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Season 01. Episode 12

Podcast Title: Twenty-nine things we've learned so far

Hi this is Bruno J and welcome back to Busting addiction and the myths that travel with it.

I think it's time we do a roll up of what we've learned so far, as I see our podcast as a tutorial on addiction for families and anyone else who is close to an addict or alcoholic.

I've discovered over the course of the last 26 years of my clean and sober living career that the public is addicted to its own opinion about addiction and that stigma and ignorance are alive and well. So that's why you'll see my focus is on busting the myths associated with the disease of addiction and alcoholism,

and I say that unless we smash these perceptual myths about the disorder, we will forever be fighting a losing battle. We will only start to win if we start thinking clearly.

There is so much to learn, there is library full of books on recovery as this is a well-covered topic, and I would say the authors are mostly on the same page when it comes to the model of addiction as a disease.

There are dozens of major points that we have made so far, and I may skip a few here since there's a natural overlap among many of them.

I think I wanted to start our podcast with an encouraging note and I titled the first episode Don't Quit Trying to quit for a reason:

1. Relapses are typical among addicts who try to recover, and in fact, simply mean that the addict is giving it a try and should be encouraged to try again and again. Fewer than 10% of addicts get it the first time.
2. But the addict who isn't ready will play games, and one of his favorites is the deflection game: he attacks you and while you are defending yourself, he makes his getaway. Don't fall for the gotcha game. Call him on his bs.
3. He will claim his disease is not the problem, YOU are the problem, because you are in the way. This is where the deflection games are played...you sometimes don't know what to believe because the disease has taken over without your permission.
4. The idea that an alcoholic or addict has to hit bottom before he will accept help is a TERRIBLE and destructive idea and lets the disease run rampant through the family. It IS possible to raise the bottom, to let the addict feel the heat so that recovery is a less painful option than continuing to use. Tony, how did that work for you?
5. Addiction must be treated as the primary disorder, as the cause of mental and behavioral problems, and not as the result. So many parents of alcoholics or addicts have come to believe that there must be a reason for their loved one using drugs or abusing alcohol, and while that may have been partially true at first, ultimately their addiction becomes the illness in and of itself and must be treated by a professional as such.
6. Addicts/alcoholics, when they aren't ready to quit, are very slick and will do anything to protect their ability to use or drink, especially lie to professionals. They might readily admit to depression, anxiety, obsessive compulsive disorder, panic disorder, anger issues etc etc and might admit

to some drug use or drinking, but they will never ever admit the whole truth and nothing but the truth.

7. If you decide to seek professional help, find a professional who is trained in addictive disorder...someone who is an AODA (Alcohol or Drug Addiction) psychiatrist or counselor. Fact is that the majority – yes the majority of MD's have not had any – any – training in addictive disorder and could in fact heedlessly prescribe an addictive drug to a drug addict, having been easily conned by a slick addict. The untrained doctor is trained to treat the symptoms that he sees, so he may prescribe for bi-polar, without understanding that it's running in parallel with addiction. It isn't until the addict/alcoholic begins to get clean and sober that the professional can establish whether or not the patient's symptoms are the mostly result of addiction (as mine were) or if the patient has a dual diagnosis, such as bi-polar AND alcoholism.
8. You'll no longer be puzzled by the irrational, unpredictable and irresponsible behavior of your addict when you realized that he or she is operating with a damaged brain which is simply incapable of making good decisions. The research clearly shows that drug abuse and drinking both cause brain damage, some of which is not reversible. Which drives the addict to make decisions that are driven by the need to get and stay high, and to hell with the consequences. Rational judgment of the formerly healthy brain has been taken over by the impulsive and infantile need for immediate gratification.
9. The family and loved one of an addict need to change the way they think about addiction if they are to make an informed decision about what they should do for themselves and for their addicted loved one. The fact is that by this time, the disease has affected every member of the family and has already warped their thinking, but they do not know it unless and until some outside source holds up a mirror to them and they can see it for themselves. Uh –oh...
10. Addiction and alcoholism are recognized by leading scientists as chronic, relapsing diseases of the brain, causing compulsive using behavior and loss of control over intake, despite harmful long-term consequences. Addiction and alcoholism are both considered mental illnesses by most

scientists in most countries. Alcohol is considered a depressant as a class of drug.

11. The main take-away for me is the idea that addiction is compulsive so that when my addiction is activated, I have completely lost the power of choice, that I will perform a harmful act over and over, that is irrational and contrary to my own will...there go all the theories of it being a moral failing or the power of will. Just say no is therefore a false promise, except as an admonition to children, so in that sense, Nancy Reagan had her heart in the right place.
12. There are many different ways that addicts decide that they need to throw in the towel...and every one of them is not about the addict seeing the light, but rather about the addict feeling the heat. Addicts will throw in the towel A. Providing they do not also have another mental illness driving their errant behavior and irrational stubbornness, and B. if they conclude that the pain of continued use is greater than the discomfort of accepting help.
13. Saying that treatment or 12 –step programs don't work is like blaming the gym if you're out of shape. We say "You have to make the commitment and do the work for you to have any chance of a long term success." This myth, that AA is a cult, or that treatment doesn't work is one of the most cherished and yet most dangerous prejudices afflicting our society today.
14. Long term success in recovery is more about what the addict does AFTER he leaves treatment than the fact that he went into treatment, regardless of how long treatment lasts. Although the odds of long term success go up the longer addicts stays in treatment, recovery is nonetheless a lifetime commitment. It requires daily maintenance of one's mental and emotional condition, including we recommend highly – becoming part of a 12 step recovery fellowship that will help a recovering person grow, mature and prosper.
15. And now a short commercial break:
16. SafeHouse Rehab Thailand is a great option for treatment, offering a life-changing experience in the perfect environment for recovery. We are dedicated to the modern challenges of addiction, which is especially true of addictive disease as it presents itself today. We stand ready to answer

any, we mean any, question you could possibly have about your loved one's situation because we want you to make an informed decision at this important time in the life of your family.

17. Just contact us at info@safehouserehab.com or visit us at safehouserehab.com and if you like, call the number that matches the country you are calling from. We even provide a \$1,000 US allowance for airfare to bring your loved that much closer to the treatment he or she deserves.
18. And again, very important to remember that addiction is a family disease, affecting not only the addict, but everyone in the family to the point where the family unit itself becomes dysfunctional over time.
19. Cross-addiction, or poly-addiction, is very common today, and it takes a sophisticated approach to A diagnose what type of addiction exists with a thorough clinical assessment and B conduct the right detox, including withdrawal medication, and start the recovery process.
20. Opioids are the main cause of OD deaths, at least in the US, while pure fentanyl has fast become easily available on the street. Opioid addiction may start innocently enough as simple abuse of mom's pain pills but it can quickly turn to the use of street heroin and bring on the risk of fentanyl overdose that comes with it. All the more reason to get the addict into a safe sanctuary like SafeHouse Rehab Thailand.
21. The enabling of addicted loved ones makes it, as defined by Webster *easy or possible*, in this case - to keep the addict's addiction alive and progressing. Many people close to the addict/alcoholic enable them without having any idea that that is what's happening. They are in involuntary denial until they wake up, see the light, or feel the heat.
22. When we enable, we deny the opportunity for the addict to feel the heat...to experience the learning that comes with feeling the consequences. When we excuse, explain and cover for the addict, we keep the addict in a dependent, childish state, shielded from reality. Of course, they never grow up because they have not been given the opportunity to experience either the good or bad ripple effects of their

- behavior. Later, if they make it into recovery, they will discover that recovery is as much about building character as it is about anything else.
23. To the point earlier, addicts are self-centered in the extreme, and will violate every value they once held dear. These violations include behavior that is violent and physically dangerous, so do not be too surprised if they start behaving in truly bizarre ways as time goes on, because this is a progressive disease...it never ever gets better on its own, and will always get worse unless arrested by an intervention, a tragedy or some other wake up call.
 24. What are addicts chasing? They are always chasing that ultimate high, like the one they had the first time, and this urge has them seeking out even more drugs and more potent drugs. They also seek, as I did, even more excitement, adrenaline, drama, extreme sex, status, adoration....they are fueled by *endless craving for more*, unrestrained by reason or compassion.
 25. Addicts are more likely than most to also be money drunks, using money to impress, buy drugs and fuel their lifestyle so long as the money lasts. No sense of accountability. They will snort all the money as soon as they get it, then they'll be all depressed until they can get high again as soon as the money starts flowing again. They are just as likely to treat someone else's money as their very own.
 26. So coming off the point I just made, if we are not alert to the lying ways of active addicts or alcoholics, we become sitting ducks for the addict to steal our money, our time, our oxygen and our peace of mind. Unless we become aware of our dysfunction as enablers and move to stop enabling, by educating ourselves on ways to do just that, we will always be vulnerable to the next attack on our serenity. And our wallet.
 27. One important resource at our disposal is the loving fellowship of Al Anon where we learn A. how much the disease has warped our thinking and B how we need to start putting the focus back on ourselves. We finally finally give up trying to control the addict and we start to take much better care of ourselves. At first this thinking seems counterintuitive, but the wisdom of it becomes evident with practice.
 28. There is more danger ahead: a gambling addiction is also more likely to live among addicts and it is one of the most dangerous, non-violent

offenders because it could mean the loss of the family home overnight. That's why we at SafeHouseRehab Thailand are very much on the watch for other types of addictions in addition to drug addiction and/or alcoholism during our intake assessment process.

29. And so here is where we at SafeHouse Rehab Thailand stand on 12 step recovery programs. AA and the other 30 plus 12-step programs – including Al Anon, cocaine anonymous, narcotics anonymous and all other 12-step programs are altruistic, open, democratic fellowships and the last thing from a cult you could ever imagine. Those who succeed in recovery are invariably involved with a 12-step fellowship over the long term, and as we have stated, that while treatment lasts only a few months, recovery is a lifelong proposition for those who want their lives to become happy, joyous and and free.

OK what can you do with 29 things we've learned? Well, how about summarizing them into SIX really big things?

1. Addiction and alcoholism are diseases and are considered mental illnesses by science. They are not moral failings or manifestations of the lack of willpower.
2. Addiction and alcoholism negatively affect the family to such an extent that they are considered family diseases as well. Family members begin to react to their loved one's addiction in misguided attempts to control the disease.
3. The main characteristic common to all addicts, beyond their incessant using, is their extreme self-centeredness which has them acting selfishly without regard to the negative consequences their actions have on their families.
4. One of the most useless and dangerous myths is the idea that an addict or alcoholic has to hit bottom before he becomes ready to accept help. That idea has families waiting for disaster when they could instead be planning a wake-up call.
5. Families are utterly vulnerable to addicts stealing their money, their peace of mind, their sanity and their self-respect until they are fully educated on how enabling makes it easy for addicts to continue their lying and using ways.

6. Getting your loved one into treatment or at least to see a trained professional should be your goal. In the meantime, families should not hesitate to seek counseling and to join Al Anon so that they can start taking caring of themselves.

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