



SereneScene

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Critical Components of Addiction Recovery

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Lead with Your Heart

By Marcia Ullett, MA, LMFT, CPC

Step Six to Transformation

By Larry J. Smith, CAS II

Practicing Step Eleven

By Tom Catton

Courage

By Jay Kolo

Getting Past Addiction

By Christine W.

12-Step Trek Worksheet

CRITICAL COMPONENTS OF ADDICTION RECOVERY


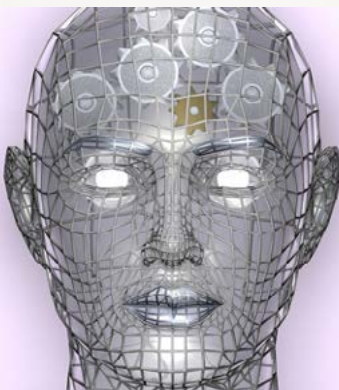

By Andrew T. Martin, MBA, CADC II, SAP

To state the obvious, addiction is a very difficult disease to place in remission. For over fifty years alcoholism and drug addiction have been treated with various methods and with inconsistent success. Recent identification of physiological aberrations in the addict's brain combined with advancements in psychosocial treatment techniques have improved treatment success rates significantly. With the current understanding of what appears to work well for Patients battling the disease of addiction, there are several identified critical components of addiction recovery.

As with most diseases, the Patient must engage in the treatment regimen. This is most important with treating addiction because the disease of addiction impacts three key areas of the individual's health. Physiologically, the Patient's brain undergoes genetic coding changes and mutations of neuroreceptors within the pleasure center of the brain. Psychologically, the symptoms of

addiction include narcissism, impaired decision making capabilities, cognitive and emotional distortions, codependency, and various other impairments. Quite often Patients with addictions also have mental health disorders as well; depression, post-traumatic stress disorder, bi-polar disorders, and personality disorders are common. Lastly, the sociology of the Patient is impacted by addiction. A lack of community and belonging combined with a loss of human and spiritual connection accompanies the disease.

One of the most critical components of effectively treating addiction includes the individualized approach to the Patient's needs. All Patients are different with regard to the impact that the disease has had on their physiology, psychology and sociology. It is necessary for the treatment approach to be individualized for all three of these aspects of the disease. Additionally, there may be mental health or other physical health

Physiological	Psychological	Spiritual
mechanical, physical and biomedical functions	mental processes and behaviors	metaphysical connection, and emotional reverance
		

needs that need treatment simultaneously. In general, a combination of medical, psychological and sociological clinicians are required to work with the engaged Patient for a significant amount of time. Research has clearly shown that Patients begin to make rapid progress in the recovery process after no less than three months of treatment, and the longer the treatment the better the results. The considerable impact that length of treatment has on the results for the Patient is directly linked to the time necessary for the brain to reconstruct and for the Patient's mind to exit post-acute withdrawal and progressively engage with more advanced treatments as they become well.

Another critical component of effectively treating addiction includes abstinence and/or pharmacotherapies while in treatment. While abstinence from all mood-altering addictive substances is preferred for the Patient, there are some people that cannot be successful without pharmacotherapies to assist them while engaged in treatment. Abstinence is preferred due to the requirement that the pleasure center of the brain, the nucleus accumbens, can reconstruct itself into a state of homeostasis. Without abstinence, the brain continues to function under the influence and much of the learning and processing power of the brain is lost as a result. However, there is a population of individuals seeking recovery that have brain function that simply cannot endure complete abstinence. With this population, it is necessary to carefully medicate them so they have a chance at engaging in treatment without continually relapsing due to heightened craving symptoms. It is extremely important to note that pharmacotherapy requires carefully controlled medications combined with appropriate therapy to be effective.

Many Patients also have the misfortune of being afflicted with mental illness in addition to their addiction. Treatment for these individuals is more difficult because the mental illness needs to be treated simultaneously. However, it can be very challenging for the treatment professionals to identify what the primary causes of the symptoms are due the possibility that the mental illness may be a primary illness or a secondary symptom of the addiction. Specialists in treating co-occurring disorders are required to provide expert treatment: experts may include a team of psychiatrists,

therapists and counselors. Non-addictive medications are often prescribed for mental illness and can be very effective in creating a scenario in which the Patient can engage in treatment.

Another critical component of effectively treating addiction includes people other than the Patient. While it is mission critical that the Patient develop an appropriate clinical support team, it is also critical to the Patient to have a healthy family support system and a recovery fellowship in place. In the experience of this writer, the number one and number two reason why people relapse is due to unhealthy love relationships and unhealthy family relationships, respectively. Addiction is often called a family disease, and while not clinically accurate, the phrase is pertinent to the reality that unhealthy family systems can often destroy the progress made by the Patient in treatment. Sometimes there may not be a family system in place for the Patient, or the family system may be so unhealthy that it is not practical to expect any wellness. In these instances, Patients often need to seek surrogate family systems in close friends or extended family.

Fellowship is another part of the support equation for the Patient. Fellowship means regular interaction with others that are in recovery from the disease of addiction. Because addiction leaves the Patient feeling very alone and with a great deal of loss, it is by interacting with others that can relate to the Patient's experiences that healing takes place. Fellowship brings a sense of community and humanistic bonding for the Patient. This type of connection develops a spiritual sense of belonging which, over time, helps to fill the void that many addicts experience within their quality of life.



The final critical component of addiction recovery that this article will explore has to do with intrinsic functions and characteristics of the Patient. Accurate thought and understanding is a primary concern for all those in recovery from addiction. Acute withdrawal and post-acute withdrawal cause symptoms of confusion, difficulty in problem solving, and distorted perceptions of reality. For treatment to be effective, these symptoms must be addressed in real time. Clinicians are trained to assist Patients through these difficult symptoms as long as the Patient can accept that their thinking and emotional state is not normal. This requires Patient openness in order to hear alternative and conflicting viewpoints, and to consider these viewpoints as more accurate than their own experience.

Because narcissism is a symptom of addiction, it can be very difficult for the Patient to set aside their self-will and stubbornness in order to absorb the potential of a more accurate interpretation of reality than their own interpretation. It is with humility that the Patient can begin to understand just how much their quality of life has been impacted by the disease of addiction. When acceptance finally comes, the Patient realizes that the disease has taken from them far more than they may have believed. A great sense of loss follows, and with that loss comes grieving. Eventually the Patient grows to have a willingness to understand their new found world, to become self-aware, and to rebuild a quality of life that will provide them with happiness and joy.

While there are most certainly additional critical components of addiction recovery for every individual Patient, the aspects described above are universal in their application. The complexity of the disease of addiction requires a holistic approach to treatment and recovery for the Patient. Recovery is far more than just abstinence, it is a universal approach to creating wellness within the Patient. Physiology, psychology and sociology must all be taken into account when trying to develop a long-term high quality of life without addiction.

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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.