Understand the addiction
Love the person

Family Drug Helpline 1300 660 068
24 hrs, 7 days
Welcome to the summer edition of Family Drug Help’s newsletter. In this edition we are focusing on “Addiction”. Family Drug Help was formed because of the impact of addiction on families. Addiction not only affects the individual – it has an impact on family, friends and the community. In this edition, we seek to explore addiction from different angles and perspectives. We review “The Biology of Desire – why addiction is not a disease” by Marc Lewis. He provides a thought provoking lens through which to understand and approach addiction.

There is no one explanation of addiction or the best way to approach it. Some liken the field of addiction to a turf war with different models fighting over the “truth of addiction” and the best way to treat it - disease model versus biopsychosocial model versus scientific neuropsychological etc. These models then manifest in treatment approaches – 12 step abstinence, harm minimisation, pharmacological etc.

“What is addiction, really? It is a sign, a signal, a symptom of distress. It is a language that tells us about a plight that must be understood “
– Alice Miller

As family members grappling with a loved one’s addiction, or the profound grief and loss that may have come from such an addiction, the future can feel bleak. Addiction is moving, albeit cyclically; but as with any movement, it can change; it can be re-directed. The inspiring recovery stories of people who have struggled with addiction show us that. How did they get there? Each chose a path unique to themselves. While we cannot control or determine a loved one’s journey through addiction, there is much we can do. We can seek to understand and support, while also caring for ourselves. Whatever addiction is or is not, we need to come to terms with the impact it’s having on us, and get the support we need. Here at Family Drug Help we offer a range of programs to do just this.

“The best way out is always through “ – Robert Frost

The Family Drug Help Team
What on earth IS addiction?

- Addiction is a craving to use a substance (such as alcohol or to do something (such as gambling). It’s about wanting to feel good, or not feel bad, to the point that you are not in control. Addiction can be physical or psychological.

- Physical addiction is when your body depends on a particular substance or behaviour. The body becomes more tolerant of the substance or behaviour over time, so you have to take (or do) more and more to feel the same effects. If you try to give up, you feel symptoms of withdrawal.

- Psychological addiction is when you have an emotional or psychological desire for a substance or behaviour. If you try to give up, you may feel depressed, anxious and unable to sleep or concentrate.

- At its worst, addiction leads people to do things they would normally never do, just to access the drug (or to repeat the behaviour). They may lie, cheat or steal. They may even physically harm someone who gets in their way.

- When referring to any kind of addiction, it is important to recognise that its cause is not simply a search for pleasure and that addiction has nothing to do with one’s morality or strength of character. Experts debate whether addiction is a “disease” or a true mental illness, whether drug dependence and addiction mean the same thing. Such debates are not likely to be resolved soon. But the lack of resolution does not preclude effective treatment.
**What is the Medical Definition of Addiction?**

An addiction must meet at least three of the following criteria. This is based on the criteria of the American Psychiatric Association (DSM-V) and World Health Organisation. Here is a check list.

1. **Tolerance.** Do you use more alcohol or drugs over time?

2. **Withdrawal.** Have you experienced physical or emotional withdrawal when you have stopped using? Have you experienced anxiety, irritability, shakes, sweats, nausea, or vomiting? Emotional withdrawal is just as significant as physical withdrawal.

3. **Limited control.** Do you sometimes drink or use drugs more than you would like? Do you sometimes drink to get drunk? Does one drink lead to more drinks sometimes? Do you ever regret how much you used the day before?

4. **Negative consequences.** Have you continued to use even though there have been negative consequences to your mood, self-esteem, health, job, or family?

5. **Neglected or postponed activities.** Have you ever put off or reduced social activities or work, because of your use?

6. **Significant time or energy spent.** Have you spent a significant amount of time obtaining, using, concealing, planning, or recovering from your use? Have you spent a lot of time thinking about using? Have you ever concealed or minimised your use? Have you ever thought of schemes to avoid getting caught?

7. **Desire to cut down.** Have you sometimes thought about cutting down or controlling your use? Have you ever made unsuccessful attempts to cut down or control your use?
How addiction is different from substance misuse?

When someone starts to use drugs, it is called substance use. People who regularly use a drug can become addicted to, or dependent on it. They may start to feel that they need to use the drug to go about their normal activities like working, studying and socialising, or just to get through the day. In other words, substance misuse can lead to addiction.

People can become addicted to all sorts of substances – alcohol, prescription medication, illegal drugs and cigarettes. But some substances are more addictive than others, and the physical, mental and social impacts of addiction can vary significantly from person to person and from substance to substance.

How Does Addiction Feel?

An addictive substance feels good because it stimulates the pleasure center of the brain through neurotransmitters such as dopamine. If you have a genetic predisposition, addictive substances don’t just feel good, they feel so good that you will want to chase after them. This is where addiction comes in. If you have a genetic predisposition, addictive substances feel so good that you are willing to suffer negative consequences in order to get more and to continue to feel the high.

Addictive substances feel different inside an addict’s brain than they do to a non-addict. This is why the two sides have difficulty understanding each other. In someone who is not addicted, drugs and alcohol only produce a mild high. Therefore a non-user cannot understand why the user would go to such lengths, when it is clearly destroying their life. Denial is a big part of addiction. Because addictive substances feel good, a user will initially deny that they have a problem. In the long-run addiction isolates you from the people and activities that mean the most to you.
The Role of Family History
Addiction is due 50% to genetic predisposition and 50% to poor coping skills. The children of users are 8 times more likely to develop an addiction.

Why are there genes for addiction? Although everyone has the potential for addiction, some people are more predisposed to addiction than others. Some people drink alcoholically from the beginning. Other people start out as a moderate drinker and then become alcoholics later on.

How does that happen? Repeatedly abusing drugs or alcohol permanently rewires your brain. If you start out with a low genetic predisposition for addiction, you can still end up with an addiction. If you repeatedly abuse drugs or alcohol because of poor coping skills, then you'll permanently rewire your brain. Every time you abuse alcohol, you'll strengthen the wiring associated with drinking, and you'll chase that buzz even more. The more you chase the effect of alcohol, the greater your chance of eventually developing an addiction. Your genes are not your destiny.

The 50% of addiction that is caused by poor coping skills is where you can make a difference. Lots of people have come from addicted families and have managed to overcome their family history and live happy lives.

What does addiction looks like?

Here are some of the more common signs:

• You think you need the substance or behaviour to forget your problems, to cope with your life, or to relax.
• You withdraw from family and friends.
• You don’t care about your work or schoolwork, and your performance has dipped (possibly a lot).
• You are not interested in your usual interests and hobbies.
• You are stealing or selling things to pay for your addiction.
• You have tried to quit but you can’t.
• You felt shaky or sick when you tried to quit.
• You feel anxious, angry or depressed most of the time.
• You are having trouble sleeping, or can’t stop sleeping.
• You are eating differently from your usual eating patterns.
• You have gained or lost a fair amount of weight.
• You have become unreliable, often turning up late or not at all.
• You have started high-risk behaviour, such as having unprotected casual sex, drink driving, using dirty needles, being aggressive towards your loved ones, leaving home or quitting your job.
• You are arguing a lot with family, friends or work colleagues.
• You are keeping secrets from the people who care about you.
• You have new friends who have the same addiction, or who support your addiction (such as suppliers of drugs).

• If you can identify any of these behaviours with your family member, you may start to feel worried and panicked. Why not give us a call to talk about how to handle the next step.
As families we are acutely aware of what substance dependence can do to our loved ones. We live it everyday. Here a few ways it can impact on lives.

**What addiction does to you?**
Addiction can affect your life in a number of ways. It can have short-term impacts, such as problems with:
- your physical health: nausea, aches and pains, sleep problems, weight gain or loss, infections, accidents, illness or chronic disease
- your mental health – depression, anxiety, paranoia, psychosis
- your personal relationships
- study, work and money
- your behaviour: criminal and anti-social behaviour, isolation.

And, from these problems, addiction can start to have long-term impacts on your physical, mental, social and financial health. It can even lead to suicide or accidental death.

Remember, not all alcohol and other drug use is harmful. And not all compulsive behaviour is harmful. But once you become addicted to a substance (whether legal or illegal) or a behaviour, the risk of harms to you and possibly to others increases.
Models of Addiction

Disease model
The disease model defines addiction from a medical point of view and proposes that addiction is derived from an illness or disease that comes from within the person. It believes that biological factors (genetics and chemical changes in the body from drug and/or alcohol use), are the main cause of addiction and is a primary disease not a symptom of an underlying condition. It is irreversible, can be treated but not cured and lifelong abstinence is the only option. The advantages of the disease model is that addiction is seen as a health issue which reduces some of the attached stigma. Shame and guilt can be major barriers towards someone seeking treatment.

Biopsychosocial
The biopsychosocial model takes a holistic approach to the treatment of addiction by addressing the biological (genetic predisposition), psychological (thoughts, feelings, behaviours) and environmental (family, social) aspects of the person. Spirituality is also recognised as another biopsychosocial factor among many treatment providers. Drug and/or alcohol abuse might be a result of the person’s social environment or developing maladaptive coping strategies to survive issues such as complex trauma, homelessness and untreated or undiagnosed mental health. Understanding the underlying issue and implementing positive coping strategies and lifestyle changes has shown to increase the chances of recovery.
As discussed, the nature of substance dependence has many factors and it can be confusing for families to understand. Families often struggle with the question ‘WHY has this happened to our family?’ Families want answers and herein lies the difficulty as there are a number of different models of addiction and theories associated to this subject. It can stir up quite heated debates amongst those who have an interest in this area. We can become fixated on finding out which is the correct way to think about addiction. It’s important for families to remember there is no ‘one size fits all’ model. They all have a place amongst our discussions and they all have relevance.

In some sense it matters not which theory of addiction you adhere to - the pain of watching someone you love succumb to this condition unites us all. For most it is complex, confusing, draining and ongoing. At Family Drug Help we have dedicated ourselves to knowing all the varied aspects of how substance dependence affects families and with this expertise, it’s our job to assist them as they grapple with the trauma that addiction often leaves in its wake. Irrespective of how and why our loved ones arrived at this point in time, it’s helpful for us to be clear about how, why and when we can help. And also when we need to step back and take that risky decision to let them muddle through themselves. And most important of all - to nourish ourselves as we go through this stressful and bumpy ride with them.
ICE
GET THE FACTS, DEVELOP STRATEGIES & FIND OUT WHERE TO ACCESS HELP & SUPPORT

Register for a free session in your area at:
www.turningpoint.org.au/education/breakthrough

1800 ICE ADVICE: 1800 423 238 | Family Drug Helpline: 1300 660 068

BREAKTHROUGH
Ice education for families
<table>
<thead>
<tr>
<th>Addiction</th>
<th>Recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>It's all about me and what I want</td>
<td>&quot;How can I be of help other others?&quot;</td>
</tr>
<tr>
<td>Lying, Cheating and Manipulating to get what I want</td>
<td>Willingness, honesty and open-mindedness allow me to get what I need.</td>
</tr>
<tr>
<td>&quot;I can take care of myself!&quot;</td>
<td>&quot;There is something bigger than me.&quot;</td>
</tr>
<tr>
<td>Rationalize, justify and minimize when I'm wrong.</td>
<td>Owning my part, admitting my faults and trying to grow from them.</td>
</tr>
<tr>
<td>Projecting a false image of myself</td>
<td>I am no better and no less than anyone else.</td>
</tr>
<tr>
<td>Hide and deny my fears so as not to appear weak.</td>
<td>Acknowledging my fears and limitations and asking for help.</td>
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Edgewood Treatment Center
FAMILY DRUG HELPLINE IS RECRUITING VOLUNTEERS!

Your contribution as a telephone volunteer will make all the difference in helping people help themselves. As a trained volunteer on the Helpline you will:

• Help the family member work out strategies for looking after themselves and the other family members that are impacted, as well as encourage open communication with the person using.

• Encourage the caller to engage in other support services and education programs through Family Drug Help or other relevant agencies. e.g. professional counsellors or psychologists to work at a more advanced level.

• Encourage the caller to put in place boundaries to protect themselves emotionally, physically and mentally and help people identify what they want to do and how they may want to go about it.

Criteria:
• To be able to commit to 1 four-hour shift per week for a minimum of one year. The shifts are either 9am-1pm or 1pm-5pm
• Have been impacted by a loved one’s substance use.

Training:
• All successful candidates must be available for 3 days of training
• 2 additional training days provided during the year
• Supervision and debriefing also provided.

If you would like to apply or receive more information please contact Heath Richardson on 9573 1702
email hrichardson@sharc.org.au
In this, his second book, cognitive neuroscientist and former addict Marc Lewis uses his scientific knowledge and training to explain five true stories of people who have struggled in and out of addiction. These stories are used to illustrate and challenge the “disease model” of addiction.

In the West, Lewis states psychiatric institutions and the rehabilitation industry have labeled addiction a brain disease. They have based this on evidence that drug use changes the brain’s neural pathways.

Lewis agrees that brains change. He points out that “brain plasticity” is a reality and through normal learning and development brains are designed to restructure themselves.

Repeated drug use accelerates the process of change to the brain’s neural pathways. Habitual repeated drug use causes the brain to adapt to the strong effects of addictive drugs and behaviour, thus causing changes in brain regions associated with reward, memory, emotion, decision making and stress management.

Implusive behaviour becomes compulsive behaviour and unhealthy cognitive and emotional patterns become well-established, making it difficult to change addictive behaviour. But, argues Lewis, is this a disease?

Repetition of any behaviour will over time change the brain’s neural pathways. In addiction the highly attractive rewards of pleasure and relief are repeatedly pursued and the brain continues doing what it’s supposed to do, that is, seek pleasure and relief.
Lewis questions why treatment based on the disease model so often fails. Most people with a serious disease or disorder would be surprised if their doctor recommended a treatment that had no scientific evidence for its effectiveness such as 12 Step programs. People with serious diseases or disorders do not rely solely on a higher power for help, regardless of their beliefs.

Treatments based on scientific evidence combined with the 12 Step Model, may be a way to find a lasting and sustainable pathway out of addiction. Some people may find the ideas in this book difficult to accept. At first, I was dubious, if it’s not a disease then what is it?

By the time I’d finished the book, I began to think that perhaps it is time to review the idea that addiction is a disease. Current brain research is producing valuable information about the neural mechanisms associated with desire, compulsion and self control. Research that did not exist decades ago when the disease model of addiction became popular. If we accept that brains have the ability to change and learn new ideas, then healing and lasting recovery may be achieved. By Charlotte MacLatchy
Want to talk to someone who understands what it’s like to have a family member with problematic alcohol and other drug use?

Sometimes you may feel you need to talk to someone who knows what it’s like to love someone who’s misusing drugs/alcohol. Family Drug Help offers a confidential telephone service which provides support to family members in need. We are staffed by trained volunteers, ordinary people who are just like you: mothers, fathers, grandparents, siblings, partners, sons, daughters and friends. (Monday - Friday 9-5pm)

Having a bad day?  
Ring the Family Drug Helpline and they can talk you through it.

“The Helpline and the volunteers who have lived through similar circumstances were a Godsend during those early months of not knowing where to turn or what to do.”

You can ring the Helpline on 1300 660 068 for support, information, referrals and above all, to be heard.

Disclaimer: Family Drug Help is a Victorian service providing information and support to the families and friends of people who use drugs. The ideas and views of personal contributions to the Family Drug Help Newsletter are not necessarily those of Family Drug Help, its auspicing agencies or the editorial committee. Any comments should be made via letters to the Editor that can be published or directed to the authors/artists themselves. All articles and artwork in the Family Drug Help Newsletter remain the copyright of the original artist/author and may be reproduced with permission.
The supper club is a place you are able to come to gain support and talk openly about a loved one who has passed away as a result of substance use.

The group meets on the second Tuesday of each month at SHARC, 140 Grange Road, from 6pm - 8pm.

A light meal is provided. 
To attend the group contact John on 9573 1784
Family Drug Help offers the Action for Recovery Course (ARC) for family members of a person with problematic alcohol or other drug use. ARC provides families with a new set of skills to help improve their relationships. It runs for six consecutive weeks for two hours each week. The cost is $60.00 per person which covers resources and refreshments.

Some comments from recent participants:
I have put boundaries in place and I am no longer covering up for her. I don’t feel so guilty.

It helped to know we weren’t the only ones going through this and our response was quite normal.

I didn’t realise how broken I was. I have learnt to repair myself brick by brick.

For details of forthcoming program dates please go to www.familydrughelp.com.au or call the ARC facilitator on 9573 1761
email: arc@sharc.org.au
Please put me on the Family Drug Help Mailing List

Preferred newsletter format
email [ ] post [ ]

Name:
Address:
Suburb:
Postcode: State:
Email:

Please send me a free alcohol booklet ‘Why can’t they just stop?’

Please send me a free booklet Is someone you care about using drugs?

Please send me a free ‘Myth Busting Alcohol Booklet’

Return to: Newsletter, Family Drug Help. 140 Grange Road. Carnegie, VIC, 3163 or email talder@sharc.org.au
Where do I go for support?

**Family Drug Help**  
1300 660 068  
familydrughelp.com.au

**Reach**  
support for young people with life's issues  
reach.org.au

**Orygen**  
Youth mental health programs, clinical service  
oyh.org.au

**Lifeline** 131 114  
Telephone crisis support  
lifelife.org.au

**Headspace** 03 9027 1011  
Mental health for 12-25 years  
headspace.org.au

**YoDAA** 1800 458 685  
Youth Drug and Alcohol Advice  
yodaa.org.au

**ADIN**  
Australia’s Alcohol & Drug directory  
adin.com.au

**DirectLine** 1800 888 236  
Counselling and referral line  
counsellingonline.org.au

**Beyond Blue** 1300 224 4636  
Resource for all things mental health  
beyondblue.org.au

**Australian Drug Foundation** 03 9611 6100  
adf.org.au

**Suicide Helpline** 1300 651 251  
families can call for support  
suicideline.org.au

**Youth projects**  
health outreach & more  
youthprojects.org.au