

**KENTUCKY SCHOOL OF ALCOHOL
AND DRUG STUDIES**

PRESENTS

**SLIPPING THROUGH THE CRACKS:
INTERVENTION STRATEGIES FOR
CLIENTS WITH MULTIPLE ADDICTIONS
AND DISORDERS**

PRESENTS

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OUTLINE

- I. 9 Areas of Reassessment for Clients Who Relapse Continuously
- II. Addictive Relationships
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- V. Religious Addiction
- VI. Compulsive Gambling
- VII. Compulsive Spending
- IX. Prevention of Multiple Addictions
- XI. Helping Clients in Recovery Avoid Substituting One Addiction for Another

SLIPPING THROUGH THE CRACKS

The client goes back and forth between the addictions facilities, mental health facilities, prisons, hospitals, and periods of homelessness without fully recovering.

9 AREAS OF REASSESSMENT FOR CLIENTS WHO RELAPSE CONTINUOUSLY

1. Loneliness
2. Unresolved trauma
3. Core underlying issues emerge
4. A hidden psychiatric disorder
5. Addiction to the number-one drug
6. Addiction to a drug sub-culture
7. Involvement in addictive relationships
8. Unresolved grief
9. An untreated process addiction

CHARACTERISTICS OF ADDICTIVE RELATIONSHIPS

1. You use relationships the way drug addicts use drugs—to escape, avoid feelings and problems
2. You enter into relationships in which every second of every day has to be exciting.
3. You lose yourself whenever you're in a relationship.
- 4.
- 5.
- 6.
- 7.
8. You abandon friends and relatives whenever you're in a relationship.
9. Your relationships are often marked by extreme jealousy
10. You believe that a passionate kiss solves all problems.
11. You tend to stay in relationships in spite of major consequences.
- 12.
13. When you leave one unhealthy relationship you enter another.

HELPING CLIENTS DEVELOP HEALTHY RELATIONSHIPS

- 1.
2. Teach Clients the Characteristics of Healthy Relationships
 - A.
 - B.
 - C.
 - D.
 - E.
 - F.
3. Help clients gain insight into their patterns
4. Encourage clients to explore personal interests
5. Encourage clients to strive for their goals
6. Encourage clients to develop a spiritual life
7. Help each client expand the definition of “My Type”
8. Help each clients develop a strategy to avoid “the first drink”
9. Help clients develop self-esteem

DEFINITION OF SEXUAL ADDICTION

Sexual addiction, like alcoholism, is characterized by increased tolerance, loss of control, and continuation of acting out behavior, in spite of adverse consequences. The sex addict substitutes an unhealthy relationship with a person(s), an event, or a process for a healthy relationship with others. As the addiction progresses, the sex addict becomes more emotionally distant from loved ones, consequences increase, and the addict's secret life becomes more real and important than his or her public life. The addiction is often to lust, not sex (forbidden sex often produces high).

NEGATIVE CORE BELIEFS

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

LEVELS OF SEXUAL ADDICTION

Level One

Some of the behavior that falls under Level One is seen as acceptable in our society.

- 1.
2. Sex with prostitutes
3. Pornography
4. One-night stands
5. Phone sex
6. Fetishes
- 7.

Level Two

Can warrant stiff legal sanctions.

I. Exhibitionism

1. Opening the windows and walking around with no clothes on.
- 2.
- 3.
- 4.
5. Ringing someone's doorbell and exposing yourself.
- 6.

II. Voyeurism (also referred to as "peeping Tom")

III. Indecent calls to strangers

Level Three

Some of the most significant boundaries are violated.

- 1.
- 2.
- 3.

VICTIMIZING SEX

1. Obscene Phone Calls
2. Inappropriate Touch
3. Voyeurism
4. Exhibitionism
5. Child Molestation
6. Incest
7. Rape

As the addiction progresses, diseased thinking takes over.

1. "Everybody does it, why shouldn't I?"
2. "I'm completely unlovable."
3. "They wanted it."
4. "Sex can fulfill all my needs."
5. "Sex is proof of my adequacy."
6. "Sex is love."

TRIGGERS FOR SEX ADDICTS

- 1.
- 2.
3. Drinking, using illicit drugs, or gambling
4. Staring too long at others.
5. Sex on television
- 6.
7. Arguments
- 8.
9. Feeling inadequate, small, or unimportant
10. Spiritual bankruptcy
11. Loneliness or being alone
12. Fear
13. Driving past or sitting on beaches
14. Driving past old routes
- 15.
16. When someone lusts after the addict
17. Old tapes
18. Resentments
- 19.
20. Fatigue

TREATMENT OF SEXUAL ADDICTION

1. Self-help groups
2. Outpatient therapy
 - A. Insight
 - B. Relapse prevention
 - C. Help with traumatic events
 - D. Recovery from shame
 - E. Learning to forgive and love yourself
3. Couples/family work
4. Inpatient treatment

SOBRIETY TIPS

1. Attend meetings regularly.
2. Work the steps with a sponsor.
3. Socialize after meetings.
- 4.
5. Don't take the first drink.
6. Look for progressive victory.
7. Affirm yourself.
8. Do something spiritual daily.
- 9.
- 10.
11. Forgive others.
12. Manage stress.
13. Try not to turn a setback into a binge.
14. Have a list of people you can call if you are having difficulty.
15. Help others.

RELIGIOUS ADDICTION

Who is vulnerable to religious addiction?

1.

2.

3.

4.

5.

6.

7.

8.

9.

Definition

Religious addiction can be described as a disease similar to alcoholism, workaholism, and eating disorders. Some of its symptoms include increased compulsivity, loss of control, continuation of the religious activity in spite of major life consequences.

Early Stages

1. Ordinary religious or spiritual lifestyle
2. Excessive church going or reading of religious literature
3. Forgetting other important things as a result of preoccupation with church
4. Missing family gatherings
5. Thinking only of church
6. Secret irritation when church doctrines are challenged
7. Rationalizations begin
8. Loss of control begins
9. Trying to convert everyone to your way of thinking

Middle Stage

1. Increased use of the church to avoid problems
2. Thinking the world/the body is evil
3. Excessive financial contributions
4. Feelings of extreme guilt when missing a religious activity
5. Sneaking attendance at religious meetings
6. Sexuality is perceived as dirty
7. Refusing to discuss, question, or doubt any of the doctrine
8. Loss of other interests
9. Starvation—in the name of fasting
10. Isolate more from others
11. Strong judgment of family and friends
12. Religious practices are not working—spirituality decreases greatly
13. Conflict at school/work/home
14. Major money problems

Late Stage

1. Loss of jobs
2. Radical deterioration of relationships
3. Physical and mental deterioration—not eating
4. Unable to make decisions
5. Obsession with religious practices increases
6. Depression
7. Trances

8. Suicidal
9. Psychotic

TREATING RELIGIOUS ADDICTION

- 1) Acknowledge that religious addiction is a problem
- 2) Recognize the difference between religion and spirituality
- 3) Strive for spirituality
- 4) Practice acts of self-care
- 5) Develop a loving concept of God
- 6) Deal with shame—talk about it
- 7) Deal with fears
- 8) Having strategies for dealing with other religious addicts
- 9) Develop a church of choice
- 10) Re-establish relationships with family

DEFINITION OF PATHOLOGICAL GAMBLING

DSM IV

A Progressive disorder characterized by:

- Continuous or periodic loss of control over gambling
 - A preoccupation with gambling and with obtaining money with which to gamble
 - A continuation of behavior despite adverse consequences
 - Irrational thinking
 - Persistent or recurrent maladaptive gambling behavior as indicated by at least five of the following:
1. Preoccupied with gambling (preoccupied with reliving past gambling experiences, handicapping, or planning the next venture, or thinking of ways to get money with which to gamble).
 2. Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
 3. Made repeated unsuccessful efforts to control, cut back, or stop gambling.
 4. Restlessness or irritability when attempting to cut down or stop gambling.
 5. Gambles as a way of escaping from problems or of relieving dysphoric mood (e.g., feelings of helplessness, guilt, anxiety, depression).
 6. After losing money gambling, often returns another day in order to get even ("chasing" one's losses).
 7. Lies to family members, therapist, or others to conceal the extent of involvement with gambling.
 8. Committed illegal acts, such as forgery, fraud, theft, or embezzlement, in order to finance gambling.
 9. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling.
 10. Reliance on others to provide money to relive a desperate financial situation caused by gambling.

GENDER AND GAMBLING

Men are more likely to be thrill seekers.

- A. They usually start gambling at earlier ages than women.
- B. Greater than average interest in sports.
- C. Interested in the “big win.”
- D. Often gamble for 20-30 years before seeking help, and help-seeking usually begins at GA.

Women are more likely to be escape seekers.

- A.
- B.
- C.
- D.

Source: *Pathological Gambling*, by Richard Rosenthal, M.D.

WOMEN AS COMPULSIVE GAMBLERS

What they are escaping

1. Trauma
2. Depression
3. Losses
4. Isolation
5. Loneliness
6. Oppression
7. Feeling overwhelmed due to multiple roles

8. Family of origin issues
9. Feeling a lack of empowerment
10. Relationship difficulties

A survey of 50 female pathological gamblers found:

8 were married to pathological gamblers.
14 were married to alcoholics.
4 were married to drug abusers.
4 were married to mentally ill men.
5 were married to “womanizers.”
9 were married to “workaholics.”

Source: *When Lady Luck Loses: Women and Compulsive Gambling*, by Henry Lesieur and Sheila Blume

11. Economic difficulty
12. Sexism

TREATMENT OF COMPULSIVE GAMBLING

1. Outpatient or inpatient
2. Relapse prevention
3. Family work
4. 12-step work
5. Restitution
6. Budget counseling
7. Treatment of other addictions and concurrent psychiatric disorders

WHO IS VULNERABLE TO SHOPPING ADDICTION

1. The economically poor

Similarities between the rich and poor

- Entitlement
- Deprivation
- Materialism
- Extreme competition
- External measures of success
- Lack of imagination concerning occupational choices

2. The middle class

- Wanting to appear rich
- Shopping as a distraction from hating their job
- Economically disadvantaged as a youth

3. The wealthy

- Deprivation
- Extreme competition and comparisons
- Materialism as a sign of success
- What other people think of us is more important than how we feel
- Emptiness

SHOPPING ADDICTION

1. Do you “take off for the stores” when you’ve experienced a setback or a disappointment, or when you feel angry or scared?
2. Are your spending habits emotionally disturbing to you and have they created chaos in your life?
3. Do your shopping habits create conflicts between you and someone close to you (spouse, lover, parents, children)?
4. Do you buy items with your credit cards that you wouldn’t buy if you had to pay cash?
5. When you shop, do you feel a rush of euphoria mixed with feelings of anxiety?
6. Do you feel you’re performing a dangerous, reckless, or forbidden act when you shop?
7. When you return home after shopping, do you feel guilty, ashamed, embarrassed, or confused?
8. Are many of your purchases seldom or never worn or used?
9. Do you lie to family or friends about what you buy and how much you spend?
10. Would you feel “lost” without your credit cards?
11. Do you think about money excessively—how much you have, how much you owe, how much you wish you had—then go out and shop again?
12. Do you spend a lot of time juggling accounts and bills to accommodate your shopping debts?

Answering “yes” to more than four of these questions may be an indication of out-of-control compulsive shopping.

Source: *Shopaholics*, by Janet E. Damon

TREATMENT OF SHOPPING ADDICTION

1. Therapy
2. Self help
 - Shoppers Anonymous
 - Overspenders Anonymous
 - Emotions Anonymous
 - Debtors Anonymous
3. Meditation
4. Budget counseling
5. Couples and family therapy
6. Relapse prevention
 - A.
 - B.
 - C.
 - D.
 - E.
 - F.
 - G.
 - H.

GIVING CHILDREN AND ADOLESCENTS THE TOOLS TO
AVOID PROCESS ADDICTIONS

1. Allow Them The Five Freedoms

A.

B.

C.

D.

E.

2.

3.

4.

5.

PREPARING CHEMICALLY DEPENDENT CLIENTS TO
AVOID SUBSTITUTING ONE ADDICTION FOR
ANOTHER

- 1.
- 2.
- 3.
- 4.
- 5.