

HEALTHY EARLY RECOVERY PROGRAM

One of the most difficult points in the recovering alcoholic/addict's life is when they are newly sober and trying to stay that way. It often seems like the cards are stacked against them, and in some ways they are correct.

In early recovery, the alcoholic/addict will first experience acute withdrawal symptoms and then post acute withdrawal symptoms. The length of each of the symptom levels is dependent on, amongst other things, the length of use, type of chemical used, and the individual physiology of the alcoholic/addict.

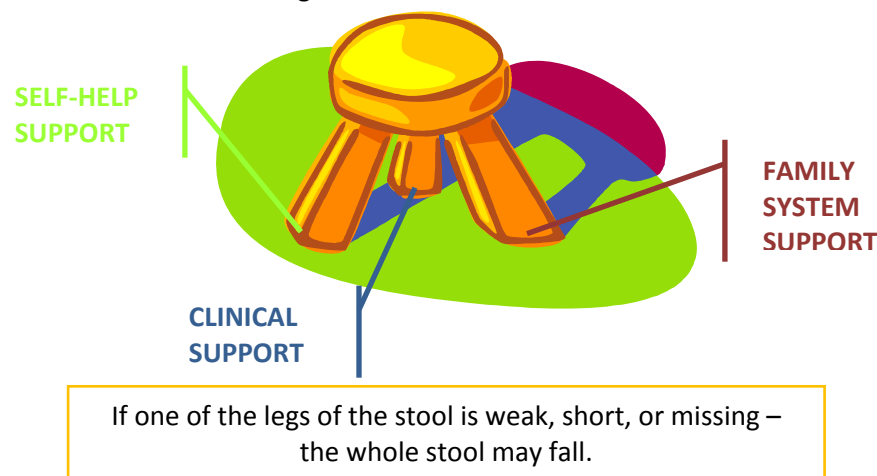
Acute withdrawal happens during initial detoxification of the body: when the addictive chemical substances are purged and the body attempts to find homeostasis (balance). These symptoms can be severe and dangerous, that is why detoxification should only be performed in the care of a physician that understands the process.

Post Acute Withdrawal Syndrome (PAWS) begins when acute withdrawal ends. Symptoms may come and go, and elevate or decline, over a period of many years, but are most pronounced in the first year of sobriety. Symptoms include:

- Difficulty or inability to function socially
- Difficulty or inability to experience pleasure
- Depression
- Obsessive-compulsive behavior
- Feelings of guilt and shame
- Disturbances in automatic body functions
- Difficulty or inability to concentrate
- Lack of initiative
- Pessimistic thought
- Difficulty or inability to remember
- Emotional distortions
- Sleep disturbances
- Physical coordination problems
- Stress sensitivity
- Increased sensitivity to pain

Early Recovery Program

To effectively address these symptoms, the alcoholic/addict in early recovery should design a recovery program to provide the best support for their long-term fulfilling lifestyle of quality sobriety. That means designing a recovery program that includes three primary areas of support: self-help support, clinical support, and family system support. It may be helpful to view the early recovery program as a stool with three legs:



Self-Help Support

Many support networks exist for those with the disease of addiction. Regardless of the program, an individual in early recovery should be attending and participating in self-help groups regularly. Many will want to attend a group meeting daily for a few months, and then reduce their meeting schedule to three or four times a week for the first year. The most common types of self-help groups are:

- Alcoholics Anonymous (www.aa.org)
- Narcotics Anonymous (www.na.org)
- Al-Anon (www.al-anon.alateen.org)
- Other anonymous and self-help organizations
(www.serenecenter.com/self_help_docs/Serene%20Center%20Recovery%20Resources%20Guide.pdf)
- Religious institutions
- Local community centers
- Local treatment facilities
- Serene Center Long Beach workshops (www.serenecenter.com/events-news.html)

Clinical Support

Clinical support adds a very different dimension to the early recovery effort. As is apparent in the post acute withdrawal syndrome (PAWS) description, there are many symptoms of the syndrome that cannot be addressed without the help of a trained clinician. It can be dangerous to the alcoholic/addict to attempt to deal with psychological issues without the guidance of a clinician, particularly during the PAWS timeframe. It is likely that the clinical support component of an early recovery program will include weekly counseling sessions for a few months, and then begin to step down in frequency over the following year or so. The most common places to find clinical support are:

- a. Counseling for chemical dependency/codependency
 - i. Psychologist with addiction accreditation
 - ii. Local hospital chemical dependency programs
 - iii. Serene Center Long Beach counseling
(www.serenecenter.com/counseling.html)
- b. Psychiatrist with addiction accreditation
- c. Community mental health services

Family Support

The family system plays an extremely important role in the early recovery program. The family can be defined as any person that has a close connection by genealogy, friendship, or romanticism with the alcoholic/addict. It is common for the family system to be unhealthy when there is an alcoholic/addict involved, and that is why it is so important to include the family system in the early recovery effort. The family needs to understand their roles and responsibilities as well as the alcoholic/addict's roles and responsibilities. Sometimes certain family members are not cooperative with the recovery effort, and in these cases, the alcoholic/addict must make difficult choices as to changing the relationship with those family members. Because the family system has such a significant impact on relapse, it is critical to include the family component in the early recovery program. The most common places to find family system support are:

- a. Al-Anon (www.al-anon.alateen.org)
- b. CoDA (www.codependents.org)
- c. Counseling for codependency
 - iv. Psychologist with addiction accreditation
 - v. Local hospital chemical dependency programs
 - vi. Serene Center Long Beach counseling
(www.serenecenter.com/counseling.html)
- d. Psychiatrist with addiction accreditation
- e. Community mental health services

Continued Action

In addition to the three legs of the stool (self-help support, clinical support, and family system support) there are also some strongly suggested activities for anyone in early recovery:

- Read recovery materials every day
- Pray to a higher power of your understanding every day
- Meditate every day
- Take a mental inventory of your thoughts and behaviors every evening
- Be tolerant: seek progress, not perfection
- Take care of your body: eat healthy, exercise
- Have intention in everything you do
- Choose the healthy course of action regardless of the additional work required
- Check your thinking with others in your support network
- Love yourself
- Seek out learning experiences
- Keep a journal
- Pay attention to your feelings and emotions
- Be kind to yourself and others
- Forgive
- Take things one day at a time