

Is Inpatient Addiction Treatment Effective?

By Peggy L. Ferguson, Ph.D.

Short term acute care treatment of alcoholism and other drug addiction is not generally sufficient in and of itself to put addiction in remission and have it remain in remission. Addiction is a chronic relapsing disease that usually requires multiple treatment episodes of various lengths and intensities. For many people acute short term care (i.e. inpatient treatment), is necessary to interrupt the momentum of the addiction in order to establish abstinence, and to be supervised during detox.

Since the impact of one's addiction permeates most areas of a person's life, lifestyle changes must occur in order to maintain abstinence over time. Alcoholics/addicts use the chemical to deal with life (or to avoid dealing with life) in an ever more expanding manner across different parts of their lives. The chemical is used in place of living skills. When drinking/drugging stops, the addict is left with big gaping holes in his/her life where the chemical fulfilled the roles of living skills. The newly recovering person must learn new living skills to replace the chemicals in the addict's life. Without the chemical to fulfill roles such as 'stress manager', "social disinhibition", "feelings numbing", etc., the addict is at a loss for what to do when life presents problems such as shyness, stress, overwhelming uncomfortable feelings. Without adequate living skills, the addict remains continuously vulnerable to relapse. The addicted person's family is often stymied when their loved one has been through inpatient treatment, and has maintained abstinence for weeks, months, or even years, only to relapse in the midst of some personal difficulty. Without adequate skills for dealing with life on life's terms, the tendency remains for the addict to return to what they know will reduce the discomfort. Something must replace the chemical in these circumstances or when the stress becomes great enough, the addicted person will return to use of the chemical. Developing a lifestyle that supports recovery vs. addiction takes some time and effort. These personal and lifestyle changes do not occur overnight, nor do they typically occur in acute care 28 day inpatient treatment.

Continuing care in the form of professional assistance is crucial to assist in gaining these necessary living skills. There are many forms of continuing care including intensive outpatient counseling (several sessions per week), individual or group continuing care counseling, marital/family counseling, half way house, and oxford houses or other sober living environments. Additional non-professional support is also recommended, including frequent AA/NA meetings, sponsorship, and recovery coaching.

Many newly sober alcoholics and addicts also need help with accessing other personal and community resources such as medical attention and treatment, dentistry, housing assistance, work/career help and guidance, and other help for basic personal needs. Many need help in recreating the basic infrastructure of a sober life. Most communities have community mental health/substance abuse services programs that assist with this for minimum or no cost to the patient.

Recovery occurs over a lifetime and involves a return to health, a positive restoration of relationships, recovery of solid contributions in career/work, and responsible citizenship.

Current trends in addiction research, theory, and public health reflect changing perceptions about treating addiction. Many leaders in the field point out that a chronic, progressive disease, that is prone to relapse is not best treated with acute care methods alone (i.e. 28 day inpatient treatment). Criteria for best practices of acute care treatment centers is that they link the patient to continuing care follow up before they leave in patient treatment. Acute care, by itself is generally not effective over the lifetime of the patient. One year of continuing care (out patient counseling) is generally recommended with ongoing AA/NA or other support group participation. Additionally, many people who maintain long term sobriety seek counseling at various points in their sustained recovery to deal with new issues that emerge. Recovery is not considered long term or sustained until about five years of continuous abstinence.

Inpatient, residential treatment gives the patient a “jump start” on their recovery. It has often been said (in AA meetings) that inpatient treatment is roughly equivalent to a year in AA alone. That may or may not be accurate, but inpatient treatment is like a crash course in learning how to get sober. Inpatient treatment following by continuing care, support group meetings, and additional support as need, are together, very effective.

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