



# REALITIES OF EARLY RECOVERY

by TWFO Couple

A guide on what to expect when  
and after your partner gets help for  
substance abuse.

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# Welcome

Every year, millions of people enter inpatient, outpatient (IOP), and supportive outpatient (SOP) programs to address their addiction to drugs or alcohol. We know from experience how incredibly scary this can be for the addict/alcoholic and their family and friends. TWFO Couple, Matt and Paige, discussed some common themes surrounding treatment that we see in our community as well as from other groups and individuals that deserve to be addressed. As the spouse or partner of an alcoholic/addict it may be helpful to have an idea of what to expect while your loved one is in treatment and more importantly, what happens after treatment. We've come up with the following guide that we hope serves you in answering your questions and concerns around treatment. We will address inpatient treatment primarily here, as it is often the most asked about form of treatment by spouses or partners.

# Types of Treatment

## Inpatient

Typically 30-90 day facilities where the patient stays 24/7.

## Outpatient (IOP)

- Typically 90-180min sessions during the day where the patient stays home and attends sessions 3-5x a week.
- Recommended for those coming out of inpatient.

## Supportive Outpatient (SOP)

Similar to IOP, but with fewer hours and days spent in attendance each week.

## Detox

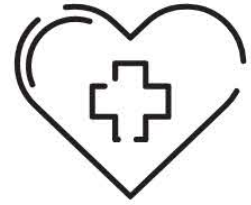
Facilities designed to ease the withdrawal process from drugs and alcohol.

# WHAT TO EXPECT in admittance?



For all patients, the admittance to an inpatient facility begins with a detox evaluation. For alcohol users, their drinking habits are evaluated to determine the likely severity of their withdrawal symptoms upon cessation of drinking. Patients are generally administered a drug or combination of drugs to lessen their risk of alcohol induced seizures and to decrease the likelihood of severe, uncomfortable withdrawal symptoms. Opiate users are also administered medication to lessen the effects of withdrawal. Some facilities have in-house detox while some others outsource the care to another facility. Patients remain in detox for anywhere from 3 days to several weeks depending on their unique circumstances. Detox simply allows the user to be comfortable; very little education regarding long-term sobriety is given and in fact, we believe detox is not the same as sobriety at all as use is but a symptom of larger underlying issues. Many users will go here first to stop, some simply placating their family and friends by entering detox...only to enter again and again. This is not always the case, but it has been our experience being part of this world for many years.

# WHAT TO EXPECT after detox?



Once the medical team has determined the patient has safely detoxed they are admitted to the larger treatment center community. Inpatient treatment centers vary in their approach to treating addiction as there is no single way that works for everyone. Some facilities take an individualized approach depending on the patient, while others are simply 12-step based and provide the same care for everyone. Many treatment centers have taken a hybrid approach where each patient's needs are discussed and a unique treatment plan is developed to provide the best chance of success that includes some form of 12-step recovery. From science and medicine, to holistic approaches, to spiritual approaches, the facility will do their best to tackle the issues present.

Something worth mentioning here is that the quality of the treatment center pales in comparison to the quality of the willingness within the patient to work toward sobriety. We have seen people get sober at free facilities that had bed-bug infested mattresses and others fail at \$135k per month facilities that had on-site masseuses, golf, health spas, and state of the art science-backed approaches. That is, there is no facility in the world that can help someone that is unwilling. For the spouse or partner, this is where it becomes difficult.

Patients spend their days in group therapy, individual therapy, lecture classes, and community strengthening events. They do get some free time and often have the opportunity to talk on the phone or have in person visits during the course of their stay.

# Types of Patients

Not Ready, Not Willing

Ready, Not Willing

Willing, Not Ready

Ready and Willing

As the spouse or partner of an addict/alcoholic it is extremely important to understand that your loved one will not leave treatment “Fixed.” Treatment is simply a place to detox, become educated on the nature of addiction, begin to work on any underlying issues that may have caused the addiction, and develop a long-term plan to remain abstinent from mood- and mind-altering substances. Real recovery starts the moment they leave treatment. Matt has been volunteering at The Meadows in Texas for many years and has come to know thousands of patients over the years.

# Not Ready, Not Willing

The patient is typically forced into treatment by friends, family, the judge, or an employer. They view themselves as “Different” than the other patients and do not identify with anyone else. They believe they do not have an addiction, but rather they “Had a bad run” or that their use was circumstantial due to events in their life that caused abnormal stress. They will attend all required classes and appointments, but they rarely participate. They bide their time to placate the people around them so they can eventually get out and “Figure it out on my own.”



*"I don't have a problem.  
YOU have a problem."*

# Ready, Not Willing



*"I'm different... if you had my life... if you had my job... that won't work for me..."*

The patient understands they have a problem. They have wreckage in their life such as fractured relationships, legal problems, previous stints in treatment, etc. They know they need to get help and often go into treatment on their own or with no argument. They know something needs to change and they are ready to address their problem. They are ready. Ready is not the same as willingness, however. Once in treatment they often participate in group sessions and individual sessions but they have reservations that are often uncommunicated. Reservations for the purposes of this discussion are things you have likely heard or sensed from them before. E.g., "I could never not drink", "Life without drinking (drugs) is probably the most boring thing in the world", "I don't know if I can do this", "I'm different", or things like "If you had my job or my past or my mother or my life you would drink too". Reservations are relapse in wait. They are conditions that the person will remain sober under, or things that if present, will cause them to drink again. They are not fully sold on their seriousness of their problem and the way their life must change long-term to maintain sobriety...but they are ready for some kind of change. Usually not a drastic one. They are open to the fact they have a problem but they are not open to making changes recommended by others that will require a great deal of effort on their part.



# Willing, Not Ready

This is perhaps the hardest. The patient is desperate upon entering the facility. They know they have screwed up badly, they want a renewed life, they want repaired relationships, they swear they will do anything to get there. These people give you hope, and then break your heart...because they're just not ready yet. Desperation has an expiration date. It's only temporary and it's easy to forget how bad things were in just a few weeks or months. These patients generally remain sober on their own volition for 60-90 days but eventually relapse because they are not willing to continue to work on their sobriety. They are incredibly enthusiastic about sobriety early on, yet maintain some level of "I got this" which are the most dangerous words in recovery. Recovery requires a great deal of humility and a willingness to listen to the advice of others and simply take it on faith that doing action A, will give you result B. The absence of willingness will nearly always result in relapse at some point because there is no finish line in recovery. Rent must be paid every single day. Being desperate will fade, the pain of what caused the desperation will be forgotten or minimized, and the mind will once again tell the user "It will be different this time. I'm different. I'm not like those other people. I can control it. I got this." Without the willingness to continually work toward recovery every day, there is little hope for long-term sobriety. It is Matt's purpose in life to unlock the door to willingness. It's easy to get someone ready (through consequences and creating desperation), but willingness is tricky.



*"I got this."*

# Ready and Willing



*"I have a problem and need help."*

These patients are done. They cannot stand the reflection in the mirror. They are desperate. They will do anything they are told if it means they do not have to feel the way they feel anymore. No questions asked. They are few and far between. They too can fail though, if maintenance work is not done daily but in our opinion they have the highest chance of success.

The four types of patients outlined and their chances of success are by no means absolute. They are simply our description formed through years of experience being in and around treatment centers. Any one of these four types can achieve long-term sobriety. Matt has seen people not willing, not ready suddenly “Get it” while others that seemed perfectly positioned to get sober, failed. The ingredients of opportunity, ready, willing, and desperation are different for everyone.



# Why is any of this relevant for you, the spouse/partner?

It's important to understand these things because often the partner/spouse has the idea that their loved one will be "Fixed" after 30 days in treatment and this is not the case. Treatment is the very beginning of your loved one's sobriety journey. Chances of success are unfortunately low. Treatment centers provide statistics for success and often the rates of 90% or 85% are only 30-day post treatment numbers. The rates of success for one year or more are far lower. This is why it's crucial to focus on YOU. You are dealing with a deadly affliction that progressively gets worse, not better, over time if left alone. You did not cause the addiction, you cannot cure the addiction, and you cannot control the addiction. You cannot love them enough to fix them. You cannot control their environment enough to fix them. You cannot live with guilt that you are somehow responsible. This does not mean you shouldn't support your loved one's recovery, or that you should give up on them...simply that you must focus on yourself and understand that no matter what the result, the most important thing is that you love yourself enough to know what you will and will not tolerate, what you can and cannot change, and what actions to take if boundaries are crossed. You are a beautiful person that deserves love, admiration, respect, and affection. Let's focus on that. Let's stop focusing on the addict/alcoholic and how "If they were only sober" we would be happy. Let's discover happiness with, or without this person. Let's understand how we can be happy even within the storm. Let's detach with love and stop placing a contingency on our happiness. Let's grow together.

TWFO was created for this very purpose. Our mission is to provide the partners, spouses, family members, and friends of an addict/alcoholic the tools to address their needs. It's easy to lose sight of what you want in life when your time is spent worrying, caring for, or covering for an addict or alcoholic that you love. Over time this leaves a gaping hole in your heart and where there was once hope, happiness, and optimism, there is only anxiety, dread, fear, and worry. Addicts and alcoholics get a ton of attention and we want to bring the focus back on you. Through our shared experiences, knowledge, and understanding of addiction and how it affects relationships we CAN be happy again.

# WHAT TO EXPECT Post-Treatment?



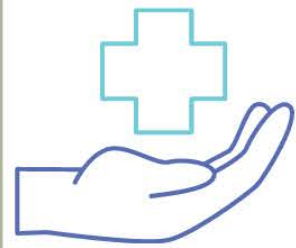
As mentioned previously, it's a commonly held expectation that our partners and loved ones will return from treatment "Fixed" or "Healed" and ready to pick up right where we left off before the addiction took hold. We assume they can function normally, quickly make amends for the wrongs they have done, focus on the marriage and family, and live happily ever after. While all these things may be possible after some time, they should not be expected in early recovery. Early recovery sucks. It is painful, stressful, confusing, and at times it may even seem hopeless. The addict/alcoholic is undergoing massive psychological and physiological changes as they learn to function without their substance and their brain and body begin to heal from the trauma of substance abuse. The brain is gravely affected from long-term substance abuse and while research shows that the brain is capable of healing itself to a degree, some damage to tissue may be permanent. You will notice your loved one seeming disconnected, irritable, short-tempered, uncertain, fatigued, disinterested, depressed, etc. as they find their way back into the flow of life with their new mind and body. As the partner, we often feel just as lonely in early recovery as we did amid their addiction.

# WHAT TO EXPECT Post-Treatment?



We will break down two different types of addict/alcoholic post-treatment. There are those that work on recovery, and those that do not. Regardless of whether the addict/alcoholic works on their recovery post-treatment or not, for the spouse, the feelings toward their loved one are similar. You may feel isolated and closed off from their life, you may feel a lack of intimacy, you may question whether they are doing enough to sustain their new-found sobriety, you may begin to wonder if the relationship will endure, you may wonder what they are thinking to obsessive lengths, you may ask yourself if you will love each other again. All these emotions are normal. You have experienced massive trauma and you will naturally begin to question the very foundation of your relationship. We found it helpful to allow yourself to have these emotions, but to quickly begin to work on yourself because we have just described earmarks of codependency.

# PEOPLE WHO WORK on their recovery



For people that leave treatment and work on their recovery, it's hugely beneficial to the recovering codependent as many of your fears and concerns will be addressed as they begin their healing. However, the addict/alcoholic getting sober will NOT fix all of your problems. Just as the addict has caused considerable damage to their mind, your mind has undergone massive change as well. You have been placed in a position where you have walked on eggshells, feared for your emotional security, feared for your dreams, feared for your safety, obsessed over their recovery, and forgotten about yourself. This will take some undoing. It is critical that you focus on yourself while supporting the mutual recovery of the relationship. In our society it's often believed that you must choose one thing or another. The earmark of high intellect is the ability to hold two opposing thoughts at the same time while still being able to function. It takes time to conquer the "All or nothing" cognitive distortion but allow this to be your first venture toward it. You must focus on you, while also giving some bandwidth and energy to supporting them and the relationship. The addict will receive considerable attention and praise for working on their recovery and you may mistakenly believe that their recovery means you too will recover...but just as they are working on themselves, you must work on you.

# PEOPLE WHO DO NOT WORK on their recovery



For people that leave treatment and do not work on their recovery, it's even more critical to focus on yourself...for you are likely to be placed in a familiar position again before you know it...i.e., obsessing over the addict/alcoholic. You must begin to work on yourself and gain an understanding of what you can and cannot change within your home or relationship. You may set boundaries, but understand boundaries are simply fences to protect yourself...and they do not necessarily lead to positive results that we want from others. You may still love the addict/alcoholic and maintain hope that one day they may achieve sobriety, but to push aside your needs at this important juncture would be a mistake. More than ever, you must focus on yourself and detach with love. That is, you can still love and support someone slowly ruining their life without being intimately involved with them. You are not responsible for the actions and decisions of your partner or loved one. You cannot want recovery for them so much that they suddenly see it for themselves...you cannot logically argue them into a mindset that they see the errors of their ways. This does NOT mean you shouldn't care, simply that recovery is a personal decision. It is the addict's choice to get sober and work toward it each day. No matter how much they love you and/or their children and family, the decision must be theirs in order to achieve long term sobriety.

# Take care of you

Remember, their sobriety is their responsibility, and you cannot control or fix them. Focus on your own well-being, set healthy boundaries, and prioritize self-love. Understand that recovery is a personal journey, and your support can only go so far. Whether your loved one actively works on their recovery or not, remember that your healing matters too.



## Need More Help?

[Schedule a FREE Consultation](#)

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