

Families Against Narcotics (FAN)

**Evidence-Based Practices for Persons
Suffering Opioid Addiction**

The Power of Vulnerability

It is a privilege to be with others during their most vulnerable time.

The Power of Vulnerability

Brene Brown's research tells us

- When asked about connections, we tend to focus on the hurt, shame, and fear of disconnection. Why? Because we fear rejection and abandonment.
- No one wants to talk about shame, hurt, and fear, yet the less we do the more we have it.
- To nurture connections, we need a sense of worthiness, love, and belonging. The people who feel worthy are the ones who believe they are worthy.
- A parent's most important job is to let their children know they are worthy of love and belonging (not that they're perfect).

The Power of Vulnerability

- We often look for ways to numb vulnerability, but we can't numb the bad feelings without also numbing the good ones.
- When we blame others, we are looking for ways to discharge pain and discomfort.

Vulnerability is not a weakness, it is the birthplace of joy, love, and gratitude.

My Takeaways

From Working with Persons Who Suffer Addiction

Safety trumps loyalty.

Active addiction overrides logic.

Addiction is not criminality.

“We don’t control our addiction, but we do control our recovery.”

Being addicted doesn’t mean they don’t care.

Definition of Addiction (ASAM, 2017)

- Addiction is a primary, chronic disease of brain reward. Dysfunction in these circuits lead to biological, psychological, social, and spiritual manifestations. This is reflected in an individual pathologically pursuing (obsession and compulsivity) reward and/or relief by substance use and other behaviors.
- 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.

Recovery IS Possible

Approximately 50 percent of adults who once met diagnostic criteria for a substance use disorder are currently in stable remission.

Reference: U.S. Department of Health and Human Services. (2017). Facing addiction in America: The Surgeon General's report on alcohol, drugs, and health. Retrieved from <https://addiction.surgeongeneral.gov/>.

Effective Treatment Involves

Comprehensive assessment and diagnosis.

Individualized treatment planning.

Development of a strong therapeutic alliance.

For severe substance use disorders, treatment for at least one year is generally recommended.

Medication Assisted Treatment (MAT).

Behavioral therapies, including cognitive behavioral therapy, Contingency Management, Community Reinforcement Approach Plus Vouchers, Motivational Interviewing & Motivational Enhancement Therapy, Matrix Model, and Twelve Step Facilitation.

Integrated Care Model

THE GOAL

To develop a system of care that is recovery-oriented, integrated, trauma-informed, and culturally competent in order to most effectively meet the needs of individuals and families with multiple co-occurring conditions of all types (mental health, substance abuse, medical, cognitive, housing, legal, parenting, etc.).

Reference: <http://kenminkoff.com/ccisc.html>

Integrated Care Model (continued)

THE PROCESS

Every program and person delivering care engages in quality improvement to become recovery- and resiliency-oriented as well as co-occurring capable.

Further, every aspect of service delivery is organized on the assumption that the next person or family entering service will have multiple co-occurring conditions, will need to be welcomed for care, inspired with hope, and engaged to address each and every one of those conditions.

Integrated Care: Practical Applications

Addiction treatment services.

Mental illness services.

Medical services.

Medication Assisted Treatment (MAT).

Programming to address criminogenic risk and needs.

Ancillary services to address responsivity factors.

Trauma services.

Support System & Services: 12-step; Recovery Coaching;
Case Management.

Takeaways & Evidence-Based Programs and Practices

Safety trumps loyalty.

- Which means integrated care (FAN is part of this!) as well as development of a strong accountability support system (to wraparound the person).

Active addiction overrides logic.

- 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.

Takeaways & Evidence-Based Programs and Practices

Addiction is not criminality.

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

“We don’t control our addiction, but we do control our recovery.”

- Recovery IS possible.

Being addicted doesn’t mean they don’t care.

- Dysfunction in brain circuits lead to characteristic biological, psychological, social, and spiritual manifestations.

What Those In Recovery Want Us To Know

- Recovery is selfish.
- Relapse can be a part of recovery for some; it's a process.
- Relapse doesn't necessarily occur because of a lack of willingness.
- Healthy vs. Unhealthy Support: stand your ground with love, but don't enable us.

What Those In Recovery Want Us To Know

- Talking about drugs and alcohol won't cause us do it. No one person can make us use or make us be sober.
- Expressing thoughts and emotions solves problems and brings us closer.
- Addiction becomes a way of life; **everything** has to change.

What Those In Recovery Want Us To Know

- One person recently told me: “I hated myself when I was using, every minute of every day. No matter what I said to those who loved me, I wanted to be clean and couldn’t and didn’t know what it took. There was nothing anyone could do to make me quit. It took what it took and what it takes is different for everyone.”

How can clients work on setting boundaries?

There's purpose to our choices: pros & cons.

Habit Loop: what routines can be changed in a response to cues and that results in rewards?

Recognizing that being vulnerable is a strength as well as the importance of accessing a strong accountability support system.

How can parents help their children set boundaries?

We don't need to take on the challenge of convincing someone they have a problem and need help. Our job is to explain we are worried, identify the behaviors causing our worry, and that there is effective treatment available.

As much as possible, take the stigma out of it.

A change of heart cannot be imposed, it must be chosen.

Steps to prevent relapse?

Enhance motivation and insight.

Identify cues, triggers, and high risk situations.

Develop coping skills, self-efficacy, and resources (including family and friends).

Challenge positive outcome expectancies.

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