MODULE 5: ADDICTION -- IT'S ALL IN YOUR HEAD!

Sarah is a 46-year-old mom of two children and has been married for 13 years. She graduated from high school and went on to receive an associate degree from a local community college. She does bookkeeping and accounting for a small manufacturing company and has been with that company for about 6 years. Sarah also has a substance use disorder.

Although she rarely shows remorse on the outside, Sarah feels guilty and embarrassed, knowing she is hurting those she loves. Sarah admits that she doesn't even enjoy the "high" anymore.

Her problems had been affecting her family for quite some time, but it wasn't until recently that her employer became aware that she was struggling with a cocaine problem.

So why doesn't she just quit?
It just doesn't make sense that Sarah — a college-educated woman with a secure job, a family that loves her, and a desire to quit using cocaine — would continue to use. It's just not rational, especially since she is experiencing negative consequences at work, at home, and within herself that are related to her use. Does she continue to use because she's weak, immoral, lazy or a bad person?

While it's tempting to judge her as all these things, her irrational behaviors are symptoms of a physical problem. Sarah can't "just quit" because she is suffering from the disease of addiction and, because of the nature of the disease, has likely lost the ability to regulate her own behaviors.

At first blush there's nothing rational about addiction, until you look beyond the addict's behavior to what is happening to her body. The changes that have occurred in Sarah's brain as a result of her use help explain why she's lost the ability to make positive changes.

According to the National Institute of Drug Abuse, "Addiction is a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use despite harmful consequences."

Recognizing addiction as a brain disease is a fairly new development in the field of addiction. Advancements in technology now allow researchers to photograph changes to the brain that occur when a person is addicted — changes that help explain the irrational behaviors and thinking patterns we so often see in addicts like Sarah.

The development of addiction is progressive. Addicted individuals experience physical changes in the brain; changes that are responsible for such things as thoughts, behavior and judgment. At some point in the process, taking the drug becomes a matter of survival and the addict can no longer feel pleasure naturally. The addict no longer uses the drug in order to feel "high," but just to feel "normal."

It can be challenging for friends, family and co-workers — especially those who have been impacted by Sarah's behavior — to look at her condition objectively; to see it as a physical disease that influences her behavior and choices. A helpful framework might be to compare the influences and behaviors of addiction to other diseases — heart disease and diabetes:

- Heart disease, diabetes and addiction all are influenced by personal behavioral choices.
- All three diseases are influenced by heredity.
- Behavior changes are necessary for the successful treatment of addiction, heart disease and diabetes.
- All are FATAL if untreated.
- There are known and accepted strategies to help prevent all three diseases.

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But where does personal responsibility come into play?
Recognizing addiction as a brain disease does not "excuse" the addict from responsibility. People do have the power to minimize, and even eliminate, the probability that addiction will develop. If a person, like Sarah, never uses cocaine, misuses a prescription medication or drinks at high-risk levels, the chances of becoming an addict are slim. And if the disease does develop, the addict must take responsibility for his or her recovery and be committed to making healthy choices.

However, believing an addict should be able to "pick themselves up by the bootstraps" and quit using is unrealistic and dangerous. Accepting addiction as the physical brain disease that it is eliminates the stigma that can keep addicts, and those who live and work around an addict, stuck in a vicious state of anger, denial, blame and deteriorating health.

Together Arkansas, including the course and these resource materials, has been developed to raise awareness with businesses about how to respond to the risks associated with the misuse of opioids and other drugs. The content is meant for educational purposes only and not for the purpose of providing legal advice or replacing the work needed to develop a responsible drug-free workplace policy and program. As such, it should not be used as a substitute for consultation with a legal professional or other competent advisor. If you have questions about this course or the information presented here, please reach out Contact@TogetherArkansas.com.

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