

# Why Continuing Care Is Important

**By Peggy L. Ferguson, Ph.D.**

Addiction is a chronic, relapsing brain disease and is best treated as such. Other chronic, relapse-prone diseases, like diabetes, hypertension, and asthma, are managed by professionals who address the medical/physical, emotional/psychological aspects over the patient's lifetime. The patient's optimal health is the goal.

Seeking help for addiction and abstinence is potentially the beginning of recovery. The desire for sobriety is necessary but inadequate by itself. Maintaining sobriety over time requires much more work. "Recovery" and "treatment" are not synonymous. Inpatient treatment, detox, or outpatient treatment, in and of itself, is not "recovery ." Abstinence from the use of alcohol and other mood-altering drugs is not recovery. Abstinence is the beginning of the recovery process. Addiction is a chronic illness that demands that patients consciously and carefully maintain their recovery by changing lifestyles and self-care routines that will thwart the threat of relapse.

Recovery is generally a return to full health and the restoration (or acquisition) of effective functioning in one's life, including relationships, work, and community. Addiction treatment is not a pill, a therapy, a place, or even a slice of time. "Treatment" is a system of services within a continuum of care that should match the patient's needs according to their stage in recovery at a particular time.

Like any other chronic disease, addiction is characterized by occasional relapses, and the patient's recovery partly depends on lifestyle changes and the quality of everyday choices. For many, a one-time acute care treatment episode is insufficient to maintain sobriety throughout a lifetime.

Those who follow through with ongoing care have assistance with maintaining a recovery perspective and focus. They also have support, encouragement, continuing education, and treatment for underlying issues that may be lying in wait to trip up recovery. Continuing care is advanced education on the disease, supervision on withstanding the stumbling blocks to continuing recovery, and specialized care for restoring emotional, psychological, physical, and spiritual health.

Unfortunately, "treatment" often involves multiple acute care therapeutic episodes coinciding with the patient's various attempts at abstinence. Instead of viewing addiction as chronicity and using a continuum of care focus, many people treat it like an acute crisis, treatable by emergency room visits. When addiction and recovery are treated on a continuum of care, the patient continues to use services based on an appropriate level and type of care. The cycle of relapse can then be interrupted, and the patient can achieve long-term recovery.

Acute, short-term inpatient treatment has an essential place in the continuum of care. The beginning of recovery should focus on interrupting the momentum of the addiction. The patient will then practice skills to maintain abstinence from the chemical one day at a time. For many patients, detox or acute inpatient treatment is necessary to have a safe detox and to stabilize the patient. Early treatment efforts are typically focused on interrupting the momentum of addiction by assisting with managing cravings and dealing with withdrawal symptoms. Detox services monitor and help the patient through uncomfortable withdrawal symptoms. These early days of recovery treatment also assist with emotional stabilization. Withdrawal can also include emotional and psychological symptoms such as increased anxiety, panic, depression, paranoia, and labile emotions.

Once the initial detox phase is complete, the patient must learn new skills necessary to maintain abstinence. Potential stumbling blocks to continuing recovery are uncovered, and a treatment plan is developed to

target the problems identified. Patients often work on resolving some predominant unresolved issues, such as historical trauma, and underlying problems, such as ongoing anxiety and poor self-esteem. The treatment plan lays the groundwork for gaining the skills to maintain long-term sobriety. When a patient "graduates" from primary care treatment, they are not "cured," "fixed," or "recovered."

Primary care treatment could be inpatient, intensive outpatient, or even weekly outpatient, depending on the need level of the patient. When a patient has "graduated" from primary care treatment, they have identified the problem and begun some initial action in learning how to solve it. Many people start drinking and using drugs early in life before developing the living skills needed to maintain sobriety. Thirty days of treatment cannot fix that problem.

Continuing care is the next step. People completing inpatient care need ongoing care, often in the form of a formal "aftercare program." It is generally acknowledged and accepted that continued care is essential in addiction treatment. Continuing care is included in the "best practices" criteria for inpatient treatment. Such a program assists by instructing additional skills building, monitoring for relapse potential, and reinforcing the behavioral changes conducive to building a healthy life. Continuing care assists the patient in making those behavioral, emotional, and lifestyle changes that encourage lifelong recovery. Continued shaping and reinforcement of those changes are necessary for sustained benefit.

Those who do relapse and stay in continuing care counseling are more likely to have a shorter, less severe relapse and are more likely to re-engage in twelve-step participation and active relapse prevention.

Addiction is a chronic, relapsing illness that should be treated like other chronic, relapse-prone diseases. Recovery demands that patients consciously and carefully maintain their abstinence by changing lifestyles and self-care routines that will thwart the threat of relapse. Continuing care assists the patient in making behavioral, emotional, and lifestyle

changes conducive to lifelong recovery and a return to health.

## Understanding Cross Addiction To Prevent Relapse By Peggy L. Ferguson, Ph.D.



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Embarking on inpatient treatment is just the beginning of your recovery journey. Strengthening this foundation involves active participation in a 12-step program, ongoing care, building a support system, acquiring new life skills, and continually expanding your knowledge about addiction and its specific challenges.

To fortify your recovery, it's crucial to grasp the risks of potential cross-addictions that could undermine your progress. Understanding these dangers empowers your ongoing efforts towards sustained recovery. Equip yourself with the essential information needed to maintain sobriety and continue progressing on your recovery path.

Let "Understanding Cross Addiction to Prevent Relapse" be your guide in making informed decisions. This resource is designed to support you in navigating the complexities of recovery and ensuring a resilient and lasting journey towards a life free from the grip of addiction.