



## Recognition and recovery: a conversation about addiction

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### Part 1: Uncovering addiction's secrets

By Nikki Migas and Al Whitehurst, CARF International

*Addiction* is a word riddled with images of reckless behavior, shattered lives, and criminal activities. Conversations about addiction are often shunned because they are uncomfortable, but the fact remains that addiction pervades all segments of our society.

In this two-part series, we asked William M. Ferney, M.Ed., CADAC, LADC I, and Sandra L. Wummer, CPHQ, to reopen the conversation and share their professional insights into the symptoms, causes, and treatment of addiction. Ferney is program director with the Gosnold Treatment Programs at The Miller House, a residential drug and alcohol dependency treatment program for men in Falmouth, Massachusetts. Wummer is corporate director for performance standards with the [Richard J. Caron Foundation](#), a multi-campus provider for drug and alcohol addiction treatment based in Wernersville, Pennsylvania.

What is addiction? The [American Psychological Association](#) characterizes addiction as "a condition in which the body must have a drug to avoid physical and psychological withdrawal symptoms." Although the term *drug* is generally applied to chemicals, such as alcohol or other substances, addiction can be more broadly defined as any behavior that becomes compulsive, such as gambling or shopping.

#### When pleasure becomes an addiction

"Indulgence implies a choice, such as a whim or a personal pleasure," Wummer says. "Addiction, on the other hand, removes all choices at that moment."

Wummer acknowledges that some substance addictions might have started as indulgence. "At some point, the addict lost the choice to use the substance and became powerless to control when and how much they consume," she says. "For many persons, the loss of choice occurred after they moved from occasional use to problem use. Other persons report they were addicted from the very beginning of using their substance."

"The operative element is control," adds Ferney. "Some behaviors have their place in life because they bring pleasure. They can become addictions when individuals cannot control their participation -- for example, when they cannot put down the next drink. Addicts are unable to make a decision to stop the conduct once they have begun it. Addicts feel compelled to continue."

Wummer dispels the myth that addicts continue in their addictions because that behavior brings them pleasure. "There is nothing pleasurable about being at the total mercy of the next drink, fix, or drug," she says. "Yes, there is immediate gratification with the first use of the day, but only because it brings the person back to the baseline comfort that is necessary to go on. Once a compulsion to use hits, the pleasure disappears. The substance becomes a need, not a want."

#### Addiction's stealthy progression

"We have a tendency to blame the addict, but no one is to blame for substance addiction," Ferney emphasizes. "No one ever intended to become addicted. Addicts often tell me, 'I didn't believe this would ever happen to me.' Addiction is out of the addicted person's control."

Why does a user partake of a substance in the first place, if he or she knows it could lead to addiction? In his profession, Ferney frequently hears younger alcoholics say they began drinking to reduce anxiety or

boredom.

Wummer adds, "Self-destruction is rarely the original intent. It's the nasty byproduct of the addictive behavior."

Psychologists classify addiction in three stages: early, mid- and late. The [Jellinek curve](#) (named by psychologist and researcher E. M. Jellinek, 1890–1963) is often cited for identifying the stages of addiction and recovery. "The stages of addiction fall along a continuum of severity of symptoms and the loss of control over use," Wummer says.

The American Psychological Association's website explains, "Addiction's first stage is dependence, during which the search for a drug dominates an individual's life. An addict eventually develops tolerance, which forces the person to consume larger and larger doses of the drug to get the same effect."

Ferney amplifies this definition: "Addiction reaches the point when people can become frightened if they are without their substance. Addicts describe the loss of substance as creating a 'hole in their souls.'"

Wummer explains the downward spiral into the late stage of addiction: "Despite continued negative consequences in areas such as relationships, work, and personal happiness, the addict continues in the behavior. If alcohol is the addictive substance, they might seem to be able to drink more and 'hold their liquor,' better known as tolerance. When someone starts giving up things they loved so they can spend time with their drug, the addictive process has probably begun."

### **So-called "positive additions" can be hurtful**

Our culture commends hard work and vigorous exercise, but these activities can be harmful, too.

"Some persons have a tendency to do many different things in their life in an addictive manner, whether it's using a substance, shopping, or gambling," says Wummer. "The same mechanism that makes people drink to excess can also make them work too hard, be a perfectionist, or shop too much. All are harmful once they start to have a negative impact on [the addicts'] lives and on the people around them."

In recovery, an addiction to substances might be transferred to other activities, such as spending long hours at work or exercising. As Ferney notes, dedication to work can become workaholism: "People naturally expect to feel rewarded or fulfilled for performing a job well. However, persons who work only because it gives meaning to their life can be showing addictive behavior. The more they work, the more meaning they have to their life. If they don't work all of the time, they feel empty."

Ferney is careful to distinguish workaholism from putting in extra hours at work to reach short-term goals. For example, working two jobs to pay for college, medical bills, an addition to the family, or a mortgage may not constitute workaholism.

Exercise, meanwhile, offers many benefits in terms of health and personal appearance, but if it becomes a compulsive behavior, addiction can follow. Part of the explanation could be chemical: Strenuous exercise is believed to release endorphins, morphine-like chemicals in the brain that can reduce the sensation of pain and affect emotions. In the extreme, exercise becomes a drug.

When do healthy activities cross the line to addiction? "It's a matter of balance," says Ferney. "Any compulsive behavior can be unhealthy if the person shirks other responsibilities or neglects his or her family."

The key to recognizing behavioral addiction is maintaining balance in your life. "Nearly everyone must work, exercise, shop, have sex, and eat -- and all of these activities make us feel good," Ferney notes. "These activities can become addictions if they are all-consuming in your life."

What can be done, then, if addiction occurs? In the second installment of this series, the conversation will continue as we chart a course for recovery.

*Nikki Migas is the managing director of the behavioral health accreditation area of [CARF International](#), an independent accreditor of health and human services, and Al Whitehurst oversees the accreditor's corporate communications.*

## **Part 2: Finding the path to recovery**

*By Nikki Migas and Al Whitehurst, CARF International*

In the second installment of this two-part series, we continue our conversation with William M. Ferney, M.Ed., CADAC, LADC I, and Sandra L. Wummer, CPHQ, about addiction and recovery. Ferney is program director with the Gosnold Treatment Programs at The Miller House, a residential drug and alcohol dependency treatment program for men in Falmouth, Massachusetts. Wummer is corporate director for performance standards with the [Richard J. Caron Foundation](#), a multi-campus provider of drug and alcohol addiction treatment based in Wernersville, Pennsylvania.

### **Science gives insights into the nature of addiction**

"Many different reasons account for people becoming addicted," Wummer says. "Genetics certainly have a role in predisposing a person to becoming an alcoholic or addicted to a substance." Social factors, such as peer pressure or the ease of obtaining addictive substances, can also lead to addiction. Wummer cites studies that found both biological and environmental influences on the development of addiction.

However, no sure predictor exists. Wummer observes that two siblings, genetically similar and raised in the same household, can have very different personalities. In her profession, she has witnessed situations where one sibling becomes an alcoholic, while the other does not.

Addiction appears to occur randomly in the population. "Demographic characterizations of addictions do not apply," Ferney says. "It is a myth that certain races or ethnic groups have greater predispositions to substance abuse. For example, the notion that the Irish are predisposed to alcoholism is false; they have no higher rates of dependency than other groups."

Nevertheless, Ferney allows that culture might play a role in either condemning or approving addictions. "Various cultural groups have different norms for what is appropriate and inappropriate behavior."

Technology has a role to play as well; scientists have used brain imagery to detect subtle differences in the brain patterns of addicts. "Does the brain change because of substance use, or is the brain changed because it is predisposed to addiction? The jury is still out on this debate," Wummer notes.

### **Recognizing and dealing with addiction in a loved one**

Recognizing an addict can be difficult. "People commonly believe that an alcoholic is a skid-row bum," Wummer asserts. "It's hard for people to believe that a teen might have a lifelong disease or that the head of a large company can be addicted -- but they can."

Ferney agrees: "When you see someone every day, changes in behavior may be so gradual that they are not obvious." In his practice, Ferney remembers a mother who did not perceive her teenager's methamphetamine addiction until the teen became entangled in trouble with the law: "The changes in the teen occurred little by little. The mother didn't notice the slow weight loss or the subtle behavioral changes that occurred over time."

Ferney adds, "When you think there might be a problem, there probably is one. Yet it might be as vague as a feeling as 'something is different.'"

Once this recognition has occurred, what should then be done? "Be honest when confronting someone's addiction. It does no one good to pretend it doesn't exist," Ferney advises. "You needn't have an angry confrontation or place blame. Say something like, 'I'm afraid something bad is going on. I'm noticing this, this, and this.' If your suspicion is groundless, the person will be concerned and probably ask you why you thought there was a problem. If the person becomes very angry, you have a clue that your suspicion is true."

Ferney adds, "The earlier the intervention, the more successful it is likely to be."

### **Treat addiction with support for the addict and the affected family alike**

"It's a myth that someone has to hit rock bottom before they can get sober," Wummer says. "People can choose to get help at any point along the addiction continuum."

Wummer suggests that as a first step, a concerned family member or friend needs to become educated in the disease of addiction and understand the nature of it. "Addiction is controlling, powerful, and chronic. It won't go away on its own or without hard work. Understanding it and helping yourself is the only way that you can help your loved one find the treatment he or she needs."

Wummer continues, "As with any chronic and progressive disease, treatment should be provided by someone who understands the medical component of treatment, the psychological damage done by the addiction, and the underlying psychological issues that support the addiction in the first place. Addiction affects the whole family. The long-term damage done to families by the addicts' behaviors cannot be ignored in treatment. Families need education and treatment, too."

For persons who have a child, spouse, parent, or friend who might be an alcoholic, Ferney recommends Al-Anon (which includes Alateen for younger people). You can begin your search for services in your community by asking other people for their recommendations and by scouting for resources on the Internet. CARF offers an online [search tool](#) for finding an accredited provider by geographic area or type of service.

Wummer concludes, "I often say that alcohol isn't the problem. It's the ism in alcoholism. The only solution for the ism part is changing an addict's thinking and response patterns. That is what the 12 steps of Alcoholics Anonymous do. It is also what good treatment does. It helps people begin to change their thinking."

### **The future can be brighter**

Treatment for any addiction is long-term; there are no quick fixes, and recovery is a process. With professional guidance from dedicated, experienced counselors like William Ferney and committed quality professionals like Sandra Wummer, persons with addictions and their loved ones can find a happier future on the path to recovery.

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