suffering from addiction and wonder why they just do not stop, we might as well be wondering why they cannot just stop breathing. This area of the brain is not ruled by reason or common sense. It is ruled by subconscious desire.

When opioids enter the nervous system, the nerve endings are fooled into believing the opioid is really a naturally produced chemical called dopamine. Dopamine is a chemical that makes us feel pleasure. It is released when we take that first bite of chocolate ice cream, when that special person agrees to go to the prom with us, or when we have accomplished a personal goal. The problem is, opioids cause the body to artificially experience more pleasure and last much longer than ordinary dopamine. Imagine that rush of dopamine after your first kiss lasting all day and making you feel even better!

The addicted person's brain begins to crave this feeling of pleasure. The addicted person's brain cares not about how to pay for the opioid, how the family feels about their addiction, missing work or even food. The addicted brain craves the rush supplied by opioids. Opioids are very powerful and very hard to overcome. Recovery from opioid addiction is a lifelong process, a process that requires courage, strength, endurance and a lot of prayer.



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WEEK 2 / EDUCATION



Read Luke 15:11-32

The Prodigal Son wants to leave home. That is a natural response to growing up that is supposed to happen. Sons and daughters are supposed to leave home and create their own lives. Unfortunately, today many leave their home because their addiction to opioids has made it impossible for them to live in their parent's house.

When a child's life becomes ruled by substance abuse, everyone's lives are affected...in bad ways. It would be a whole lot easier to prevent the addiction in the first place.

Today as you fast, pray, listen, and respond, ask God to show you how we can prevent our children from ever becoming addicted. How do we keep a child from ever falling into the grip of opioids?

What can the church do in the lives of the children in our community (not just the ones in our church, but those that live all around us) that will help prevent them from ever turning to drugs? Ask God to show you who the vulnerable children are in your community. Ask God to help you find these children and get to know them by name. Give God thanks for the adults who knew your name, who cared about your success when you were young.

Drug-endangered children need loving adults to show them they are beloved children of God and are worthy of our time and concern. What if God answers our prayer? Are we willing to mentor a drug endangered child and help prevent them from becoming a prodigal son or daughter?

It is not enough to open our church doors and wait for the children to come to us clean, well fed and well behaved. We must leave our sanctuaries and find them!

WEEK 3 / DEVOTION



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WEEK 3 / DEVOTION

Drug Endangered Children

Persons suffering from opioid addiction are not in control of their lives. Part of their day is spent seeking out opioids. Once the opioids have been acquired and taken, the rest of the day is spent enjoying the high, until it is time to start seeking the next dose of opioid. For the addict, this is a horrible way to live. For the sober adults who love the addicted person, it is a horrible way of life. But imagine the lives of the children of addicted persons.

These children are called Drug Endangered Children. They live all around us and they have no way of understanding what we would call a “normal life.” Many of these children are born dependent on opioids because of their mother’s addiction. The parents of Drug Endangered Children cannot properly care for their own offspring. The children have no one at home to help with or encourage schoolwork, proper hygiene, proper nutrition, or acceptable behavior. These children are exposed to the violence and unpredictability of the illegal drug world, and yet we expect them to succeed in school. We wonder why they do not come to our Sunday School, and we are shocked when they become addicted themselves.

In order to have a chance at a life that is not identical to their parent’s life, the Drug Endangered Children in our neighborhoods need a loving and caring adult to mentor them. A loving adult who shows the child they are valuable and special. What would it cost us to spend time in our local school helping a Drug Endangered Child learn to read or accomplish their multiplication homework...an hour or two each week? Studies show that when a child gets behind in reading and/or mathematics, they are very likely to get discouraged with school and drop out. When a Drug Endangered Child drops out of school, they are much more likely to get involved with drugs than if they stayed in school. Studies also show that if a Drug Endangered Child has a loving, caring adult from outside their family mentor them, the child has a much greater chance at success in school and, in turn, success in life.



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WEEK 3 / EDUCATION



Read Luke 15:11-32

The prodigal son in Jesus' parable had a father. We can surmise that he had a living mother also. When the son left home, was it on good terms or bad terms?

As you fast, pray, listen, and respond today, try to imagine what the parents of the prodigal son felt like as their child walked out

the front door. Did they think they would ever see him again? Did his mom wonder if they would ever simply gather around a dinner table again as a family? Did the mom and dad blame each other for causing the son to leave? Or maybe, was there finally peace in the house after weeks of fussing and fighting?

How long did it take for the parents to start worrying about their child? Had they started to worry before he left, or only after he really left and it was obvious he was not coming home soon? Was their lost child a passing thought during the day, or did their worry consume them all day long? How did they feel as they thought about their son squandering everything they had ever given him? He had so much potential, so many resources...and yet he seemed to be ignoring all common sense and wasting it all.

We have parents and grandparents living all around us today who have watched their children "leave home" because of their addiction to opioids. The very children they would give their lives for have walked out of the door and appear to be squandering their lives away.

Ask God to show you how we can be in ministry to these hurting souls. How would God have us get to know them and walk with them through their valley of shadows? Listen for God's answer...EXPECT God to answer!

It is not enough for us to open the church doors and wait for the parents of the prodigal sons and daughters to come in. We must leave our sanctuaries and find them!

WEEK 4 / DEVOTION



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WEEK 4 / DEVOTION

Recovery and All That Is Involved: Part 1 - Detoxification

Recovery from opioid addiction involves multiple steps. The first step is detoxification. Detoxification is the process of getting the opioids out of one's body. This can take 30, 60, or even more days. It is an extremely painful process where bones and muscles ache, one cannot sleep, there is nausea, extreme diarrhea, muscle cramps, runny nose, high blood pressure, fever, and anxiety. While all of this is going on day in and day out, there is that little voice in their head saying, "You know what will fix this...just another dose of heroin or oxycodone." As one can imagine, it would be very hard to just stop using by oneself in the same neighborhood where one knows where and how to get more opioids.

The experience of detoxification is so painful, addicted persons who have experienced detoxification, but later continue to use opioids, are terrified of experiencing the detoxification process again. Addicted persons call this being "dope sick." Many addicted persons say they would do anything to avoid being "dope sick." This is where many addicted persons get into real legal trouble.

There are some opioid drugs that help a detoxing person avoid being "dope sick." Methadone and suboxone are both opioids but do not cause the high that heroin or oxycodone do. Prescribed by physicians, methadone and suboxone help the addicted person come off stronger opioids and begin long-term recovery without fully experiencing detoxification. The positive to this is that persons can begin to live a normal life. The negative is that the person is still addicted to an opioid and has not truly gotten all of the opioids out of their body.

Being "dope sick" is horrible for an adult. An infant who is born dependent on opioids goes through the exact same detoxification process.



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WEEK 4 / EDUCATION



Read Luke 15:11-32

The prodigal son left home and took his inheritance to a far away land. His parents were left at home wondering if he was safe or healthy, or if he was ever going to return home. Jesus says the prodigal son wasted his wealth and used up all of his resources just as a famine hit the far away land. It was so bad that the only

job he could find was feeding pigs, and his pay was to get to eat what the pigs did not eat.

Today, when we go into town, we see prodigal sons and daughters everywhere. They may not have traveled hundreds of miles, and we may actually know them, but they are truly living in a “far away land.” Their addiction to opioids has cut them off from their home and community, and now they wander around town like strangers.

Today as you fast, pray, listen, and respond, ask God to show you what our response should be for these strangers in a strange land. Should we feed them or ignore them? Should we provide them a warm place to sleep, or chase them off to another town? It is true that they are dirty, are an eyesore, can be scary, and are wasting all that their parents and God have given them. However, they are someone’s child...more than that, they are children of God, just like you and me. Ask God to help you look past their appearance and see the lost children who have parents and a God who are worried about them. What should the church’s response be to the child whose only hope is what the pigs don’t eat?

If your child were lost in a far away land, how would you want them to be treated by a local church?

It is not enough for us to open our church doors and hope the strangers in a strange land sober up, clean up, and come in. We must follow God out of our sanctuaries and feed the hungry, clothe the naked, heal the sick, and welcome the stranger.

Dear God, show us how.



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Recovery and All That Is Involved: Part 2 - Long Term Recovery

Recovery from opioid addiction involves multiple steps.

The first step is detoxification. Detoxification is the process of getting the opioids out of one's body. This can take 30, 60, or even more days. The second step is long-term recovery and it continues for a lifetime.

After the body is free from opioids, it is just beginning to recover. The brain is craving opioids. That little voice that tells us we want some chocolate ice cream when we know we don't need it is shouting to the person in recovery that they must, at all costs, get some opioids. Long-term memories of the high from opioids and the muscle memory of preparing the drug for use, along with the memories of buying the drugs from dealers in certain houses, live a long life in the brains of the recovering addicts. These memories can be very challenging to overcome and the person in recovery must overcome them every day. Can you honestly say that you do not crave hot buttered bread after just smelling it fresh out of the oven? The person in recovery can have the intense craving for opioids hit them at any given moment because of something their brain remembers about their past opioid use. The person in recovery must have support from other persons in recovery, from family, and from friends. They must have the ability to reach out in a moment's notice to someone to help them fight the craving for opioids. A person in recovery will very likely relapse into opioid use again because the brain's craving is so very strong.

A person in recovery is also dealing with their emotional feelings regarding how they have treated the very people who love them. They have to learn to live with the frustration of lost opportunities, lost careers, and lost family members. They may also suffer diseases such as hepatitis and HIV that result from their drug use.

Long-term recovery can begin in a residential program, intense outpatient program, or just on a person's own determination. Many persons trying to recover have to make several attempts at staying in long-term recovery. Cost, availability, and determination all play a part in how a person will begin long-term recovery. Once started, a recovering person needs support from peers, family, and the church in order to stay in recovery.



WEEK 5 / EDUCATION

Recovery and All That Is Involved: Part 2 - Long Term Recovery

Recovery from opioid addiction involves multiple steps.

The first step is detoxification. Detoxification is the process of getting the opioids out of one's body. This can take 30, 60, or even more days. The second step is long-term recovery and it continues for a lifetime.

After the body is free from opioids, it is just beginning to recover. The brain is craving opioids. That little voice that tells us we want some chocolate ice cream when we know we don't need it is shouting to the person in recovery that they must, at all costs, get some opioids. Long-term memories of the high from opioids and the muscle memory of preparing the drug for use, along with the memories of buying the drugs from dealers in certain houses, live a long life in the brains of the recovering addicts. These memories can be very challenging to overcome and the person in recovery must overcome them every day. Can you honestly say that you do not crave hot buttered bread after just smelling it fresh out of the oven? The person in recovery can have the intense craving for opioids hit them at any given moment because of something their brain remembers about their past opioid use. The person in recovery must have support from other persons in recovery, from family, and from friends. They must have the ability to reach out in a moment's notice to someone to help them fight the craving for opioids. A person in recovery will very likely relapse into opioid use again because the brain's craving is so very strong.

A person in recovery is also dealing with their emotional feelings regarding how they have treated the very people who love them. They have to learn to live with the frustration of lost opportunities, lost careers, and lost family members. They may also suffer diseases such as hepatitis and HIV that result from their drug use.

Long-term recovery can begin in a residential program, intense outpatient program, or just on a person's own determination. Many persons trying to recover have to make several attempts at staying in long-term recovery. Cost, availability, and determination all play a part in how a person will begin long-term recovery. Once started, a recovering person needs support from peers, family, and the church in order to stay in recovery.



WEEK 5 / EDUCATION



Read Luke 15:11-32

Somehow, by the grace of God, the prodigal son “came to himself” and realized that the only way he was going to survive was to go home. Some might say he hit bottom and had no where else to go. When he was still a long way off, his father ran out to meet his long-lost son and invited him back into the family.

Today, once-lost sons and daughters are being found and coming home. They are detoxing from opioids and completing rehabilitation programs. At this point in their lives they desperately need our love and support as they begin their lifelong journey of recovery. We do not know what happened to Jesus’ prodigal son the day after the homecoming celebration. Did he live happily ever after at home, or did he—for whatever reason—leave home again?

Today when you fast, pray, listen, and respond, ask God to show you how you can help support, encourage, and love those struggling everyday in recovery in our neighborhood. Ask God to show you where they are and how we can get to know them by name. Ask God to show you how to walk beside a person who is in recovery so they will know they are welcome in our church family.

It is not enough to open our church doors and hope that the prodigal sons and daughters will come in and stay. We must leave our sanctuaries and find these persons while they are “still a long ways off” and walk with them all the way home...step by step.

WEEK 6 / DEVOTION



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WEEK 6 / DEVOTION

Dangers of Opioid Addiction

The person suffering from addiction to opioids faces many dangers. There is the obvious danger of taking too many or too strong a dose and dying from an overdose. Opioids are depressants, which means they slow down a person's breathing and heart rate. Take too many or too strong a dose, and the user can just stop breathing. If an overdosing person is revived and survives, their brain has endured a time of low oxygen, which can result in brain damage in very little time.

Heroin is mixed or "cut" with a multitude of products in order to make it less expensive for the dealer. A heroin user injects or inhales heroin and whatever else it may be cut with. The cutting agents can be: Benefiber, baby powder, baking soda, meat tenderizer, sugar, corn starch, etc. The blood stream is not built to handle these chemicals and flush them out of the system without some damage. The user has no idea what their heroin has been cut with. The cutting process usually starts before the heroin enters the country, and is continued with every subsequent dealer that touches it. Recently, the trend has been to cut the heroin with the very powerful but inexpensive Fentanyl or Carfentanyl to increase the potency of the heroin. Again, the user has no idea how much Fentanyl or Carfentanyl is in their heroin, and their next dose could kill them.

When an addicted person is injecting their dose of opioid and sharing their needles, they are exposing themselves to follow-on diseases. Follow-on diseases like MRSA, hepatitis, or HIV are highly infectious diseases that can kill the addicted person while actively using or even after they have been in recovery.

Because addicted persons have to participate in illegal activities to support their addiction, they expose themselves to a world of violence. Addicted persons are constantly in danger of being the victim of violence or in causing violence in order to supply their need for opioids.

Addicted persons soon separate themselves from their families and communities because of their lone focus on obtaining opioids. The very people who would give anything to see the addicted person healthy again are cut off by the addicted person.

An addicted person is risking their health everyday, be that by overdose, gunshot, or follow-on diseases, and are facing these threats by themselves. The addicted life is miserable and dangerous...not a life anyone would choose.



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WEEK 6 / EDUCATION



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The prodigal son returned to the open arms of his father. Even though the son had left his father's house, wasted half of his father's money, and worried his mother and father to death, when he returned home he was invited back into the full membership of his family—no questions asked—with a party.

The prodigal son's older brother was not as pleased to see his brother. The older brother did not want his brother to be invited back into the family. The older brother had been loyal. The prodigal son had not. Why should he get a second chance at being a family member?

If we are honest—really honest—we understand the feelings of the older brother.

Today as you fast, pray, listen, and respond, ask God to help you really look at that part of your life that is like the older brother. Ask God to help you let go of those feelings so that you can rejoice when the lost are found, the blind see, the addicted are in recovery, and the dead are once again alive!

Ask God to help you put judgements to the side and to see each person you meet as a child of God. Maybe they know they are, maybe they don't. If we begin to treat each person as a brother and sister, who are loved by God just as much as we are, maybe they will experience the love of Christ we are supposed to be offering them.

It is not enough to open our church doors and hope the lost will come in (or as the older brother, hope they won't come in). We must leave our sanctuaries and find the lost, hurting and recovering.

WEEK 7 / DEVOTION



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WEEK 7 / DEVOTION

Narcan

We have all read in the newspapers about Narcan (Naloxone).

Narcan has saved thousands of lives when administered to overdosing persons by first responders or laypersons. Narcan is a drug that blocks the effects of opioids on the nervous system.

When Narcan is administered in a timely manner, it can bring an unconscious person back to full consciousness almost immediately.

Narcan comes in several forms. It can be administered intravenously, it can be injected into a muscle (an auto injector), or it can be sprayed into the nostrils. Laypersons can be trained to use the muscle injector or spray forms by their local health departments. Many families of addicted persons keep Narcan with them just in case their loved one overdoses. Many public places have Narcan available just like heart defibrillators are now commonly seen.

When an overdosing person is revived by Narcan they will also immediately start suffering from withdrawal symptoms (dope sick). Many times, first responders have to fight with a revived overdose victim because they are angry at “losing their high” and feeling dope sick, even though their life has been saved.

Narcan is a fast-acting drug—which is a good thing—but it also has a short life span in the body, which is not such a good thing. Opioids stay in the body longer than Narcan, so when the blocking effect of Narcan wears off, a person can overdose again simply because there was more opioid in the body. There is also the possibility of the revived person using opioids again while the blocking effect of Narcan is still working, which can certainly cause a second overdose when the Narcan wears off. Because of this, it is very important that a revived overdose victim be admitted into a hospital for observation.



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