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5 Myths about Addiction that Undermine Recovery

These myths about the addicted stigmatize them and can sabotage interventions. Published on May 14, 2013 by David Sack, M.D. in Where Science Meets the Steps





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Honest, courageous and insightful aren't words typically used to describe drug addicts. But if given the chance, many addicts end up developing these qualities and contributing to society in a way they never imagined possible. These successes occur in spite of major obstacles, from the ever-present threat of relapse to the pervasive stereotypes addicts encounter along the way. Even with three decades of myth-busting research behind us, some of the most damaging beliefs about addiction remain:

#1 Addicts are bad people who deserve to be punished.

Man or woman, rich or poor, young or old, if a person develops an addiction, there's a widespread assumption that they are bad, weak-willed or immoral. The hostility toward addicts takes a form unprecedented among other chronic illnesses, prompting harsh legal sanctions and judgments like, "Let them kill themselves, they asked for it."

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It is true that many addicts do reprehensible things. Driven by changes in the <u>brain</u> brought on by prolonged drug use, they lie, cheat and steal to maintain their habit. But good people do bad things, and sick people need treatment – not punishment – to get better.

#2 Addiction is a choice.

Recovery isn't as simple as exercising enough willpower. People do not choose to become addicted any more than they choose to have cancer. Genetics makes up about half the risk of addiction; environmental factors such as family life, upbringing and peer influences make up the other half.

Brain imaging studies show that differences in the brain are both a cause and effect of addiction. Long before <u>drugs</u> enter the picture, there are neurobiological <u>differences</u> in people who become addicted compared to those who do not become addicted. Once an individual starts using drugs, prolonged drug use changes the structure and <u>function</u> of the brain, making it difficult to control impulses, feel pleasure from natural rewards like <u>sex</u> or food, and focus on anything other than getting and using drugs.

#3 People usually get addicted to one type of substance.

At one time, we believed that most addicts had one drug of choice and



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stuck with it. Today, polysubstance abuse - the use of three or more classes of substances - is the norm, not the exception. Some people use multiple substances to create a more intense high (e.g., combining cocaine and heroin, or "speed-balling") while others take certain drugs to counteract the undesirable effects of another drug (e.g., using alcohol to come down from stimulants). Some supplement their primary drug of choice with whatever is readily available (e.g., using prescription opiates and heroin interchangeably).

Polysubstance abuse appears to be particularly common among males, those who begin using drugs at an early age, and adolescents and young adults. People who abuse multiple substances are more likely to struggle with mental illness, which when complicated by drug interactions and side effects, makes polysubstance abuse riskier and more difficult to treat than other types of drug abuse.

#4 People who get addicted to prescription drugs are different from people who get addicted to illegal drugs.

Despite the fact that prescription drug abuse has reached epidemic proportions in the past decade, the use of "legal" drugs to get high carries less stigma than the use of illicit drugs. Because medications like Vicodin, Xanax and Adderall can be prescribed by a doctor, are relatively safe when used as prescribed, and are already sitting in most people's medicine cabinets, there is a widespread misconception that they are safer than street drugs.

They are not. When a person takes a prescription medication in a larger dose or more often than intended or for a condition they do not have, it affects the same areas of the brain as illicit drugs and poses the same risk of addiction.

It's not just curious, misinformed teens but also their parents who minimize the problem. According to a recent survey by The Partnership at Drugfree.org, only 14 percent of parents mention prescription drugs when they talk to their kids about drugs, and one in six parents said prescription drugs are safer than street drugs.

#5 Treatment should put addicts in their place.

Even though the leading authorities on addiction agree that addiction is a chronic disease similar to heart disease, diabetes and cancer, addicts are still treated as second-class citizens. Many treatment centers believe confrontational, shame-based methods are necessary to motivate addicts. Quite the contrary. In addition to contributing to the stigma of addiction and deterring people from seeking treatment, research shows that shame is a strong predictor of relapse.

Still, the media perpetuates the myth that there is a right way and a wrong way to recover, and that treatment that is luxurious or comfortable is inherently bad. A recent article in the Hollywood Reporter, for example, quotes Hollywood producers, former actors, lawyers and other "experts" who believe that high-end treatment centers do a disservice by offering upscale amenities and holistic therapies such as neurofeedback and equine therapy. Despite a significant body of research showing that these therapies strengthen the relationship between therapist and client, improve long-term abstinence rates and increase treatment retention, the media sends the message that addicts deserve to suffer.

The myths about addiction are damaging not only to addicts and their families but to all of us. What if the many influential business leaders, inspirational artists, best-selling authors, and history-making politicians who join the ranks of recovering addicts were shamed into silence? By understanding addiction as a brain disease and allowing people to recover in the way that works best for them, we can make significant strides in addressing the nation's leading public health problem.



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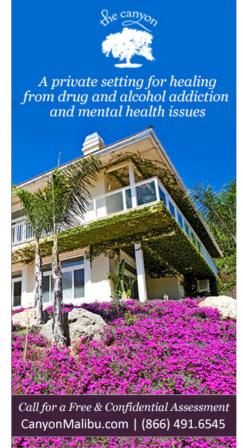
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