

Our best chance for recovery lies in total abstinence from all mind-altering drugs.

It is quite common for men and women who are beginning recovery to minimize the extent and severity of their problem. When I was working as a clinical supervisor in an inpatient chemical dependency treatment program, patients would often try to convince me that they really didn't have a problem with the other drugs they were using; it was just the alcohol. Hearing these beliefs over and over again raised the following question: Why would someone trying to get help for a drinking problem, for example, ignore or minimize the fact that smoking marijuana is also part of the problem?

The answer was simple: The person is trying to deceive himself into thinking that he is normal and can control his behavior. He desperately wants to believe that he can still get high, even though he might have to stop drinking. He does not want to see the truth: he is powerless over all mind-altering drugs. This kind of self-deception is prevalent in many shapes and forms. Alcoholics may fool themselves into thinking that they can no longer drink whiskey but can have a beer every now and again. There is a growing problem in AA of members saying they are "sober" while still occasionally smoking marijuana.

The mind is remarkable in how it creates self-deception. We can keep ourselves from seeing the truth about ourselves and our behavior in many different ways. The technical term for this type of mental defense mechanism is *compartmentalization*. When we compartmentalize a problem, we keep it isolated, or separated, from other relevant issues. In this instance, we compartmentalize our alcohol or drug abuse. We keep an ace up our sleeve in case the going gets tough. Drinking or using is still an option. When we keep this kind of a secret, we are sabotaging our recovery. What we need to do is to share this secret—tell the truth. When we do, we give ourselves a chance to connect the dots.

Here's an example from my own personal recovery. I returned to the United States from Vietnam in 1971 with a serious drug problem, as did thousands of other veterans. At that time, I mistakenly believed that drugs other than alcohol were my problem. I didn't even think of alcohol as a drug, which it is. I was about three weeks into my recovery when I hitchhiked from the west side of Oahu to Honolulu to meet with Tom, my sponsor, and then go to an AA meeting. A local man picked me up in his Toyota Corolla. He had a six-pack of beer in his front seat. He offered me one of the beers, and without much thought, I thanked him and drank it. When Tom opened his door and greeted me, he looked disturbed because he could smell the alcohol on my breath. He asked me whether I had been drinking. I immediately said I had had a beer and quite naively added that he didn't have to worry because I didn't have a problem with alcohol—just drugs. He looked at me with that look that a sponsor has when he knows you are full of it. He asked me to sit down, said we had a

lot to discuss. About three hours later, I realized that alcohol was a drug and that I was deceiving myself. I had an epiphany after Tom invited me to share my history of using alcohol and other drugs. As I told him about my life, he underscored the obvious: before I started using other drugs, I was having serious problems with alcohol. I experienced blackouts, compromised personal values, lived to drink, and drank to live. He helped me connect the dots, and once they were connected, I no longer compartmentalized my use of alcohol.

The truth is that our best chance for recovery lies in total abstinence. Here are five reasons why:

- 1. Use of any drugs increases the likelihood of using our drug of choice.
- 2. Cross-addiction is likely to occur.
- 3. We do not learn from our experiences while we are using.
- 4. Complete recovery requires total abstinence.
- 5. Drugs numb or soothe our feelings and therefore interfere with recovery.

Let's explore these in more detail.

Use of Any Drugs Increases the Likelihood of Using Our Drug of Choice

Most chemical dependency counselors warn their clients that using other drugs lowers their resistance to using their drug of choice. For example, studies over the years have repeatedly shown that relapses among people treated for cocaine problems occur most frequently when they are under the influence of alcohol. Many recovering alcoholics relapse after receiving medications such as Vicodin, Valium, Xanax, or Klonopin. Recovering alcoholics who smoke marijuana typically return to drinking. Heroin addicts are more likely to go out and try to score after drinking alcohol.

Another important thing to remember is *a drug is a drug*. Therefore, the use of any mind-altering drug for the purpose of getting high is a relapse.

Cross-Addiction Is Likely to Occur

Addicts are vulnerable to switching addictions to another drug. This is called *cross-addiction*. I recently treated a man who proudly declared that he had conquered a heroin problem several years ago, yet he minimized the fact that he was having problems in several areas of his life because of his abuse of methamphetamine. When I confronted him about his cross-addiction, he declared, "I can stop if I really put my mind to it!"

The truth was that he had been trying to stop for several months and couldn't. He wasn't using every day, but when he did use, he could not predict whether he would be able to control how much he was going to use. Many times he promised himself that he was not going to drink or use meth but was unable to honor his intentions. In fact, he broke his promises to himself at least twelve times during six months. Everyone but him could see that *he could not control his use of meth.* He was blind to the reality that he was an addict, which meant he didn't have the ability to regulate his use of drugs—any drugs. Addiction changes the brain, and he had already lost the ability to control his use of drugs.

What happened to this young man is very common in addiction. Vernon Johnson, D.D., founder of the Johnson Institute, described this thought process as a *sincere delusion*. We truly believe the promises we make. We're so sincere when we make a commitment that we would pass a lie detector test, but the truth is that we are out of touch with reality. The reality that is so difficult for us to accept is that we do not have the ability to control our use of alcohol or other drugs. When we unconditionally accept this reality, we can build a solid foundation for recovery.

We Do Not Learn from Our Experiences While We Are Using

The client whom I discussed earlier was unable to learn from his experience. This is one of the most common personality traits among addicts. While behavioral scientists have been unable to identify a definitive *addictive personality*, one thing is certain: *alcoholics and addicts do not learn from their experience*. There are three reasons for this: *denial, drug-induced brain dysfunction*, and *state-dependent learning*. Denial is psychological, while the other two are neuropsychological. Let's discuss the psychological process of denial first.

Psychological Processes That Interfere with Learning

Addicts and alcoholics have difficulty learning from experience because they are invested in maintaining the illusion that everything is all right. We truly believe that we control our behavior despite an overwhelming amount of evidence that suggests otherwise. This is, by definition, delusional thinking. A delusion is a belief that is not supported by reality. The belief that we are in control, when in reality we are not, is delusional. This false perception is fostered by denial.

Denial is a defense mechanism. It protects us from the truth, especially when the truth is painful. We do not want to see reality because of what it ultimately means. For us, the truth is that we are not able to drink or use other drugs—we are not who we thought we were. Our self-esteem cannot face this harsh reality, so we alter our reality. We pretend to be something we are not. We cannot accept reality's limitations. Denial needs to be penetrated or shattered before we can truly admit that we are totally powerless over alcohol and other drugs.

Neuropsychological Processes That Interfere with Learning

Another reason alcoholics and addicts have difficulty learning from experience involves the neuropsychology of addiction and how alcohol and other drug use affect learning.

During the past forty years, an extensive body of literature has demonstrated both the short- and long-term effects of heavy drinking on the brain. The most severe result of chronic alcoholism is a disorder called Korsakoff's syndrome, which includes severe memory loss. But this is an extreme. Most alcoholics suffer from mild to moderate, reversible, *drug-induced brain dysfunction*, which affects abstract thinking and the ability to problem solve. When abstract thinking is impaired, learning is impaired. We do not draw the proper conclusions from our experiences. Instead, we make and defend incorrect deductions. When we are faced with how our behavior is altered by our abuse of drugs, we evaluate the information with a malfunctioning organ: our brain. It is like asking a broken computer to tell us that it is broken.

Another important process to consider is *state-dependent learning.* This concept helps explain how drug use affects the ability to mature emotionally. Years ago, researchers demonstrated statedependent learning with the following experiment. Two groups of rats were taught to run a complex maze. Prior to the training, one group of rats was injected with alcohol. The other group of rats was sober. Both groups learned to run the maze in about the same length of time. Their learning curves were quite similar. The differences between the groups became apparent the following day when they were again placed in the maze to see how much learning they retained.

The group of rats who were sober when they learned to run the maze did fine. They had no difficulty finding the hunk of cheese at the end. The rats who were injected with alcohol before they learned how to run the maze acted as though they had never seen the maze before. What they learned did not transfer to their sober condition.

State-dependent learning explains why many alcoholics and addicts are emotionally arrested at early stages of their development. We have not learned from our experiences. Learning from our life experiences is necessary for the development of emotional maturity.

Denial, drug-induced brain dysfunction, and state-dependent learning explain why it is so difficult for us to be self-aware, see the true extent of our problems, learn from past experiences, and mature emotionally.

Let's now return to a discussion of the fourth factor in the argument for total abstinence in recovery.

Complete Recovery Requires Total Abstinence

The fourth reason for total abstinence is that if we continue to drink or use other drugs, we cannot fully be present and accessible during the process of recovery. Recovery requires total honesty, openmindedness, and willingness. Using alcohol and other drugs interferes with our ability to be honest with ourselves, to be open-minded regarding our life and how we have managed it, to experiment with new ways of dealing with life, and to discover a spiritual solution to our problems.

In a recent conference on recovery, Garrett O'Connor, M.D., a well-known psychiatric expert on alcoholism and addiction, noted that "Addiction is a medical disease with a spiritual cure." Many mental health professionals have discovered that a spiritual cure is the most effective solution for dealing with an alcohol or drug problem. We cannot discover our spirituality if we are drinking or using. Many people believe that we discover spirituality through pain. Hurting and suffering can inspire us to muster the courage to look down—way down—into the soul and see what we fear and loathe. We must die before we can be reborn. We must descend before we can ascend.

Our mind is the seat of our perceptions, experiences, memories, decision making, judgment, emotions, and consciousness. If we alter it with drugs, we cannot see the truth about ourselves or feel emotional pain, both of which are necessary to facilitate recovery and live life fully.

So keep the following in mind: *when we are feeling bad in the early stages of recovery, we are doing well.* Early work in recovery requires us to feel worse in order to grow spiritually. We need to go down into our soul and into the darkness before we can ascend on the spiritual path.

Drugs Numb or Soothe Our Feelings and Therefore Interfere with Recovery

The fifth and final reason for total abstinence is related to how alcohol and other drugs soothe or numb our feelings. We have all, at one time or another, wanted to numb our feelings for various reasons.

Our society is pain phobic. We avoid dealing with pain in any way we can. Just watch the television ads during a normal evening of programming to see how many commercials offer us a quick way of escaping discomfort or pain. The message we get throughout our life is that painful feelings are undesirable, unnecessary, and unwelcome. It should be no surprise that most of us will go to great lengths to avoid feeling pain of any kind. We have pursued numbness fearlessly and tenaciously, which has led us right through the gates of addiction and insanity.

Recovery is the antithesis of addiction. Instead of running away from our problems, we face them. Instead of avoiding our feelings, we embrace them. Instead of drowning out the voice of pain, we listen to it. Instead of avoiding ourselves, we confront ourselves. Recovery is the process of recovering our true self and is contingent on becoming honest with ourselves. I wrote a poem that was inspired by a man who was struggling with his pain in my monthly men's group. It's called "A Man Stirs":

A man stirs in his bed. Are the sheets too silky or soft? Or are they too cold? His wife says, "It's all in his head." I think it is something twitching in his soul.

How will he know? It is the pain that opens the door.

- It is the pain that will make him listen to the voice within—he doesn't want to hear.
- It is the pain that will make him see the reality he has dared not consider.
- It is the pain that will make him experience the feelings—he had been reluctant to face.
- It is the pain that will help him find the words he has dared not voice.

It is the pain that will open the door to his life, but it is only he who can walk through it.

In recovery, we learn that pain can be an ally rather than an enemy. Pain offers important information, if we hold still long enough to listen to it. Our pain can help us learn about our needs what our working points are—and give us insight into our wounds and personal shortcomings. All grist for the recovery mill. Holding still and feeling our pain is an important recovery skill, and if experienced in a therapeutic way, it can help us tap inner resources to soothe ourselves and lick our wounds. Total abstinence is necessary to begin true recovery. We sabotage our recovery if we continue to selectively use any mind-altering drugs.*

^{*} The only exception to this rule is psychiatric medication prescribed by a psychiatrist, addictionologist, or physician.