From Treatment to Recovery: The Long and Winding Road

Recovery Month, a national observance celebrated each September, promotes the societal benefits of prevention, treatment, and recovery for mental health and substance use disorders. The initiative encourages people to openly speak up about mental health and substance use disorders and the reality of treatment, recovery, and promotes ways individuals can use to recognize these behavioral health issues and reach out for help.

Millions of individuals and family members in recovery know what “recovery” means to them. However, the concept of recovery is different for everyone.

Essentially, recovery from alcoholism and other drug addiction is a complex and dynamic process encompassing all the positive benefits to physical, mental, and social health that can happen when people with an addiction to alcohol or other drugs, or their family members, get the help they need.

Overcoming an addiction to substances can be a long and bumpy road. At times, it may even feel impossible, but it’s not. If a person is ready to stop their substance use and willing to get the support they need, they can recover from substance use disorders—no matter how bad the addiction or how powerless they feel.

They don’t have to wait until they hit rock bottom; they can make a change at any time. The first step, to acknowledge that one has an addiction and decide to get help, can be a daunting one. Many individuals worry about how the process will affect their lives. Like anything in life, the unknown can be scary.

Thankfully, there are answers to most of the questions one may have about the recovery process. The more information obtained about what to expect throughout the entire process, from the appropriate type of treatment and length of time,
Dear Friends,

According to Dictionary.com, “recovery” has several related meanings, including:

• Restoration or return to health from sickness.
• Restoration or return to any former and better state or condition.

Certainly, when discussing addiction, a return to health makes perfect sense. Recovery from an illness is readily understood. However, ever since the founding of Alcoholics Anonymous in 1935, “recovery” has also been almost synonymous with “sobriety.” In this case, it means much more than a return to health – it means “getting one’s life back” or “living life on life’s terms” without the drug. In the historical context of AA’s founding by two middle-aged white men, who had loving wives and established careers, this second meaning was paramount.

Remember in the early 70’s when parents were obsessed with hidden evil messages in rock music that could only be uncovered by playing records (black plastic discs with grooves) backwards? How about the related joke about country music? “What happens when you play a country music record backward? You get your wife back, your house back, your dog back…”

Similarly, in recovery, an individual with a substance use disorder was supposed to regain everything they had lost as a result of their addiction. This concept worked perfectly well for individuals who had led a “normal” life, then developed a substance use disorder and subsequently saw their lives fall apart. But what about those who were born into poverty or addiction and had no hope to begin with? What do you recover when you never had anything to lose in the first place?

I thought about this quite a bit when I was an addiction counselor working with individuals who were homeless and addicted to crack cocaine. These individuals were in their early 20’s and had been born into the worst of situations. They were completely different from the 60 year old alcoholics I also counseled. The latter group had a very clear point of reference when looking to “recover.” They knew what they had lost and hoped to regain it as a result of their sobriety. The former group had no desire to return to where they came from. For them, the concept of recovery was much more nebulous and AA meetings did not resonate.

Recently, I noticed a similar phenomenon with adolescents and young adults struggling with heroin and other opiate addictions. Many still live at home in the suburbs with their families. Most graduated high school, and some even college. What had they lost that they needed to recover? Certainly their health, but recovery has always meant so much more than just health.

I don’t have an answer, but I know this is a concept we need to revisit. Much like you will read in the article on gender in recovery later in this issue, our treatment system needs to revisit “recovery” and make sure it is still relevant to those struggling with substance use disorders today. While it has long been accepted that “an addiction is an addiction,” we are finally learning that recovery will mean something different and may be expressed uniquely by each individual.

Steven G. Liga, CEO/Executive Director
to how to pay for treatment services, the easier the journey of recovery will be.

There isn’t a set period of time that applies to everyone when it comes to treatment. Some individuals may need a long stay at an inpatient treatment facility plus follow-up care to truly find their path to recovery. Others may do well with a shorter or less intensive program.

It simply varies according to the addiction in question, the individual’s history with addiction, available support for the individual, dual diagnosis conditions, the individual’s specific physical, mental, emotional, means of payment and spiritual needs, and available support.

All of these factors are taken into consideration during the assessment or evaluation meeting, usually conducted by a counselor or physician overseeing the person’s treatment.

Treatment options may include residential or in-patient treatment, an out-patient program or a combination of both.

Some feel that staying at or travelling to a facility outside their home area is beneficial, as it takes them out of the environment where they are used to abusing alcohol or other drugs. Others feel that out-patient is less disruptive to their lifestyle.

Inpatient treatment is the most comprehensive and costly form of treatment, allowing the patient to fully focus on their addiction and recovery. There are different levels of inpatient care, such as short-term, long-term, or halfway house programs. These programs address the needs of each individual client, and treatment is adjusted according to what the client needs at that particular point in recovery.

Individual counseling sessions, group therapy, life skills courses, and complementary activities are generally part of comprehensive inpatient addiction treatment. The cost for in-patient treatment includes therapy, meals, lodging, and activities.

Often those who spend a longer time in treatment achieve better rates of long-term sobriety.

This is because more time spent in treatment means more opportunity to explore the root causes behind the addiction, which can provide the patient the opportunity to find healthy coping mechanisms to replace the substance use that was previously used to cope.
When choosing outpatient treatment, one may opt for a facility that is closer to home so they do not have to travel far each day. Outpatient facilities allow a client to come for treatment, therapy, and other services, and then leave at the end of the treatment sessions. This allows a person to have a normal work, school, or home life while seeking treatment. Outpatient programs vary; some involve all-day sessions, whereas others may only treat clients for an hour or two per day or week.

Many individuals complete more than one stay in treatment programs before they are able to find their footing in their recovery journey. In fact, most individuals with substance use disorders do not achieve perfect, lifelong recovery with one treatment stay.

Relapse should not be viewed as a failure; instead, it should be seen as an obstacle to overcome on one’s lifelong journey to sobriety. Relapse is an opportunity to reassess one’s path and get back into a program that offers the support and help needed to maintain sobriety.

Recovery is an ongoing process that will continue for the rest of the individual’s life. Long-term recovery often involves ongoing therapy, both in individual and group form, and attendance at 12-step meetings or other support services.
What Role Does Gender Play In Recovery?

“Men are from Mars and women are from Venus” is a phrase that is commonly used when describing the differences between genders.

When thinking about women and men and substance use disorders, significant differences exist in relation to addiction, its consequences and recovery.

Many decades of past research have documented differences between men and women in the development and pattern of substance use disorders. A woman’s physiological make-up metabolizes alcohol more slowly than a man, so the effect is more pronounced. According to elementsbehavioralhealth.com, women begin using drugs at lower doses then men, their drug use escalates more rapidly into addiction, and they face a greater risk of relapse after abstinence.

Research has also shown that women tend to enter treatment sooner than men after becoming dependent on substances, but they usually have more psychological distress, particularly with mood and anxiety disorders.

According to Dr. Ihsan Salloum, professor of psychiatry and behavioral sciences and chief of the Division of Substance and Alcohol Abuse at the University of Miami Miller School of Medicine, “Depression is more frequent in women than in men; addiction is more frequent in men than women, but if women have a problem of addiction or alcoholism, there is more likelihood of having other psychiatric problems like depression. The likelihood they were exposed to trauma is higher.”

Depression, which can stand alone or be a by-product of alcohol abuse, given alcohol’s depressive effect on the central nervous system, impacts women at twice the rate of men, according to a national drug use and health study by the Substance Abuse and Mental Health Services Administration (SAMHSA.) Among adults aged 18 or older, females were almost twice as likely as males to report a recent past year depressive episode. According to SAMSHA, diagnoses of post-traumatic stress and other anxiety disorders, postpartum depression and other mood disorders, as well as eating disorders are more prevalent among women with substance use and co-occurring mental disorders than among men in treatment for substance use disorders.

So what do these gender differences mean in terms of thinking about recovery? While acknowledging that there are different characteristics of women with substance use disorders and obstacles to treatment, most recent studies suggest that gender either has no effect on treatment initiation, or if it has an effect, women are more likely to initiate treatment than men.

The National Institute on Alcohol Abuse and Alcoholism has found men and women are equally likely to complete treatment. Women who complete treatment were nine times more likely to be abstinent than women who did not complete, and men who completed treatment were only three times more likely to be abstinent than men who did not complete treatment.

Not all treatment methods will work for everyone, but there are research based approaches that have been found to work more effectively depending

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Innovations for Recovery

Only about 20% of the 20 million people in the United States in need of addiction treatment, at any given time, get access to treatment. Of that number, half typically drop out. Of those who successfully complete their addiction treatment, 90% will relapse. These alarming statistics, provided by the Substance Abuse and Mental Health Services Administration, call for more effective ways of dealing with addiction and recovery.

At the University of Wisconsin-Madison, researchers have formed an initiative called Innovations for Recovery (IFR) focused on using technology to “holistically and humanistically improve addiction treatment and recovery outcomes”.

Their Innovations for Recovery Model uses cost effective, existing technologies to individually tailor treatment as needed. People seeking treatment for addiction receive traditional and individually customized treatment services through this innovative IFR approach. Initially, patients undergo a comprehensive computer based assessment protocol.

Treatment includes virtual reality training to educate patients and those in their support network about the nature of addiction. Individuals with a substance abuse disorder can improve coping skills, learn refusal skills and identify personal and environmental triggers that may compromise their recovery. As part of their treatment plan, patients provide information on physical locations where they are most likely to suffer relapse (e.g., neighborhoods, bars, streets, etc.). Global cell phone positioning systems recognize when those in recovery enter locations where relapse is likely, and they and those in their support network are alerted on their mobile phones that additional help may be needed.

The model further supports individuals in recovery by helping them learn about elements that encourage clean living through informative websites, online support groups and even through computer animated counselors/avatars who provide relevant, engaging instruction. Customized lists of “recovery-friendly” activities are generated that match their interests, and provide names and contact information for their personal supports (e.g., friends, family, peer sponsors).

In addition, patients are introduced to software for video cell phones and computers that will be used to deliver aftercare services to further improve their likelihood of a successful recovery. To help rebuild healthy social networks, those in recovery can obtain information about nearby support meetings and social events.

They can also be notified, through the use of a bio-monitoring patch, if increased stress levels indicate an increased likelihood of relapse. This technology delivers tailored reminders for appointments as well as reminders of why they decided to stop using in the first place. Through

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Virtual Reality Trainings family and friends would be able to use multiplayer video games to help the person in recovery to simulate their environments and situations that can lead to relapse in order to practice overcoming such situations.

In summary, IFR has developed a comprehensive model that leverages preexisting technology as an intelligent solution for increasing access to treatment services and allows aftercare services to be offered as long as they are needed.

In our society today, success is frequently attained by being on the cutting edge of technology. So why not for the person struggling with substance abuse too? Innovations for Recovery asked that same questions and has excitingly taken the treatment world to the next level. For people in recovery today, it truly is a brave new world!


Article contributed by Solangel Troncoso, NCADD intern.

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on gender. According to SAHMSA, factors that encourage women to stay in treatment include supportive therapy, a collaborative therapeutic alliance, onsite childcare and children’s services, and other integrated and comprehensive treatment services; whereas factors that encourage men to stay in treatment tend to deal more with their intrapersonal needs, such as not wanting to lose things they have (job, house, relationships, etc.)

Extensive research by the National Institute on Alcohol Abuse and Alcoholism suggests that a large proportion of men and women do well in mixed-gender settings, and these settings will likely be more cost-effective. However, some individuals or subgroups of men or women may benefit in significant ways from gender specific treatment.

Since some women seeking treatment are likely to have had a traumatic event such as physical/sexual abuse, they may benefit more from a women-only group. In coed groups, these women may hold back and become more introverted and treatment progress might be compromised. Gender specific groups work best when individual situations suggest the need for an open and safe environment to gain and sustain recovery.

In an article published in Addictiontoday.org, titled Women’s Issues in Recovery: Similarities and Differences With Men, Professor Joanne Neale from Oxford Brooks University suggests that it is important to note that in relation to recovery, women do not all have similar needs, women and men share many similarities, and that it is possible for a woman to have more in common with a man than with another woman.

Researchers found that recovery is affected by many interacting factors for both men and women and that adequate assessment is critical to identifying appropriate treatment, whether in gender sensitive, mixed gender or gender specific programs. As Neale concludes, the ultimate goal is to enable men and women to maximize their recovery capital and achieve their recovery potential.

Sources:
• http://www.samhsa.gov/samhsanewsletter/Volume_18_Number_2/TIP51.aspx
• http://www.elementsbehavioralhealth.com/addiction/gender-addiction/
Family Involvement in the Recovery Process

Alcohol and drug addiction are family diseases. When an individual develops a substance use disorder, the family also suffers negative consequences and should be involved in the recovery process. It is not easy to confront a loved one and address their addiction, but it is a necessary step toward recovery.

At times, involvement from the family has resulted in enabling their loved one’s negative behaviors. Other times, family members choose to ignore the problem because they are afraid of confrontation and the possibility of pushing their loved one away.

But once family members of individuals with substance use disorders are on board and the person feels supported, they can pursue appropriate treatment together. Families should understand that most patients seek substance abuse treatment because of positive family involvement and intervention.

Since each family is different, the best way to approach family involvement with addiction treatment will differ. Some will address their loved one through a family intervention. Others will seek the support of a professional therapist to conduct the intervention. What matters most is that the individual understands that they have support from people who care for them and support their recovery.

After the intervention, the expectation is that admission to either residential or out-patient treatment will follow. Family and friends of the individual in treatment are encouraged to attend Al-Anon or Nar-Anon meetings, which help them to understand the disease, learn how to support someone they care about and assist with their own emotional support during this incredibly demanding and stressful time.

Continued attendance at these support meetings throughout the recovery process can help loved ones steer clear of the destructive cycle of enabling and codependency and fully realize the benefits of treatment and recovery.

Recovery is a long-term process and it requires active work from all involved. But, the work definitely pays off. There are millions of families that can proudly say that they have recovered from alcohol or other drug addiction.


Want to Celebrate Recovery?
There are several events scheduled during September’s Recovery Month. They include

NCADD’S TREE OF HOPE — NCADD’s annual Tree of Hope campaign is designed to raise the consciousness of our neighbors in Middlesex County to the fact that addiction is an illness from which many do recover and to celebrate those recoveries. The “Tree of Hope” is awarded annually to an organization that promotes recovery from addiction. The 2014 awardee is First Step Counseling Services of Metuchen. Additional details will be announced on the NCADD website at www.ncadd-middlesex.org

NEW JERSEY STATEWIDE RECOVERY RALLY — Scheduled for September 20, 2014, this event will take place at the Rutgers Athletic Center (The RAC) in Piscataway, New Jersey. For more information, contact event organizers at NJRecoveryRally@aol.com.

PRO-ACT Recovery Walks! 2014