

Recovery Overview

As you learn about substance use disorders and how to treat them, you will probably hear the phrase "being in recovery."

What happens to the person with the addiction in recovery?

Recovery occurs over time — it is not a single moment in time. It is a constantly evolving period that requires work to maintain. Recovery is a new beginning, and can be a time of great personal fulfillment and growth for people in recovery and their families. Signs of increasing health and wellness are that the person with the addiction improves physically and emotionally and in his or her relationship with others.

Some addiction experts use the term "recovering" rather than "recovered." Although the person has made a commitment to abstinence and is moving in that direction, he or she continues to be vulnerable to relapse. Recovery requires sustained effort — so some view it as if the work of recovery is never fully done, so they use the word "recovering." Recovery requires that the person with the addiction repair relationships damaged through years of drinking and taking drugs. There may be feelings of shame and self-hatred. The person may have to give up the "addict mentality" that is suspicious, secretive, manipulative, and self-centered.

People in recovery abstain from substance use. By doing so, they regain their physical health and emotional well-being. Once again, they are able to enjoy everyday activities with energy, enthusiasm, optimism, and confidence. Over time, people will return to being more loving spouses, happier kids, effective parents, good neighbors, and dedicated employees.

Recovering or Recovered?

People who are in recovery have overcome the problems associated with their substance use. People do not have to be in the addiction stage of substance use to enter and appreciate recovery, and they don't have to enter a formal treatment program or attend a self-help group — they may have simply had a conversation with a family member and decided it was time to cut back on drinking or drug taking.

Relapsing

This time can also be challenging. People in recovery may feel shame or self-hatred. They might have to give up an "addict mentality" that is suspicious, secretive, manipulative, and self-centered. They may have to repair relationships damaged through years of substance use. Intense, painful memories and feelings stemming from anxiety, depression, school problems, sexual problems, neglect, loss, violence or other past trauma may come flooding back at unexpected times. With emotions already raw, the stresses and disappointments of daily living can feel intolerable. In the past, alcohol and drugs had provided relief from problems and trauma, but the recovering person now has to face these feelings with no "escape hatch."

Even though the person is in recovery, relapse is a common reaction to this stress.

Sometimes relapse occurs when the person is doing well with their recovery. He or she feels healthy, confident, and/or "cured" and believes that he or she is ready to go back to casual, regular or "controlled" use of alcohol or drugs. The person may remember the honeymoon period of their use (even though it may have been long ago) — where his or her use didn't cause problems — and may want to return to that place. But this is often impossible since addiction changes the physical makeup of the brain and therefore the person in recovery is not able to use drugs or alcohol in a controlled fashion.

Getting Help During Recovery

Medical professionals, particularly those who specialize in substance use disorders, are an extremely important asset during a time of relapse. They can help the person learn techniques for containing feelings, focusing on the present, and making use of support from others. Relying on group support from Twelve Step programs, engaging in prayer or meditation, and finding other ways to stay on an even keel can also be extremely helpful.



Recovery for Family Members

The first, and most important, thing to remember is that people with substance use disorders can get well – and so can their families. You've survived together through major crises. You now have the chance to repair family bonds.

Families long for the time when the person with the addiction will get help, stop drinking and taking drugs, and begin recovery. When this finally occurs, families feel great relief. After the person attains sobriety, you may experience a "honeymoon period." All seems well, and you have good feelings toward one another. Conflicts and problems seem to be gone, and you have great expectations for the future. You may even feel like you're walking on air.

Hopefully this feeling will continue. But as the weeks go by, many complicated feelings may come to the surface. This reaction is natural — you've been through a lot and you need to adjust. Every family will need to make adjustments, on top of the huge changes the family has already made. It may not be easy, but there are others who can help you. We're having trouble adjusting to recovery. What do we do now?

First of all, congratulations on establishing a life free of substance use! Even though substance use may not be a constant worry, life in recovery might not always go smoothly either. This phase is full of challenges for the person in recovery and the family.

Both parties may feel like strangers to each other. The person in recovery may seem to have a different personality—more serious, more careful, and more private—and the family may feel uncertain about how to relate. The family may be afraid of sharing responsibility (e.g., handing over the checkbook, loaning the car) and may feel guilty about it. The family may resent that the recovering person attends a lot of meetings and seems more interested in a new group of recovering peers.

But people in recovery are constantly adjusting. They are probably eager to regain a place in the family, so they may not show their anxiety, guilt, shame or uncertainty, but instead may act stone-faced or stoic, putting themselves under great pressure. And both families and people in recovery are terrified of relapse. People in recovery may have frequent urges to drink or use drugs, and feel guilty about it, even though these urges are a normal part of recovery. Remember, relapses are common. You need to work together to anticipate high risk situations and plan ways to prevent them. You might want to attend family counseling or Twelve Step groups together. Recovery is a major adjustment for all family members (children and adolescents, as well as adults), and group or professional support can make this transition and adjustment easier.

Are there typical problems that families face?

Every family is different, of course, but there are some common traits:

- You may feel tense, like you're waiting for the person to relapse.
- You might not trust the person
- You may feel guilty about not trusting the person.

- You might feel awkward and self-conscious with each other, not knowing the "rules for living in recovery."
- A set of unspoken rules may spring up: Don't say or do anything upsetting; don't talk about problems; don't let feelings out in the open because they lead to conflict; recovery is more important than all other family needs.
- You may resent the person for attending lots of support meetings and not being around to help with household chores, child care, the children's homework, or other family business.

Some family members may return to old, negative behaviors in order to achieve balance, like spying on the addict, starting arguments for no reason, or making decisions without including the person in recovery. A family member may continue to withhold responsibility, recognition for accomplishments, and respect for the person in recovery.

Other times, families live in dread that the person with the addiction will relapse and the family will have to deal with the problem all over again. This can create a new set of unspoken rules such as: Don't say or do things to upset the person with the addiction; Don't talk about problems; Don't let feelings out in the open – feelings lead to conflict; The addict's recovery is more important than all other family needs. These rules can lead to family members "walking on egg shells" – which ultimately put the person in recovery in the most powerful position in the family. Other family members may then feel less important and resentful that the person in recovery continues to be in control. Generally, families can overcome these behaviors with help. However, for some, the stress of adjustment may be too much – they may be unable to see the person as someone who is moving in a positive direction. In such cases, the person in recovery may need to live away from the family during the early recovery period to establish independence, solidify an identity as a recovering person, and demonstrate to the family that change has really occurred.

How can our family be healthy again?

Families can choose from many options that will help them recover together.

- **Join a Support Group** at a Social Service or Mental Health Agency. One way to help your family recover is to attend family counseling led by a professional who is an expert in addiction.

Some counselors may run sessions with multiple families. Such groups may help families feel less isolated and alone with their pain. If you're feeling distant from your own family, you can get close to members of other families who have lived through the same thing.

Family members often experience great excitement when they find that everything that has happened to them has happened to other group members. It is as if other people are "telling their story."

Such groups can help families realize that it is okay not to trust the person with the addiction totally in the early months of abstinence. They help families learn to neither trust nor mistrust the person but instead keep an open mind about the ability to improve.

You can find a counselor through a referral from your health care provider or by looking in the yellow pages of the telephone book under social services, mental health, or family counseling.

- **Attend Al-Anon**

You can attend Al-Anon and other Twelve Step meetings which use group support and the power of example for recovery. Al-Anon is specifically for family members of people with alcohol problems. Groups are led by recovering family members and can help family members put their own needs first, at least once in a while. Other group members point out that this is the only way families can pay attention to their own goals and their own recovery from family addiction.

Call the local program headquarters and ask them to send you pamphlets describing the program and a listing of meetings in your community. Volunteers can tell you about the program's philosophy, their own experience as program members, and logistics of attending meetings.

- **Special Needs and Concerns**

If you cannot get a babysitter while you attend, if you need a physically-accessible building because you are physically-challenged, if you would like to find meetings where you would feel comfortable talking about your sexual-orientation, if you need someone to sign because you are hearing-impaired, or if you would prefer meetings that are for women only, ask the person on the telephone.

- **Attend Family Therapy Sessions**

Family therapy focuses on improving relationships and sustaining sobriety, and can help family members work on more direct communication and get old history off their minds.

Therapists suggest ways to improve family relationships, perhaps by spending more time together, or in some cases, encouraging family members to spend more time away from each other if the relationships are too intense.

Some therapists suggest "homework" called "Catch Your Family Member Doing Something Nice" where families keep a record of caring behaviors by one another, so they can see the positive aspects of the relationship.

Do I need to stop drinking or using drugs myself?

Many experts recommend that all family members abstain from all substance use for the first three months of recovery to avoid triggering a relapse. If you do not want to stop, ask your family member in recovery if that decision is upsetting. Some people in recovery find it very hard to be close — physically and emotionally — to someone who uses alcohol or drugs.

Also, if family members do not take the step to abstain from drinking and drugs, they should reevaluate their own drinking and drug use because they too may have a problem.

Should I find out what the person in recovery is doing to stay abstinent, or should I mind my own business?

You are entitled to know what your recovering family member is doing to remain abstinent, primarily because failure to do so can have a profound effect on the safety and well-being of all family members.

Keep in mind that abstinence and treatment are the responsibility of the person with the addiction and he or she deserves the privacy to work on these issues in his/her own way.

However, you need to resist the temptation to put the addict under surveillance. If you repeatedly ask about treatment progress in an intrusive or controlling way, it can be stressful or come across as nagging — and may lead to hostile responses or rebellious behavior.

Inviting the recovering person to talk about experiences, without pressure, can be quite supportive. Examples of helpful questions or comments from family members are:

- I'd be interested in hearing how your meetings are going, if you feel like talking about them.
- Do you like the other participants? Do you feel you have something in common with them?
- Are the coordinators helpful? Do they offer good advice?
- Are you finding that recovery is a struggle for you, or is it going pretty well so far?
- If you feel the treatment is not working that well, would you like help in investigating other ones?
- Are there things we could do in the family to make it easier for you to attend sessions?

If the recovering person refuses to engage in activities that support and protect abstinence, family members should establish consequences. For example, the person might be asked to move out, or the family may cut off all contact and access to family resources until the person re-establishes abstinence.

Can we keep liquor in the house? Should we avoid all parties or gatherings where there might be alcohol or other drugs?

Different families handle this in different ways. It is best to have an open discussion with all family members about what works best for everyone, and ask the recovering family member directly:

- Should I keep beer in the basement for company or get rid of it and just serve soft drinks?
- Would you prefer to stay home or go to the party with us?
- Should I avoid having a glass of wine when you're around?
- What should I tell the relatives?
- If your friends show up with alcohol or drugs, should I tell them to get lost or do you want to handle it yourself?

Don't assume anything. Your recovering family member has a right to participate in decisions, especially those that so directly impact recovery.

Is it normal to feel distrustful?

Yes, family members may not trust the person with the addiction and may feel guilty about this. But trust is something that must be earned over time.

Since relapse is common, only time will tell whether the person with the addiction can be trusted. In general, a person is considered to be at high-risk for relapse during the first year. The risk begins to lesson in the second and third years.

Sometimes families return to past negative behaviors, like spying on the person with the addiction, starting arguments for no reason, or making decisions without including him or her. Even if the person has earned trust over many months, the family may refuse to give him or her more responsibility, recognition for accomplishments, and respect.

For help coping with distrust and other common concerns, you can join a support group at a social service or mental health agency or attend an Al-Anon or other Twelve Step meeting.

These groups can help families realize that it is okay not to trust the person with the addiction totally in the early months of abstinence. They help families learn that neither to trust nor mistrust the person with the addiction but keep an open mind about the ability to improve.

What should we do if relapse occurs?

Most treatment programs and support groups help people in recovery identify situations that are "high-risk" for relapse and plan for ways to avoid getting into such situations. Family members can be helpful in asking the person about those high-risk situations and whether the family can do anything to help avoid them.

Although relapses are not inevitable, they are common. Many people have one or more relapses before achieving long-lasting sobriety or abstinence.

You should not expect that the recovering person will relapse, but if it should happen, do not interpret it as the end of efforts toward abstinence and recovery. The person needs to get back into treatment and the family needs to resume participation in a support group, professional counseling, or both.

Experts have found that a relapse can serve as an important opportunity for learning if the recovering person and other family members identify what triggered the relapse in the first place and determine ways to avoid it in the future.