

SereneScene

Magazine For Long Term Healthy Lifestyles of Recovery

May 2013

Snitching and Supporting Are Very Different Actions

Andrew Martin, MBA, CADC II, SAP

Defining Early Recovery

Thom Rutledge, LCSW

Hope, The Link Between Surrender and Faith

Captain Larry Smith, CAS II

Increasing The Power Of Choice

Tom Horvath, Ph.D

Eaglet or Eagle?

Sheryle Cruse

Low

Jennifer Weber

Duke Forest and the Streets

Wayne D., Durham, N.C.

12-STEP TREK WORKSHEET

Serene Center





Snitching and Supporting Are Very Different Actions

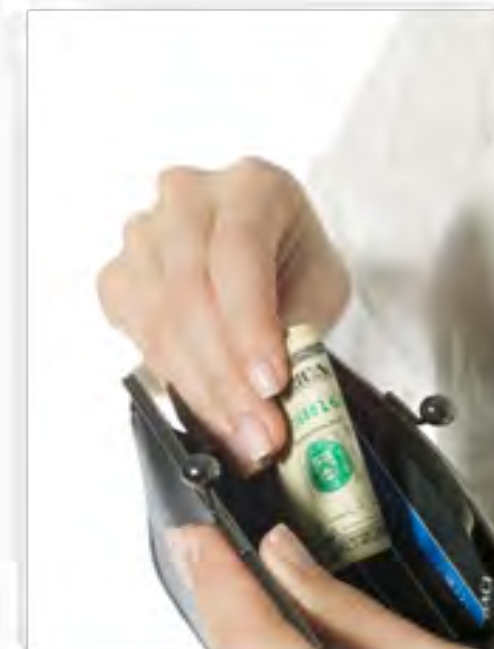
By Andrew Martin, MBA, CADC II, SAP

When addicts and alcoholics are actively using they become very narcissistic and manipulative. An alcoholic wants his/her drink and will do anything to have it. An addict wants his/her fix and will act out in any way necessary to get high one more time. Often the behaviors of an active alcoholic/addict appear socially unacceptable, repulsive and criminal to someone that is not an addict or someone that is in recovery. Here is a story to demonstrate this concept.

In the early evening on a typical Thursday, two addicts named Pat and Sam were hanging out in front of the local grocery store pan handling for money. An elderly woman parked her car in front of the grocery store and went to pull a shopping cart from the storage area. She placed her purse on the ground to gain leverage and pull a cart free from the stack. Pat and Sam watched as she entered the grocery store without her purse. Quickly, as if an organized paramilitary maneuver, Sam watched the grocery store door and Pat rummaged through the purse looking for anything of value. Pat found some cash and a nice looking pen that could possibly be sold at a pawn shop. After taking the cash and pen, both Pat and Sam left the area, leaving the purse on the ground where the elderly woman left it. As they walked away to find their drug dealer Sam said to Pat, "Stupid old lady, she deserves being ripped off if she can't remember her purse."

There is definitely a separation between the thought processes and social standards of an active user and a non-user. The twisted perception of reality that an elderly woman who forgot her purse deserves to be stolen from, and that carrying out the criminal act in concert with one another is normal behavior, is clearly not socially acceptable. A person without the disease of addiction would likely stop the elderly woman, then go over and pick up her purse for her – or perhaps intervene on the entire situation by offering to free a cart from the stack for the woman.

An interesting and difficult internal conflict happens for those in early recovery. There is a period of time that the alcoholic/addict has taken the appropriate action to find a lifestyle of recovery and is abstinent from drinking and drugging. However, during this time, the recovering person is still behaving in some ways as if they were still drinking and drugging. This is because their learned behavior has not yet been replaced



with healthier behaviors. Often, the individual has no awareness that this phenomenon is taking place which makes it very difficult to intervene upon the unhealthy behaviors.

One method of attempting to reduce the unwanted unhealthy behaviors in early recovery is to enlist the help of a support network or individuals that understand this phenomenon. For example, in treatment settings and continued care settings it is commonplace for the recovering addict to have a roommate throughout treatment. The roommate acts as a sounding board for unhealthy thinking and as a check-and-balance for unhealthy behaviors. In these settings, both roommates help one another because they grow to trust one another and rapidly create a strong bond due to the heightened emotional stimulus of being in a treatment setting.

Once the recovering person leaves the treatment setting, they must have a continued support system around them to act as the roommate did while in treatment. It can take years for unhealthy addict behaviors to be replaced by healthy recovery behaviors. While the recovering person is working on creating that healthy lifestyle of recovery, they need the support of



people around them to tell them when they are drifting back into addict behaviors. Everyone will likely agree that being honest and candid about one-another's behavior is appropriate and welcome if done in a caring and supportive way; especially if permission is given to provide such support. However, what happens when the recovering addict relapses into addict behavior and uses, drinks or acts out inappropriately can be a very different experience.

Despite loyalty and commitment to helping the recovering person find that long-term lifestyle of recovery, when it comes to relapsing behavior, often the behavior is not addressed or ignored. Somehow, the loyalty to the individual can outweigh the loyalty to the individual's wishes of recovery. It is interesting to note that regardless of the choice made by the reporting individual, there is betrayal of the relapsing individual. On one hand, if someone tells others that the recovering individual has used drugs, the reporter has betrayed the trust of the recovering individual. On the other hand, if the reporter chooses not to say anything, then they are betraying the recovering individual's wishes to support them in their recovery effort. This internal conflict is significant for the reporter, and come sometimes even lead to their own relapse.

In western society, loyalty and devotion has been regarded as an attribute of utmost importance (Heck 1992:254). In some cases, the concept of loyalty goes so far as to cover up for illegal and morally reprehensible behavior. To make matters worse, if someone follows through on their promise to support the re-

covering person and reports the relapsing behavior, the narcissistic and manipulative behaviors of the now relapsed individual will come out to ostracize the reporter or retaliate against them. They will be called a snitch and a tattler.

Clearly, the conviction of the supporter in the recovering addict's support system has to be outstanding and steadfast. The recovering addict needs help being held accountable for relapsing behavior in order to quickly correct course of action and re-engage in recovery behaviors. This concept is clearly understood by all when everyone is in a recovery mode. Why, then, do supporters not consider reporting relapsing behavior as supportive when an individual relapses?

The Community College of Philadelphia launched a project headed by Dr. Rick Frei called "The Snitching Project" in 2007. Some of the results may help to clarify the supporter's actions. The study found a relationship between reporting and initiative. It seems that the greater the initiative a reporter has to take in order to act in alignment with supporting the right thing to do, the less likely the reporter is to take action. Additionally, if the reportable offense is not violent, or does not seem to overtly harm someone, then the reporter is less likely to take action. Finally, when it comes to drug related offenses, reporters who also have drug related experiences in their past are far less likely to take action.

Since the support system of the recovering addict is usually comprised of others in recovery, it seems that the population of support is already handicapped by their own experiences when it comes to reporting relapsing behaviors. Additionally, because reaching out to report relapsing behavior requires intentional effort, and using drugs and alcohol may only harm the relapsing individual, the reporter is additionally dissuaded from taking action. Of course, these arguments for not taking action are clearly false when considering the immense importance of remaining engaged in recovery. However, in the moment, and combined with the pressures or personal loyalty, the potential reporter may consider themselves a snitch rather than a supporter.

Remember that, for the supporter, there will be a betrayal of either the big picture of supporting one's recovery, or the loyalty of the personal relationship

with the recovering person should there be a relapse episode. This internal conflict creates a great deal of stress and must be dealt with.

Often, individuals will justify not reporting relapsing behavior using one of five techniques of neutralization (Sykes and Matza 1957:669).

1. Denial of responsibility
 - a. It is not my job to tell on my friend
2. Denial of injury
 - a. They did not overdose, so it is OK this time
3. Denial of the victim
 - a. Nobody got hurt, so I will look the other way
4. Condemnation of the condemners
 - a. They only want to get my friend in trouble
5. Appeal to higher loyalties
 - a. I need to protect the family from harm



The bottom line is that snitching and supporting are very different actions. Supporting someone in their recovery means committing to a higher value system and being willing to stand up for the recovering person's wishes of long-term recovery when life circumstances get difficult. It is not an easy task to be a part of the recovering person's support system, just as most crucial roles are not easy.

It is imperative that everyone in the recovering person's support system know when relapse occurs. This is how relapse can be minimized and recovery efforts can be fortified. This is how lives are saved and long-term lifestyles of recovery are built.



Andrew Martin
M.B.A., CADDC II, SAP

Andrew Martin began his entrepreneurial approach to business in 1982 at the age of fifteen. Throughout his career, Andrew has fulfilled his duties as a senior executive in viable business ventures in various industries including; health care, sound reinforcement and lighting, electrical safety equipment, commercial catering, specialty metal

shapes manufacturing, and the entertainment overhead suspension industry.

Andrew's current business efforts are encompassed by Serene Recovery Network, a group of branded organizations with a common vision of helping people in early recovery to help themselves to a long-term rewarding quality of life without addiction. The individual businesses include Serene Center, a 36 bed transitional sober living facility in Long Beach, CA which also conducts outpatient counseling services, drug testing and monitoring, and outpatient detoxification. Serene Connections, a publishing and professional educational conference production company catering to the field of addiction treatment. Serene Directory, an online directory of professionals and organizations affiliated with behavioral and mental health. Serene Foundation, a micro loan lender providing funding for the continuum of addiction care.

Andrew has authored many articles related to addiction treatment, health care agency productivity, industry specialties, as well as business approach and leadership and has been published in Serene Scene, Behavioral Health, Freedom Newspaper, Sound & Video Contractor, Western Wall and Ceiling Contractors Association Bulletin, Connections Magazine (Australia), dB Magazine, EQ, Lighting & Sound International (Canada), Sound & Communications, Live Sound International (UK), Recording-Engineering-Production. Additionally, many patents and trademarks have been awarded to Andrew Martin for various business related products, brand names, and service marks.

Andrew is also very active in the California Association of Alcoholism and Drug Abuse Counselors (CAADAC) Board of Directors and Sober Living Network. Andrew also keynotes for many organizations.

SS