## Continuing Care As Part of A Continuum of Care for Addiction Recovery By Peggy L. Ferguson, Ph.D.

It is generally acknowledged and accepted that addiction is best treated from a continuum of care framework. A continuum of care is a treatment concept that includes a stage of treatment called continuing care. What is treatment for addiction? Many people think of treatment as a place, a pill, a kind of therapy, or a religion. In reality, "treatment" is a set of therapeutic services.

The course of addiction treatment starts with stabilization or "acute care". It is in this stage of addiction treatment that detox occurs. Detox is the process where the body is allowed to remove its toxins through abstaining from ingesting any more mood/mind altering drugs. Sometimes, in order to avoid possible catastrophic physical complications, another similar drug or the original drug of choice is administered in diminishing dosages over a brief period of time.

During the treatment process, the newly sober alcoholic/addict begins to learn the skills necessary to withstand cravings, remain abstinent, and change their behavior. They work on accepting the disease, learning how to stay abstinent in the face of life challenges. They work on learning new living skills, such as managing and communicating feelings appropriately, reducing stress, dealing with conflicts, and improving self confidence. An overarching goal of the recovery process and the stages of treatment is to return to full functioning in all areas of the person's life. After a primary treatment experience, inpatient or outpatient, they move in to a next stage. Aftercare has been used to make the transition from a more structured level of care to maintain continuing abstinence in an environment where alcohol and drugs abound, where cues from cravings are ever present. It also usually involves providing support and encouragement for staying in AA/NA.

It might involve outpatient counseling, AA, or a formal aftercare program. It involves learning, practicing, and reinforcing the skills learned to maintain changes in behavior. The roles that the chemical once played are replaced with new healthy living skills. Continuing care can focus on preventing relapse, and encouraging the alcoholic addict to stay committed to and engaged in ongoing recovery efforts.

Continuing care for addiction is very important because of the nature of addiction. Addiction is a chronic disease characterized by relapse. Most people leaving acute care settings are precariously perched somewhere between continued recovery and relapse. Recovering addicts not in some form of treatment are at an extremely high risk for relapse. It helps keep the newly sober alcoholic/addict engaged in recovery activities, which reduces probability of relapse. Additionally, continued behavioral change is necessary for sustained benefit.

Aftercare is very important for a number of reasons. One of the main reasons is that it increases the probability of sustained recovery. While there is no predetermined length of treatment, research has shown that the longer the engagement in some level of

continuing care, the better the treatment outcomes. Many people drop out of continuing care prematurely. Statistically only about one in five actually go on to continuing care after inpatient treatment. Of those who go to inpatient treatment, sixty percent have been to inpatient treatment at least once before.

The majority of people who complete treatment will relapse within the year, 80% of whom will do so in the first 90 days after discharge. Fifty percent of those who relapse will do so in the first 30 days after discharge. Of the people who follow up with AA without aftercare, 50 % will stop going to meetings within the first 90 days. People in recovery are not considered to be in sustained recovery until about four or five years of sobriety. The low follow through rate for continuing care is strongly correlated with the high rate of relapse after inpatient treatment.

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