PART OF THE HITCHHIKER'S GUIDE TO RECOVERY LIBRARY

1

RIGHT NOW

DON'T PANIC

THE FIRST 72 HOURS

What to Do When You Stop Drinking or Using

STEPHEN DEASON

Alder Creek EDITIONS

Don't Panic: The First 72 Hours

NOTES

You are enough.

One thing to try right now: Eat a piece of candy, or anything sweet you have.

Draw, doodle, or map it out

DON'T PANIC

If you are in danger, call 911.

If you are in crisis, or thinking about suicide, call or text 988.

For free help finding treatment, call 1-800-662-4357.

If you think this is an emergency, turn to page 19 now.

NOTES

One day, sometimes one hour, at a time.

One thing to try right now: Call someone just to hear a voice. You do not have to say why.

Draw, doodle, or map it out

Part of

The Hitchhiker's Guide to Recovery Library

BOOK 1 · RIGHT NOW

Don't Panic:

The First 72 Hours

What to Do When You Stop Drinking or Using

Stephen Deason

Alder Creek EDITIONS

NOTES

Getting through today is the whole job.

One thing to try right now: Put on one song you know all the words to.

Draw, doodle, or map it out

Don't Panic: The First 72 Hours

What to Do When You Stop Drinking or Using

Part of The Hitchhiker's Guide to Recovery Library

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This book is general information for adults. It is not medical advice and does not replace a doctor, nurse, or treatment program. Withdrawal from alcohol, benzodiazepines, and some other drugs can be life-threatening. The author is not a physician or counselor. If you are in danger or need medical help, call 911. If you are thinking about suicide, call or text 988.

Phone numbers, websites, and programs listed in this book were checked in September 2026 and may change.

NOTES

You asked for help. That took something.

One thing to try right now: Make tea or coffee and hold the cup with both hands.

Draw, doodle, or map it out

Contents

NOTES

A craving is a feeling. It rises and it falls.

One thing to try right now: Step outside for five minutes, even if it is just the doorway.

Draw, doodle, or map it out

Recovery Books

The Hitchhiker's Guide to Recovery Library: standalone books and tools for people getting into recovery on their own. Each one is numbered and labeled by what it helps with. Start with any of them.

RIGHT NOW

1. *Don't Panic: The First 72 Hours* **This book**
What to Do When You Stop Drinking or Using

3. *Free Help Directory* **Forthcoming**
Meetings, Helplines, and Low-Cost Care

6. *Medications for Addiction, Explained* **Forthcoming**
What They Are, How to Ask, and How to Pay

13. *Wallet Crisis Card* **Forthcoming**
Numbers to Call, Ready to Print

DAILY PRACTICE

2. *One Day at a Time, Written Down*
A 90-Day Gratitude Journal, in General and Christian Editions

4. *Tools You Can Use on Your Own* **Forthcoming**
A Guide to Self-Directed Recovery

5. *Cravings and Hard Hours Workbook* **Forthcoming**
A Companion to Tools You Can Use on Your Own

11. *Daily Reader, 365 Days* **Forthcoming**
For Any Recovery Path

14. *Worksheet Library* **Forthcoming**
Every Journal Page and Exercise, Ready to Print

NOTES

You do not have to feel good to stay sober.

One thing to try right now: Take a warm shower.

Draw, doodle, or map it out

REBUILDING

7. *Money in Early Recovery* **Forthcoming**
Budgets, Debts, Benefits, and Credit

8. *Work and Recovery* **Forthcoming**
Finding a Job, Keeping It, and What to Tell Employers

9. *Finding a Safe Place to Live* **Forthcoming**
Sober Housing and What to Check Before You Move In

12. *Court, Probation, and Recovery* **Forthcoming**
What to Ask a Lawyer and What Records to Keep

PEOPLE AROUND YOU

10. *For Families* **Forthcoming**
When Someone You Love Can't Get to Treatment

15. *Group Facilitator Guide* **Forthcoming**
Running Free Peer Support Groups with These Books

16. *Employer Guide* **Forthcoming**
Hiring and Keeping People in Recovery

NOTES

Nobody does this alone.

One thing to try right now: Text one person a single word: hey.

Draw, doodle, or map it out

Start Here

You picked up this book because you are stopping, or thinking about stopping, drinking or using. The first three days are often the hardest. This book is here to help you get through them safely.

If something feels wrong right now, go straight to Chapter 1. It lists the signs that mean you need help today.

If you are safe right now, read Chapters 1 through 4 before you do anything else. They take about twenty minutes. Chapter 2 matters most: stopping some substances suddenly can be dangerous.

Then fill in My 72-Hour Plan on page 49. Use the Hour-by-Hour Log to get through each day in small pieces.

Keep this book where you can reach it. You do not have to read it all at once, and you do not have to do this alone.

Three numbers to keep close

Emergency: 911

Crisis or thoughts of suicide: call or text 988

Free treatment referrals: 1-800-662-4357

How to Contact the Helpline

The SAMHSA National Helpline is free, confidential, and open 24 hours a day, every day of the year, in English and Spanish.

- Phone: call 1-800-662-HELP (4357). TTY: 1-800-487-4889.

NOTES

Eat something. Drink water. Decide later.

One thing to try right now: Squeeze a stress ball, or fidget with keys or a pen.

Draw, doodle, or map it out

- Text: send your 5-digit ZIP code to 435748 (HELP4U) to find local resources. Texting is in English only.
- Online: visit FindTreatment.gov to search for treatment providers anonymously.

The helpline gives information and referrals. It does not provide medical treatment or crisis counseling. If you are in crisis or thinking about suicide, call or text 988.

NOTES

The next hour is the only one you have to get through.

One thing to try right now: Walk to the end of the street and back.

Draw, doodle, or map it out

1. Is This an Emergency?

Call 911 or go to an emergency room right away if you or someone with you has any of these:

- A seizure (shaking and jerking, or passing out and not responding)
- Seeing, hearing, or feeling things that are not there
- Confusion: not knowing where you are, what day it is, or who people are
- Chest pain, a racing or pounding heartbeat that will not slow down, or trouble breathing
- A high fever, or heavy sweating with shaking and confusion
- Vomiting or diarrhea so bad you cannot keep water down
- Fainting
- Someone who will not wake up, is breathing very slowly or not at all, or has blue or gray lips or fingertips. That can be an overdose. Turn to Chapter 4.

If you are thinking about suicide

Call or text 988 now. If you are in immediate danger, call 911. Low mood and dark thoughts can come with withdrawal, especially from stimulants. They are a reason to get help today.

If you are pregnant

Do not stop alcohol or opioids on your own. Stopping suddenly can harm you and the baby. Call a doctor, a

NOTES

Rest is not quitting.

One thing to try right now: Change rooms. Any room will do.

Draw, doodle, or map it out

clinic, or the SAMHSA helpline today, or go to an emergency room.

What to say when you call 911

Give your exact address first. Then say what is happening in plain words, such as "My friend had a seizure" or "Someone is not breathing." Follow what the dispatcher tells you.

Most states have laws that may protect a person who calls for help during an overdose, and the person who overdosed, from some criminal charges. The details vary by state. Call anyway.

If you cannot pay

Under federal law, a hospital emergency room must check you and treat an emergency even if you cannot pay.

NOTES

You are allowed to leave.

One thing to try right now: Eat something salty and crunchy.

Draw, doodle, or map it out

2. Is It Safe to Stop on Your Own?

Some substances are uncomfortable to stop. Others can be dangerous to stop suddenly. Find yours below. If you use more than one, follow the most cautious advice for any of them.

If you have been using	Stopping suddenly can be	What to do
Alcohol, most days or in large amounts	Dangerous. Withdrawal can cause seizures and a life-threatening condition called delirium tremens (DTs).	Talk to a doctor, clinic, or the SAMHSA helpline before you stop, or go to an emergency room.
Benzodiazepines (for example Xanax, Klonopin, Ativan, Valium), prescribed or not	Dangerous. The FDA warns that stopping suddenly can cause seizures that can be life-threatening.	Do not stop suddenly. A doctor can lower the dose slowly.
Opioids (heroin, fentanyl, pain pills)	Very uncomfortable, like a bad flu. Usually not life-threatening for healthy adults, but vomiting and diarrhea can cause dangerous dehydration.	Medications can ease withdrawal. Ask about them (Chapter 7). If you are pregnant, get medical care first.
Stimulants (meth, cocaine, some pills)	A hard crash: exhaustion, heavy sleep, hunger, and low mood. Some people have thoughts of suicide.	Rest, eat, and stay near people. Call or text 988 for dark thoughts.
Cannabis	Uncomfortable for most people: irritability, poor sleep, low appetite.	Use the tools in Chapter 5.
A mix, or you are not sure	Unpredictable.	Get medical advice before you stop.

NOTES

Your body is working on it right now.

One thing to try right now: Stretch your arms overhead and roll your shoulders ten times.

Draw, doodle, or map it out

Why alcohol and benzodiazepines are different

Both slow down the brain. After weeks or months of steady use, the brain adjusts. When the substance is suddenly gone, the brain can speed up too far. That is what causes shaking, seizures, and in some people, delirium tremens.

Do not use one to ease withdrawal from the other, and do not mix either one with opioids. Together they can stop your breathing.

If you have been told you need a detox program

Medically supervised withdrawal, often called detox, is safer for people at high risk. Chapter 7 lists ways to find a program for free or at low cost.

Ask a pharmacist

Pharmacists answer questions for free. Ask which over-the-counter medicines are safe for you to take for sleep, pain, nausea, or diarrhea, and tell them what you have been using.

NOTES

Call someone before you decide anything.

One thing to try right now: Wrap up in a blanket and sit down.

Draw, doodle, or map it out

3. What the Next 72 Hours May Look Like

Everyone is different. How you feel depends on what you used, how much, for how long, and your health. These are common patterns, not promises.

Alcohol

Time since last drink	What is common	Watch for
6 to 12 hours	Shaky hands, sweating, anxiety, headache, upset stomach, trouble sleeping	Symptoms that are getting worse fast
12 to 48 hours	Symptoms build. For many people they are at their worst between 24 and 72 hours.	Seizures are most likely in this window. Call 911.
48 to 72 hours and after	Some people start to feel better. Others are still at their worst.	Confusion, seeing things, fever, racing heart: signs of DTs. DTs usually start 2 to 3 days after the last drink but can start later. Call 911.

Trouble sleeping and mood swings can last for weeks. That does not mean something is wrong.

Opioids

Type	Symptoms usually start	How long they last
Short-acting (heroin, fentanyl, most pain pills)	8 to 24 hours after last use	Worst around days 2 and 3, easing over 4 to 10 days

NOTES

Hard is not the same as impossible.

One thing to try right now: Write down what you would say if a friend asked how you are.

Draw, doodle, or map it out

Type	Symptoms usually start	How long they last
Long-acting (methadone, extended-release pills)	12 to 48 hours after last use	10 to 20 days

Common symptoms include body aches, runny nose, yawning, sweating, chills, goosebumps, stomach cramps, diarrhea, vomiting, restlessness, and strong cravings.

Get medical help if you cannot keep water down, feel dizzy when you stand, or stop urinating. Those are signs of dehydration.

Stimulants

The crash is often worst in the first day or two: deep tiredness, long sleep, big appetite, and low mood. For many people the worst of it eases by the end of the first week. Low mood and cravings can come and go for weeks.

> **If you are getting worse instead of better**
> Turn back to Chapter 1 and check the emergency signs.

NOTES

You have already done the hardest part: starting.

One thing to try right now: Put on something you have already seen and liked.

Draw, doodle, or map it out

4. Overdose: Signs and What to Do

Signs of an opioid overdose

- Will not wake up, or cannot talk
- Slow, shallow, or no breathing
- Choking, gurgling, or snoring sounds
- Blue, gray, or pale lips and fingertips
- Very small pupils

What to do

1. Call 911. Give the address and say, "Someone is not breathing."
2. Give naloxone (Narcan) if you have it. For the nasal spray, lay the person on their back, put the tip all the way into one nostril, and press the plunger.
3. Try to keep the person awake and breathing. Follow the dispatcher's instructions, including rescue breaths or CPR.
4. If there is no response after 2 to 3 minutes, give another dose if you have one.
5. When the person is breathing, roll them onto their side so they will not choke.
6. Stay with them until help arrives.

Naloxone wears off in 30 to 90 minutes, and the overdose can come back. The person still needs to go to the hospital, even if they wake up and feel fine.

Naloxone is safe to give even if you are not sure opioids were involved. It does not reverse an overdose from

NOTES

Shaky hands still turn pages.

One thing to try right now: Wash the dishes in the sink.

Draw, doodle, or map it out

alcohol, benzodiazepines, or stimulants alone, so call 911 every time.

Getting naloxone

Naloxone nasal spray is sold without a prescription. Many health departments and harm reduction programs give it away free. Keep it where people around you can find it, and show them how to use it.

If you use again

After even a few days without opioids, your body loses tolerance. An amount you used to take can now stop your breathing. Do not use alone. Use much less. Keep naloxone within reach of someone who is with you.

NOTES

Tell one person the truth today.

One thing to try right now: Pet an animal, yours or a neighbor's.

Draw, doodle, or map it out

5. Getting Through the Hours

Set up your space

- Get rid of any alcohol or drugs where you are staying, or ask someone to take them.
- Keep your phone charged and nearby.
- Stock water, a sports drink or other fluids, and simple foods: crackers, toast, rice, bananas, soup.
- Have blankets, a change of clothes, and something to watch, read, or listen to.
- Do not drive if you feel shaky, dizzy, or foggy.

Take care of your body

- Sip fluids often, even if you can only take small amounts.
- Eat small amounts every few hours.
- Rest even if you cannot sleep. Lying down with your eyes closed still helps.
- A warm shower or bath can ease aches and chills.

When a craving hits

- Ride it out. Notice where you feel it in your body. It will rise, peak, and fall.
- Check HALT: are you hungry, angry, lonely, or tired? Fix the one you can.
- Delay. Tell yourself you will wait ten minutes, and do something on your list while you wait.

NOTES

You can change your mind about tonight.

One thing to try right now: Put on clean socks.

Draw, doodle, or map it out

- Ground yourself. Name five things you see, four you can touch, three you hear, two you smell, and one you taste.
- Play the tape through. Picture the whole night and the next morning, not just the first few minutes.
- Move. Change rooms, step outside, or walk around the block.
- Call or text someone. Say, "I'm having a hard time. Can you talk for five minutes?"

Ten-minute list

Write down things you can do for ten minutes when a craving hits.

1.
2.
3.
4.
5.

Take it one hour at a time

Seventy-two hours is a lot to think about. One hour is not. Use the Hour-by-Hour Log starting on page 53.

NOTES

Small steps count. They all count.

One thing to try right now: Breathe in for four counts and out for six, ten times.

Draw, doodle, or map it out

6. Telling Someone

Withdrawal is safer with someone checking on you. Pick one or two people you trust. They do not need to be experts. They need to answer the phone and know when to call for help.

What to say

> *"I'm stopping drinking (or using) today. The next three days may be rough. Can you check on me tonight and tomorrow morning? If I don't answer, please come by or call 911."*

A text you can send

> *"Starting today I'm quitting. Can I text you a couple of times a day for the next 3 days so someone knows I'm okay?"*

Tell them the danger signs

Show them Chapter 1 and Chapter 4, or take a picture of those pages and send it. Tell them where your naloxone is if you have it.

If you have no one to call

You still have options. Call or text 988 to talk with someone any time. Call the SAMHSA helpline for help finding care. Join an online meeting, where you can listen with your camera off. The meetings are listed at the back of this book.

NOTES

You are worth the trouble this takes.

One thing to try right now: Chew a piece of gum.

Draw, doodle, or map it out

What you do not have to share

You decide how much to tell. "I'm stopping, and I need someone to check on me" is enough.

NOTES

Sleep will come back. Give it time.

One thing to try right now: Open a window and listen to what is outside.

Draw, doodle, or map it out

7. Free and Low-Cost Help

Emergency rooms

A hospital emergency room must check you and treat an emergency even if you cannot pay. Go if you have any sign in Chapter 1.

SAMHSA National Helpline

Free, confidential, 24 hours a day, in English and Spanish. They can refer you to local programs, including state-funded programs for people without insurance and programs that charge on a sliding scale.

1-800-662-4357

You can also text your ZIP code to 435748, or search FindTreatment.gov.

Community health centers

Community health centers see patients with or without insurance and charge based on income. Many offer addiction care. Find one at findahealthcenter.hrsa.gov.

Medications for opioid and alcohol use

Medications can ease withdrawal and cravings. For opioid use disorder, doctors, nurse practitioners, and telehealth providers can prescribe buprenorphine where state law allows. Ask a community health center or the helpline where to start.

NOTES

You do not owe anyone an explanation today.

One thing to try right now: Count ten things in the room that are the same color.

Draw, doodle, or map it out

Health coverage

You may qualify for Medicaid, especially if your income is low or you just lost a job. Ask the helpline or a community health center to help you apply.

Pharmacies

Pharmacists can answer medicine questions for free, and most sell naloxone without a prescription.

Support groups and online meetings

Free groups meet in person and online at all hours. See pages 63 and 65.

988 Suicide and Crisis Lifeline

Call or text 988, or chat at 988lifeline.org. It helps with substance use crises too.

NOTES

Ask. People want to help more than you think.

One thing to try right now: Make your bed.

Draw, doodle, or map it out

8. After 72 Hours

Getting through the first three days is a real start. For many people, some symptoms continue for days or weeks: poor sleep, low mood, low energy, and cravings that come in waves.

What to do next

- See a doctor or a community health center this week, even if you feel better.
- Go to a support group or an online meeting in the next few days.
- Keep eating regular meals, drinking water, and going to bed at the same time.
- Plan for the hardest times of day and the hardest days of the week.
- Keep naloxone nearby if you have ever used opioids.
- Write things down. A daily journal helps you see progress when it is hard to feel.

Keep going

The Hitchhiker's Guide to Recovery Library has other books for the weeks ahead, starting with One Day at a Time, Written Down, a 90-day gratitude journal. See the list of Recovery Books on page 11.

NOTES

This hour will end.

One thing to try right now: Plug your phone in across the room and sit down.

Draw, doodle, or map it out

My 72-Hour Plan

Fill this in before you stop, or as soon as you can.

Date and time of my last drink or use:

What I have been using, and how much:

Is it safe for me to stop on my own? (Chapter 2)

Circle one: Yes No, I need medical help first Not sure: I will call

The person who will check on me:

Name and number:

My backup person:

Name and number:

Where I will stay:

What I have ready (water, food, medicine, phone charger):

The nearest emergency room or urgent care:

NOTES

You can start over at any hour of the day.

One thing to try right now: Say out loud what time it will be one hour from now.

Draw, doodle, or map it out

MY 72-HOUR PLAN

The times of day that will be hardest:

What I will do during those times:

Places and people I will stay away from:

Why I am doing this:

Where my naloxone is (if I have it):

Signs that mean I call 911: seizure; seeing or hearing things; confusion; chest pain or trouble breathing; high fever; cannot keep water down; someone will not wake up.

NOTES

Keep the plan where you can see it.

One thing to try right now: Look at a photo of someone you love.

Draw, doodle, or map it out

Write the time, rate how you feel from 0 (awful) to 10 (good), and note what you did. Fill in as many rows as you need.

Time	Feeling (0 to 10)	What I did or what helped

Tonight, one thing that went right:

NOTES

Fear passes. Keep breathing.

One thing to try right now: Fold a load of laundry.

Draw, doodle, or map it out

Write the time, rate how you feel from 0 (awful) to 10 (good), and note what you did. Fill in as many rows as you need.

Time	Feeling (0 to 10)	What I did or what helped

Tonight, one thing that went right:

NOTES

You have survived every hard day so far.

One thing to try right now: Sort one small thing: a drawer, a wallet, a pile of mail.

Draw, doodle, or map it out

Write the time, rate how you feel from 0 (awful) to 10 (good), and note what you did. Fill in as many rows as you need.

Time	Feeling (0 to 10)	What I did or what helped

Tonight, one thing that went right:

NOTES

Let somebody carry part of it.

One thing to try right now: Suck on a mint or a hard candy.

Draw, doodle, or map it out

If I Use Again

If you use again, this book is still yours. Get safe first, then use this plan. Fill it in now, while you are steady.

If you have used opioids: your tolerance is lower now. Do not use alone. Use much less. Keep naloxone (Narcan) nearby, and make sure someone with you knows how to use it.

The first person I will call:

If they do not answer, I will call:

A safe place I can go:

What I will do in the next hour:

Who else needs to know (doctor, counselor, group):

What I will do tomorrow morning:

If you are in danger, call 911. For crisis support, call or text 988.

NOTES

Do the next small thing.

One thing to try right now: Set a timer for ten minutes and wait it out.

Draw, doodle, or map it out

People and Resources

Name	Number
Name	Number
Name	Number
Name	Number
Name	Number
Name	Number
Name	Number
Name	Number
Name	Number

Crisis: call or text 988
988 Suicide and Crisis Lifeline, 24/7. Chat at 988lifeline.org.

Emergency: 911

Treatment referrals: 1-800-662-4357
SAMHSA National Helpline, free and confidential, 24/7, English and Spanish. Text your ZIP code to 435748 or search FindTreatment.gov.

NOTES

There is no gold star. There is just tomorrow.

One thing to try right now: Eat a spoonful of peanut butter.

Draw, doodle, or map it out

Free Support Groups

These groups are free to attend. Most meet in person and online. Try more than one until you find a room that fits.

Alcoholics Anonymous (AA) aa.org
12-step groups for people with a drinking problem.

Narcotics Anonymous (NA) na.org
12-step groups for recovery from any drug.

SMART Recovery smartrecovery.org
Skills-based groups with no religious content, for any addiction.

LifeRing Secular Recovery lifering.org
Secular peer support, in person, online, and by email.

Recovery Dharma recoverydharma.org
Peer-led groups based on Buddhist practices.

Celebrate Recovery celebraterecovery.com
Christ-centered 12-step groups, usually hosted by churches.

Women for Sobriety womenforsobriety.org
Support groups for women.

For family and friends al-anon.org
Al-Anon, Nar-Anon, and SMART Recovery Family & Friends.

NOTES

Your worst day sober still counts.

One thing to try right now: Join an online meeting and listen with your camera off.

Draw, doodle, or map it out

Online Meetings

Online meetings run at every hour of the day and night. You can use a first name only and keep your camera off. Many also have a phone number you can dial in to with no internet at all.

In The Rooms intherooms.com
Free live video meetings every week for many recovery paths, 12-step and others. A free account with a username is all you need.

AA Online Intergroup aa-intergroup.org
AA meetings by video, phone, chat, and email, around the clock.

Meeting Guide app aa.org
AA's free app lists in-person, online, and phone meetings.

Virtual NA virtual-na.org
Narcotics Anonymous meetings online and by phone.

SMART Recovery Online smartrecovery.org
Online meetings, chat, and message boards.

LifeRing Online lifering.org
Video meetings, chat, forums, and email groups.

Some recovery websites show phone numbers that connect to treatment centers selling their services. For free, neutral referrals, call the SAMHSA National Helpline:

1-800-662-4357

Alder Creek Editions is not connected to any group or website listed in this book. Websites change. If one stops working, the SAMHSA helpline can point you to current options.

NOTES

Be as kind to yourself as you would be to a friend.

One thing to try right now: Write the name of one person you will call tomorrow.

Draw, doodle, or map it out

About the Author

Stephen Deason has been in Recovery for more than eleven years and still begins and ends each day with meditation and gratitude. He has spent more than thirty years building teams and companies in healthcare and technology.

Stephen writes from his own experience about recovery, economics, business, and social enterprise.

You can find more about Stephen and his work at aldercreekeditions.com and at his personal website, stephendeason.com.

NOTES

Write it down. It gets lighter on paper.

One thing to try right now: Drink a full glass of water, slowly.

Draw, doodle, or map it out

Alder Creek EDITIONS

Also from Alder Creek Editions

The Operational Reliability Series

The Weakest Link: A Story About the Systems We Never See

Book I. A business fable about a family caring for an aging parent, and the failures that happen in the handoffs between the people and agencies involved.

The Invisible Architecture: A Story About Senior Care as a System

Book II. The same family returns as care needs grow, and the story widens to show senior care as a system whose structure decides who ends up carrying the work.

The Space Between: Institutional Architecture and Coordination Costs **Forthcoming**

Book III moves from story toward the system itself: why coordination costs fall on the person least able to refuse them, and how organizations can be designed to carry those costs.

The Family Integrator's Handbook

A workbook for the family member who coordinates a parent's care, with the calls, records, schedules, and decisions organized in one place.

NOTES

Hold on. Help is closer than it looks.

One thing to try right now: Brush your teeth and wash your face.

Draw, doodle, or map it out

The Paid Last Series

Residual Claimants **Forthcoming**

The Owner's Arithmetic **In development**

Capital and Governance **Planned**

Standalone Titles

Valued: How Purpose-Driven Businesses Can Conquer Addiction and Marginalization in America **Forthcoming**

Case studies of companies that hire people in recovery and others shut out of work. Each one earns its place in the market by serving customers first, then carries its social mission alongside.

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