

Addiction ASAM

Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry.

Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations.

This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

Impact of Addiction

Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response.

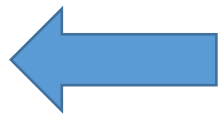
Like other chronic diseases, addiction often involves cycles of relapse and remission.

Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

Trauma can impact brain chemistry

- Weakens our personal boundaries and causes codependency
- Re-directs the brain's circuitry to **re-define survival**, specific to reward, motivation and memory.
- **Brain perceives survival information and then Instructs** the mind to cooperate with denial, enabling or substance use.
- "I may have become frozen in time. This could have been the foundation for my addiction when my brain perceived my trauma as life threatening. My brain in survival mode could have rewired a neural pathway in order to avoid or undermine my healthy primary concerns for the sake of my perceived survival directives."

Psychological and/or
Biological Dysfunction



Invalidating
Environment



Pervasive Emotional Dysregulation

Brain is programmed: Survival vs Abundance

Brain wired for **Survival: Limited Effectiveness**

- Character (pretense for hidden agenda) : no workability
Looking good, domination, being right,
win/lose, rationalize, no responsibility no accountability

Brain wired naturally (without trauma) to thrive in abundance

- **Choose from Possibility : Effective**

Inclusiveness, Open minded, Compassionate,

Forgiving, Unconditional Positive Regard,

Non-judgmental, Give up looking good, Mindfulness

Affirmations vs psycho/socio cultural programming

- Our social context: childhood experiences are the beginning of self identity. We continue to accept or reject **self identity from our context throughout life.**
- Since childhood, we are groomed **to believe** who we are and who we are not.
- **CORE BELIEFS** will often 'over ride' new information or new experiences. Infants learn to walk in a motivating & encouraging **context that they can walk**
- Our brain is a complex of circuitries and a biological necessity for the mind...but **it doesn't register or process** the assessment capabilities of our minds. Repetition & Survival: Core Beliefs become "hard wired" in our brain circuitry.
- Therefore, human beings can '**trick**' **the brain** through repeated affirmations until new neural pathways in the brain are generated to accommodate this **new information which causes a change in Core beliefs.**
- **AFFIRMATIONS do not have to be true:** your brain doesn't know the difference anyway. Choose 'being' & 'becoming' via transformation. **Affirm it regularly.**

Practice Affirmations: 23 Psalm

- **The Lord is my shepherd, I shall not want.**

Accepting this reality I have no deficiencies.

- **He makes me to lie down in green pastures.**

Even though I reject the good things in life, He will force the good things upon me.....whether I am aware of it or not.

- **He leads me beside the still waters. He restores my Soul.**

I follow a pathway to calm and relief where joy is possible. Only the One who creates my Soul can restore it.

- **He leads me in paths of righteousness for His name sake.**

I will surrender my own self –righteousness,

- **Although I walk through the valley of the shadow of death, I will fear no evil.**

Evil lurks in the shadows and has no substance in G-d reality. There is only G-d.....nothing else

- **For you are with me.....Your rod and your staff comfort me.**

A common tool of a shepherd which causes his flock comfort.

- **You prepare a table before me in the presence of my enemies.**

You openly provide abundance for me. My enemies may believe they are diminished by me and will be jealous

- **You anoint my head with oil. My cup is over-running.**

An ancient custom to honor royalty. The house of the Lord experiences royalty: Abundance in my life is overflowing.

- **Surely goodness and mercy will follow me all the days of my life and I will dwell in the house of the Lord forever.**

We live in the reality of God and our experience of reality is a moment in time.....there will be moments when I will be grateful and moments I will want to pray for mercy.

Stages of Change

- **Precontemplation:** “It isn’t that we can’t see the solution....It is that we can’t see the problem”. Situation feels Hopeless.
- **Contemplation:** “ I want to stop feeling so Stuck”.
Contemplators struggle to understand their problems. -Indefinite plans.
“After some ambivalence, your destination may be known & even known how to get there, but in this stage, you are not ready to change your mind yet”..
- **Planning:** In preparation you may still have some ambivalence and may still need convincing. You have chosen but there is some anxiety.
- **Action:** Requires the greatest amount of time and commitment.
- **Maintenance:** Without a strong commitment and authenticity without agenda, Relapse is inevitable
- **Termination**

FIVE STAGES OF GRIEVING

Denial

Anger

Bargaining

Depression

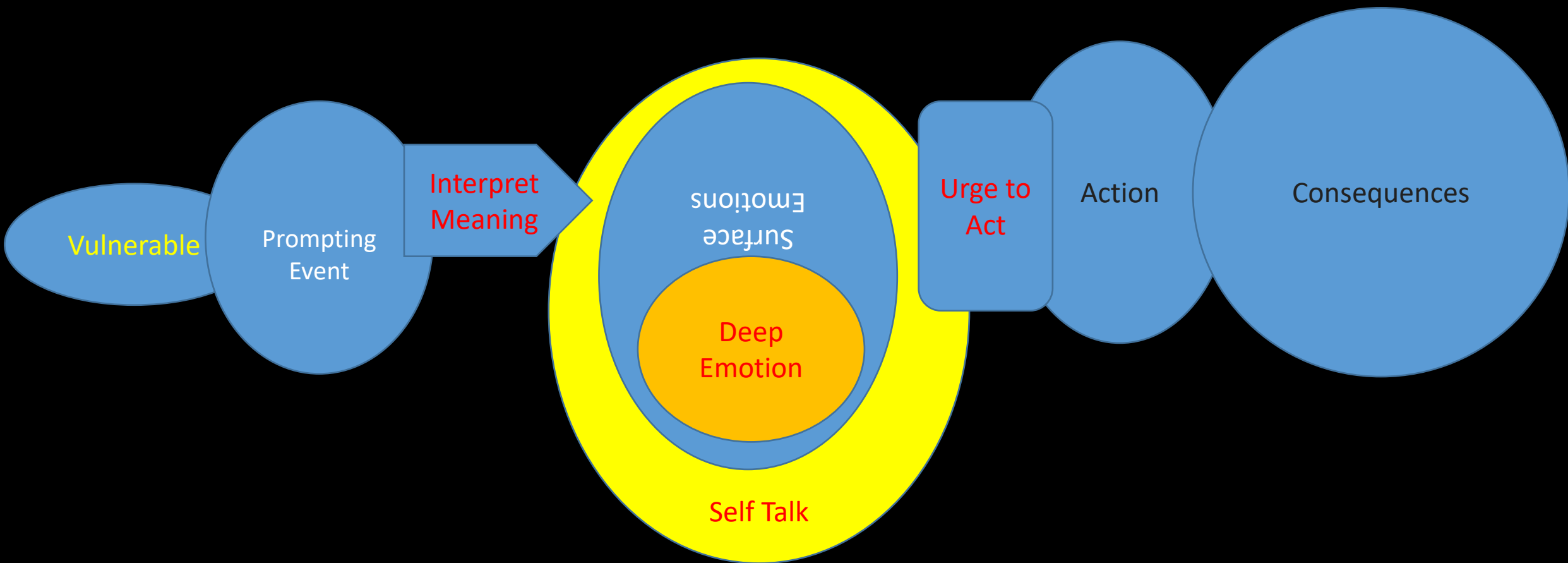
Acceptance

Strategy

- We are **always choosing**or choosing not to choose.....
'who we be' based on the **available data** in our lives.
- Childhood is the 'dress rehearsal' for the rest of our lives.
- The question to ask ourselves....How is life working out?
- We can accept our lives by choosing it as it is...Good, Bad or Ugly.
- Re examine **the data** the **you have chosen** to run your life.
Hidden agendas: programs running in the background,
- Choose to reconstruct a 'life worth living'
- **People, Places and Things**.....Which environment will you choose for yourself?will you listen to 'love songs' or violent rap?
- It is your responsibility to 'scrub **your own mind** ' reset **your own life** with the **script that you choose** and **choreograph** a 'life worth living'.

Visual Analysis of Behavior Chain

The only thing that doesn't change..... 'what is so'



Common Thinking Errors: Creating Meaning

- **All-or-Nothing:** Things are only good or bad....no middle ground.
- **Over generalization:** Creating assumptions about events or outcomes based solely upon past experience regardless of the facts.
- **Filtering:** To focus only on one's personal prejudices (private logic).
- **Personalizing:** Responding to people or events from ones belief of low self esteem or assuming that 'everything' is about the self.
- **Self put-downs:** Under-valuation of self causing distortions of real value.
- **Magnifying/minimizing:** unreasonably exaggerating negatives or shrinking positives.
- **Converting positives into negatives:** Habit to be in a negative listening/ 'being right'.
- **Catastrophizing:** Exaggerating the impact or anticipation of events.
- **Mistaking feelings for facts:** feeling can be factual but facts are not feelings.
- **Using 'should' statements:** causes guilt/disappointment in self and frustration, anger and resentment in others.

Stages of Change INTO Addiction

- Unknown : Events, Circumstances, Predispositions, Etc.
- **STAGE ONE:** Internal change
Addiction Logic: Life-style is acceptable.
Boundaries evolve to build walls to keep people out and keep substance use in.
- **STAGE TWO:** Life-style change
Body is breaking down.
Commitment to maintain new life-style: Working very hard to cover up & hide.
Behaviors: Lying, Blaming, Withdrawing, Ritualizing symbolic to promote predictability.
Family and friends fully sucked into the process of maintaining predictability.
Shame, Panic , Despair
Acting out increasing dangerous activities.
- **STAGE THREE:** Total Life-style Breakdown
Pushing limits harder than ever before to obtain the positive feelings achieved through the “relationship” with the substance.
Family and friends becoming fearful in addict’s presence.
Pain cues numbed & the body worn down & suicide ideation develops.

Warning Signs of a Relapse I

- **Apprehension about well-being:** the lack of confidence in you own ability to remain drug-free. This can happen when you are tempted and have difficulty turning away from that temptation.
- **The return of denial:** being unable to recognize and tell others what you are thinking and feeling. This can happen when you yourself are not even able to recognize that you are falling back into an addictive behavior.
- **Defensiveness:** Defending yourself when talking about your problems. This can happen when you don't want to accept that you are returning to your former addiction.
- **Avoidance :** *This involves not wanting to believe that anything can cause painful and uncomfortable feeling to come back. You may avoid people or places that will force you to engage in introspection.*

Warning Signs of a Relapse II

- **Crisis building:** The addict feels overwhelmed and unable to handle life. You may feel every time you deal with a life problem, two or more problems appear. This might appear if you have legal issues and your plans fail or are too stressful.
- **Immobilization:** The addict is just going through the motions of life and not really engaging with the people around. You may feel like none of your problems can be solved and instead spend all day day-dreaming.
- **Plans begin to fail:** You no longer follow through with your plans for healthy living . This can happen when you feel they are too difficult or are tired of the discipline of abstaining from drugs.
- **Irritation:** This involves being quick to lose your temper, and over reacting to minor slights. This can happen as a result of your own frustration with yourself.
- **Conscious lying:** you find yourself explaining away the truth of you situation and instead, believing lies about yourself.

Warning Signs of a Relapse III

- Depression: the most common symptoms of depression are irregular sleeping and eating habits , a loss of interests in things that the addict used to enjoy, lethargy and a loss of daily structure. You may feel that suicide or substance abuse is the only way to end the depression.
- The loss of ability to control behavior: this could manifest as an “I don’t care” attitude, not attending meetings, rejecting offers of help, and missing work/appointments. You may feel as though being ineffective in your ability to remain drug free means that you are an ineffective person.
- Open rejection of help: When the people who care about you reach out and express concern, you reject their help.
- Being around people engaged in drug use and other self-destructive behaviors: This might be both a warning sign and a cause of relapse. Your plans could involve being surrounded by people who do not consume drugs or alcohol.

Letting Go of Shame

- What is shame? A painful belief in one's basic defectiveness as a human being. **Toxic Shame can stop us from living a life worth living.**
- Natural response to shame experiences is to hide and withdraw. It is painful and can be felt throughout the body. The experience of shame is also a feeling that can be overwhelming. Most people are willing to discuss anger, sadness, or fears but will **conceal shame.**
- A set of physiological responses (looking down or blushing)
- Predictable actions (hiding or withdrawing from others)
- Uncomfortable thoughts (I am a failure in life)
- Spiritual despair (disconnect from the universe)

We may become ashamed of being ashamed. We try desperately to calm down but our bodies refuse to listen.

Healing Shame

“I am human, no better or worse than others....unique and good enough as I am”

- Healing begins with understanding and is followed up with action
- Become fully aware of our shame
- Notice our defenses against shame
- Accept a certain amount of shame as part of the human condition
- Challenge Shame
- Set Positive goals to help replace our shame with self-worth

Hope: A deep faith that nobody needs to remain forever in personal despair.

Choosing to live in possibility: you may discover that there is a great freedom in living a life that centers on self-respect, dignity, honor and realistic pride.

Shame and Guilt

- **Both shame and guilt inform us that there is something wrong between us and the rest of the world. Good & Temporary shame is important for a healthy life.**
- **Shame** concerns a person's failure of being: bothered by our shortcomings
- **Guilt** points to a failure of doing: noticing our transgressions.
- Shamed people fear abandonment while the guilty fear punishment
- Shame can be more difficult to heal than guilt: Shame healing is normally a slow and painful process requiring deep self reflection of our basic assumptions about our place in the universe.

“How could I have done **that?** “

“ I” suggests **identity and shame**: “that” suggests **behavior and guilt**.

Guilt leads to shame and visa versa

SUBSTANCE RELATED AND ADDICTIVE DISORDERS

All drugs that are taken in excess have, **direct activation of the brain reward system**, which is involved in the reinforcement behaviors and production of memories. They produce such an **intense activation of the reward system that normal activities may be neglected**.

- 10 separate classes of drugs
- Alcohol
- Caffeine
- Cannabis
- Hallucinogens
- Inhalants (hydrocarbon-based)
- Opioids
- Sedatives, hypnotics and anxiolytics
- Stimulants (amphetamine types, cocaine etc.)
- Tobacco
- Other unknown substances.
- **TWO MAJOR CLASSIFICATIONS: Substance induced disorders & Substance use disorders (BEHAVIORS)**

I. SUBSTANCE INDUCED DISORDERS

- intoxication
- withdrawal
- medication-induced mental disorders (psychotic, bipolar, depressive, anxiety, obsessive-compulsive, sleep disorders, sexual dysfunction, delirium and neurocognitive disorders)

II. SUBSTANCE USE DISORDERS: problematic patterns of use leading to clinically significant impairment as manifested by at least 2 of the following BEHAVIORS occurring within 12 months

- Substance is often taken in larger amounts or over a longer period than was intended.
- There is a persistent desire or unsuccessful efforts to cut down or control substance use.
- A great deal of time is spent in activities necessary to obtain substance, use the substance, or recover from its effects.
- Craving, or a strong desire or urge (CONDITION) to use the substance.
- **Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home.**
- Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.
- Important social, occupational, or recreational activities are given up or reduced because of substance use.
- Recurrent substance use in situations in which it is physically hazardous
- Substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have or exacerbated by substance.
- Tolerance: CONDITION
A need for significantly increased amounts of substance to achieve intoxication or desired effects. A significantly diminished effect with continued use of the same amount of substance

Twelve Steps and DBT

- **Step 1:** We admitted we were powerless over alcohol/drugs/codependence—that our lives had become unmanageable.
DBT: Notice that life is not working. Biologically, Psychologically, Socially & Spiritually.
- **Step 2:** Came to believe that a Power greater than ourselves could restore us to sanity.
DBT: Up to this point we lived only in 'what we know'. Time to live in POSSIBILITY.
- **Step 3:** Made a decision to turn our will and our lives over to the care of **God as we understood Him.**
DBT: **Choosing** G-d/Higher Power, the Universe, etc. **as the context**
- **Step 4:** Made a searching and fearless moral inventory of ourselves.
DBT: Being authentic; Reflections on a life of pretense with a private agenda.
- **Step 5:** Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
DBT: Admit the pretense, the cost and take a new stand.
- **Step 6:** Were entirely ready to have God remove all these defects of character.
DBT: Acknowledge **your humanity** and **the humanity of others.** Feel your feelings, 'have them' and to let them go.

Twelve Steps and DBT

- **Step 7:** Humbly asked Him to remove our shortcomings.
DBT: **Choose to be related** to a Higher Power, acknowledging the awesomeness.
- **Step 8:** Made a list of all persons we had harmed, and became willing to make amends to them all.
DBT: **Choose** to be responsible for self.
- **Step 9:** Made direct amends to such people wherever possible, except when to do so would injure them or others.
DBT: Responsible Action
- **Step 10:** Continued to take personal inventory and when we were wrong promptly admitted it.
DBT: Maintain commitment to authenticity and continuously shed pretense.
- **Step 11:** Sought through prayer and meditation to improve our conscious contact with God, as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
DBT: **Continue choosing:** Attach oneself to higher power and practice the connection.
- **Step 12:** Having had a spiritual awakening as the result of these Steps, we tried to carry this message to those with addiction and to practice these principles in all our affairs.
DBT: Continue choosing and practice being whole and complete and **share when the opportunity presents itself without pretense and private agenda.**