

# Coping With Early Recovery



---

Because chemical dependency is a family disease all members of the family are affected, not just the addicted person, each person will react in his or her own way in response to the addictive environment. As family members you have spent much of your time seeking solutions for the chemically addicted person.

Through treatment & recovery the family learns they cannot “fix” the addict. Although you are not able to change the addict there is one person you can change – yourself. By empowering yourself through education, self-care and family 12-step support you are better able to support your addicted loved one.

Discharge from treatment is a scary time for the newly recovering addict & perhaps even more so, a scary time for the family & friends of the addict.

- How different is my loved one going to be?
- What can I do to help them stay sober?
- What happens if my loved one relapses?
- What can I do to help them stay sober?
- What can we expect?

Obtaining a clear picture of what early recovery may look like will help both the newly recovering person & their supports.

## Focus of Treatment

- Promote abstinence
  - Attendance at 12 step meetings (AA or NA)
  - Participation in outpatient treatment
- Improve physical & mental health
  - Daily exercise
  - Balanced nutrition
  - Getting enough sleep
  - Daily processing of emotions
- Teaching skills for a drug free lifestyle – treatment will introduce the patient to the necessary tools, but it is up to the patient to use them.
  - Self-care – meditation, journaling, exercise, etc..
  - Healthy communication skills
  - Healthy coping behaviors – To maintain recovery/sobriety the patient has to work through multi-layers of unhealthy thoughts & behaviors. They must acquire new skills for long-term management of a chronic disease. Treatment is just the beginning.

## Realistic Expectations of Treatment

One of the primary tasks of recovery is for the patient to take responsibility for their actions. People active in their addiction blame others for their problems. People in recovery hold themselves responsible and accountable. Treatment is a modality to learn the tools for living a life of recovery. In treatment the addicted individual will learn about the disease of

addiction – how the disease impacts them, how it is something that will never go away, but can remain in remission if the recovery tools are used diligently.

- It is important to remember that addiction isn't simply using drugs – it's a chronic disorder that requires long term abstinence & sustained treatment. Treatment and recovery is a process not an event. Completing treatment does not guarantee sobriety.
- The emotional roller coaster continues in early recovery.
  - Emotional & social functioning continues to be impaired. The person needs to “catch up” in these areas.
  - Cravings periodically continue, but they will weaken over time as the patient acquires new coping skills.
  - Early recovery creates anxiety as the patient adjusts to life without substances.
  - Physical withdrawal may continue and can include insomnia, irritability and physical pain.
  - The patient can sometimes get stuck between action & inaction.

The addicted brain is incapable of coping with uncomfortable feelings & has been conditioned over time to deal with stress by using chemicals. It is difficult to erase the automatic process of association (the physical triggers), but over time triggers do subside. However, in early recovery the addicted brain hasn't had enough time to heal. This process can take 6 months to 2 years. Point out changes in behavior you are concerned about (addict behaviors). Don't ignore or avoid them.

# Tips for Dealing With Early Recovery

## What is recovery?

Recovery is the daily use of tools – designed to support each woman in living a life which is free of the attitudes, beliefs and actions of addiction. The most effective way for your loved one to manage their illness is through engaging in a recovery program. This includes completion and follow through of all treatment recommendations and attending 12 Step meetings such as AA/NA. It is also necessary for your loved one to obtain a sponsor in the meetings to help them work the 12 steps. Working the steps are necessary because they are the foundation of the lifestyle change that will need to happen for your loved one to truly be comfortable in maintaining a chemical-free lifestyle.

## What is a sponsor?

A sponsor is someone who has maintained sobriety for a period of time (at least a year), has worked the 12-steps themselves & is willing to guide a newcomer in working the steps. It is recommended that each patient obtain a temporary sponsor while they are in treatment. The patient is encouraged to contact their sponsor as much as possible while they are in treatment so they can get comfortable “picking up the phone”. When a patient is home and has found a home group (a 12-step meeting they will return to on a regular basis) they are encouraged to obtain a permanent sponsor.

## Your Family’s Role

As the patient begins their journey of recovery where does this leave your role in the family? As the primary support system for your loved one, it is vitally important that you seek support for your own journey into recovery.

Through attendance in Al-Anon Family Groups you will learn tools that will enable you to move forward and gain a sense of serenity back into your life.

- Get educated about addiction and recovery.
- Get support for yourself.
- Accept the patient's #1 priority is maintaining sobriety & allow recovery to be the addict's #1 priority.
- Have no alcohol or mood altering substances in the home. The patient's home should be their "safe place".
- Don't hover or try to manage (remember there is a fine line between supporting & controlling)
- Remember – family/friends have no control over recovery just as you didn't have control over the addiction.
- Let crises happen. Don't enable, shame or reject.

## Challenges in Early Recovery

- Identifying H.A.L.T (hungry, angry, lonely, tired) – sometimes we are not aware of our physical and mental state. Making sure we are not hungry, angry, lonely or tired can alleviate unnecessary stress.
- Addressing isolation and boredom – structure and balance to the daily schedule is important.
- Distress – lack of sleep, poor nutrition, unemployment, starting or ending a relationship.
- Addressing co-occurring mental health issues such as depression, anxiety, eating disorders, PTSD.
- Dealing with unresolved legal issues.
- Forming new peer groups.

- Identifying fragile situations – this is especially true a few months into sobriety. When confidence is high the person may let their guard down. They may;
  - Quit counseling
  - Attend less 12 step meetings
  - Put themselves in risky situations.
  - Old addict behaviors begin to emerge: evasiveness, defensiveness, isolation, lying, denial, manipulation.

**These situations must be dealt with and talked about.**

## **Learning to Ask for Help**

If you have a lot of difficulty asking for help, it may mean you tend to see yourself as self-sufficient and able to handle things. This can be a strength, but in recovery, where it is important to be able to admit powerlessness, it can also be a weakness. Use this exercise to help you assess your ability to ask for help.

Describe how comfortable (or uncomfortable) you are with asking for help.

- When was the last time you asked for help?
- How did you feel about it?
- Do you often help others? How?



**Family-Centered Services | [fcsinterventions.com](https://fcsinterventions.com)**

Adam Finley; MSW, MA, LICSWA, CIP · (509) 991-5822 · [adam@fcsinterventions.com](mailto:adam@fcsinterventions.com)

Jenny Finley; MA, LMHC, SUDP · (425) 445-2513 · [jenny@fcsinterventions.com](mailto:jenny@fcsinterventions.com)

Tami Minchow; MSW, LICSWA · (509) 255-3572 · [tami@fcsinterventions.com](mailto:tami@fcsinterventions.com)