

Recovery Capital: Assets, Not Abstinence

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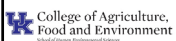
Faculty Disclosure

- I have no financial relationships to declare



Educational Need/Practice Gap

- Educational Need: Myopic focus on abstinence has led to reluctance to accept Harm Reduction
- Practice Gap: Wellness is the goal of recovery; therefore, Harm Reduction is for everyone in addiction and recovery



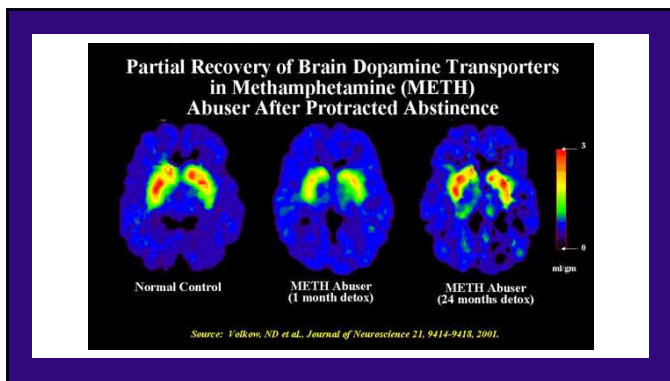
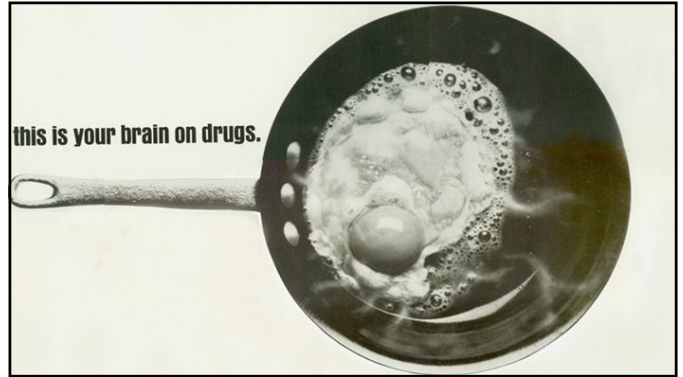
Objectives

- Upon completion of this activity you will be able to:
 - Develop an understanding of addiction as a chronic disorder
 - Develop an understanding of recovery as a process of change
 - Identify various forms of recovery capital
 - Compare similarities between Recovery and Harm Reduction

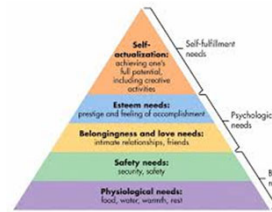


Expected Outcome

- Participants will develop a better understanding of the short-comings of abstinence-only approaches and the value of harm reduction in promoting recovery



Recovery Capital



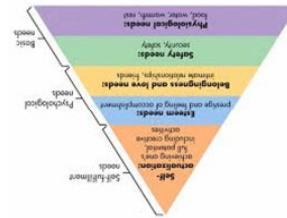
The Solution



Abstinence or Resources: Chicken & Egg (or is it?)

- Should we wait for individuals to become abstinent before building recovery capital?
- Abstinence as a precondition for:
 - Housing
 - Social services
 - Caregiving
 - Mental health services
 - Continued treatment
 - Acceptance in the recovery community
- Recovery as meritocracy: "You've gotta want it; you've gotta earn it"

We've Got it All Upside Down!



"We kicked her out when we caught her smoking a bowl of marijuana in our garage. She was a [#heroin](#) [#addict](#). We called the [#rehab](#). They told us it's still a [#relapse](#) - to kick her out in accordance with the [#RelapseContract](#) they wrote for us at our [#FamilyWeek](#). We did. It was so hard and felt gut-level wrong. When my husband's caller-ID said "Police," I knew it in my bones - my little girl was dead and it was because we accepted brutal advice from someone who didn't love or really know her and certainly didn't apologize or show up to help bury her."

david poses
@davidthekick

He got on Buprenorphine in February
Clinic screened urine
No problems until last week
They found THC; kicked him out
He couldn't find Bupe; only heroin
He was 24 years old

When someone says: "the system is killing people," this is what they mean

7:45 PM · 8/18/20 · Twitter for iPhone

Assets, Not Abstinence

- “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential” –SAMHSA
- The GOAL of recovery is:
 - ~~Abstinence~~
 - Health/Wellness/Autonomy (i.e., Recovery Capital)
 - Reducing Harm

Where does the “Recovery Capital” construct originate? (White, 2016)

Dr. William Cloud



Dr. Robert Granfield

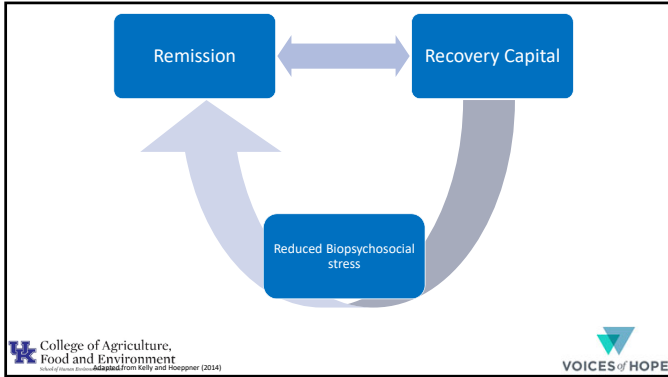


The Elephant that No One Sees: Natural Recovery Among Middle Class Addicts (Granfield and Cloud, 1996)



That doesn't even sound right!

- Unassisted recovery
 - 50% of people with SUDS (Kelly & White, 2020)
 - 75% of people with AUDS (NIAAA, 2009; Sobell & Cunningham, 1996)
- Only 1 in 5 people with a serious SUD problem and who continues to drink alcohol will have developed an AUD 3 years later (White, 2012)
- Non-abstinent pathways are successful 10 years later (Whitkewitz et al., 2020)



Evolving Approach to Addressing Addiction: A (Really) Short History

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Band-aids and Bullet Wounds (White, Kurtz, & Sanders, 2006)

- “Given the **chronic** nature of substance dependence disorders (McLellan, Lewis, & O’Brien, 2000) and the **scarcity** of funds for treatment, neither single nor serial-episode acute care will ever meet the vast need that exists. Only a focus on **ongoing recovery/support/management** can address effectively the chronic nature of this illness.”

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Recovery Capital = Nutrients!

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Frontiers in BEHAVIORAL NEUROSCIENCE REVIEW ARTICLE published: 07 May 2022 doi: 10.3389/fnbeh.2022.890202

The rewarding nature of social interactions

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INTRODUCTION
 Human societies form a dynamic and complex system, which requires frequent interaction between individuals. According to the "social brain hypothesis" (Dunbar, 1998; Adolphs, 2010) part of the human neo-cortex have evolved to improve survival in dynamic

The objective of this short review is to highlight rewarding aspects of social interactions for humans and discuss their neural basis. Thereby we report recent research findings to illustrate how social stimuli in general are processed in the reward system and highlight the role of Theory of Mind as one mediating process for experiencing social reward during social interactions. In conclusion we discuss clinical implications for psychiatry and psychotherapy.

Keywords: reward, theory of mind, social interaction

Algorithm for highly socially motivated behavior such as maternal care, mating behavior and social attachment. For instance, the access to pups is more reinforcing than cocaine in female rats (Lüscher, 2013) and dopamine in the nucleus accumbens (NAcc) is involved in typical mating behavior and social interactions of monogamous

People with addiction disorders, compared to other forms of mental illness, have tended to seek solutions in groups; the neurobiological basis of this may lie in increases in DA release or accelerated up-regulation of DA D2 receptors in NaCC

Mutual Help Organizations

- AA/NA/CA/HA/CMA...All the As!
- Refuge Recovery
- Self-Management and Recovery Training (SMART)
- All Recovery Meetings (ARMS)

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WE VALUE ALL PATHWAYS TO RECOVERY

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Living Proof Scholarships
 The Living Proof Scholarship | Living Proof: The Next Generation

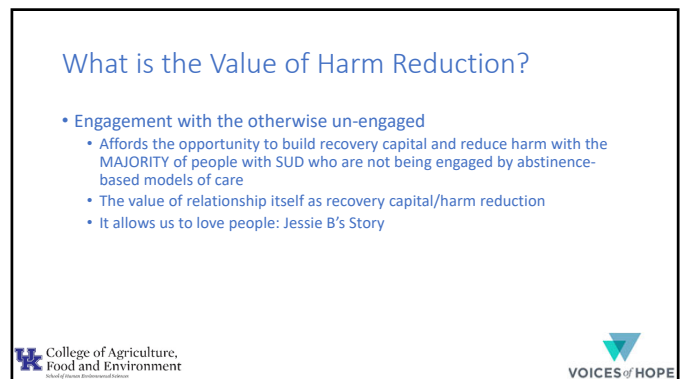
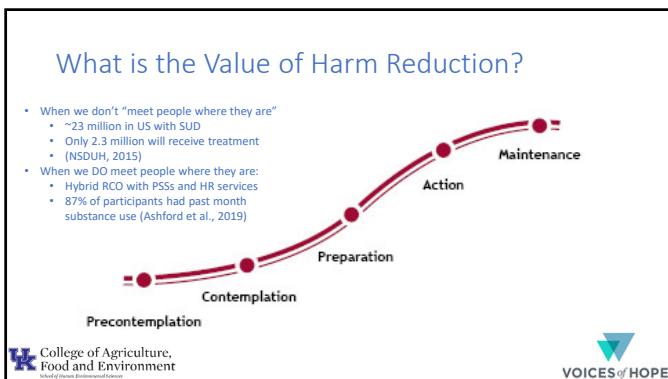
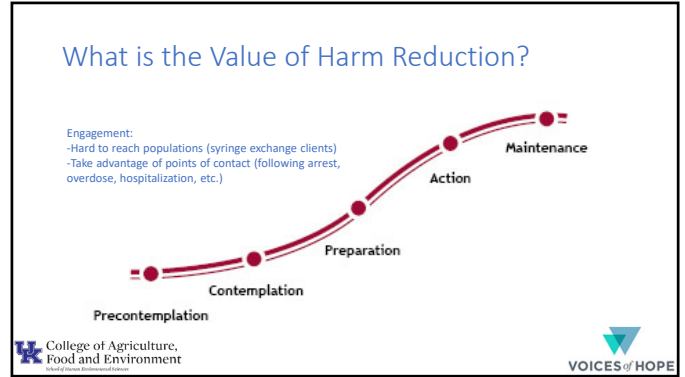
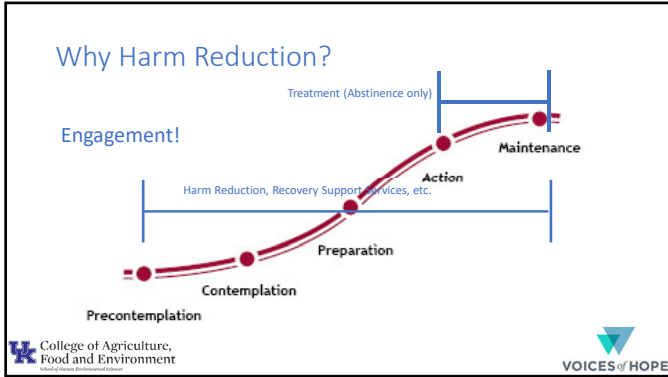
EXPUNGEMENT SESSION
 VOICES OF HOPE - EXPUNGEMENT: APRIL 28, 4:00-6:00 PM AT STE. JOE, LOUISVILLE, KY 40202
 18:00 AM - 2:00 PM

SERVICES INCLUDE:

- 12-step recovery program
- Day of recovery events
- Individualized treatment plans
- Medication management when appropriate
- Additional community resources

VOICES of HOPE RCC

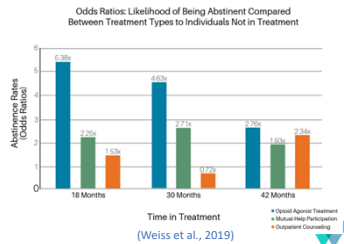
- Recovery Community Centers serve as a hub for recovery resources in the community
 - Assets, Not Abstinence
- Transplant the treatment environment to the community



The Elephant in the Room that WE Are Not Talking About: Medication for Opioid Use Disorder

- Starting MOUD prior to prison release substantially reduces overdose deaths
- From 2016-2017 in Rhode Island, new approach to using MOUD in jails/prisons began.
- Results indicate a 60.5% reduction in mortality.
- For every 11 inmates treated with MOUD, 1 death from OD was prevented

(Green et al., 2018)



Comparative Study | JAMA Network Open. 2020 Feb 5;3(2):e1920622. doi: 10.1001/jamanetworkopen.2019.20622.

HHS Vulnerability Disclosure

Comparative Effectiveness of Different Treatment Pathways for Opioid Use Disorder

Sarah E Wakeman^{1, 2}, Marc R Larochele^{3, 4}, Omid Ameli⁵, Christine E Chaisson⁵, Jeffrey Thomas McPheeters⁶, William H Crown⁷, Francisca Azocar⁸, Darshak M Sanghavi⁹

Affiliations
PMID: 32022884 DOI: 10.1001/jamanetworkopen.2019.20622

Free article

Abstract

Importance: Although clinical trials demonstrate the superior effectiveness of medication for opioid use disorder (MOUD) compared with nonpharmacologic treatment, national data on the comparative effectiveness of real-world treatment pathways are lacking.

Objective: To examine associations between opioid use disorder (OUD) treatment pathways and overdose and opioid-related acute care use as proxies for OUD recurrence.

Design, setting, and participants: This retrospective comparative effectiveness research study assessed deidentified claims from the OptumLabs Data Warehouse from individuals aged 16 years or older with OUD and commercial or Medicare Advantage coverage. Opioid use disorder was identified based on 1 or more inpatient or 2 or more outpatient claims for OUD diagnosis codes within 3 months of each other; 1 or more claims for OUD plus diagnosis codes for opioid-related

Exposures: One of 6 mutually exclusive treatment pathways, including (1) no treatment, (2) inpatient detoxification or residential services, (3) intensive behavioral health, (4) buprenorphine or methadone, (5) naltrexone, and (6) nonintensive behavioral health.

Main outcomes and measures: Opioid-related overdose or serious acute care use during 3 and 12 months after initial treatment.

Results: A total of 40 885 individuals with OUD (mean [SD] age, 47.73 [17.25] years; 22 172 [54.2%] male; 30 332 [74.2%] white) were identified. For OUD treatment, 24 258 (59.3%) received nonintensive behavioral health, 6455 (15.8%) received inpatient detoxification or residential

<https://pubmed.ncbi.nlm.nih.gov/32022884/>

Page 1 of 2

Comparative Effectiveness of Different Treatment Pathways for Opioid Use Disorder - PubMed

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services, 5123 (12.5%) received MOUD treatment with buprenorphine or methadone, 1970 (4.8%) received intensive behavioral health, and 963 (2.4%) received MOUD treatment with naltrexone. During 3-month follow-up, 707 participants (1.7%) experienced an overdose, and 773 (1.9%) had serious opioid-related acute care use. Only treatment with buprenorphine or methadone was associated with a reduced risk of overdose during 3-month (adjusted hazard ratio [AHR], 0.24; 95% CI, 0.14-0.41) and 12-month (AHR, 0.41; 95% CI, 0.31-0.55) follow-up. Treatment with buprenorphine or methadone was also associated with reduction in serious opioid-related acute

MOUD is Stigmatized in Recovery Community

The doctor coming back into the room after you asked him to help with your opiate addiction



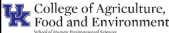



What Can the Marshmallow Test Teach Us about Addiction and Recovery?

- Higher SES kids waited longer than lower SES kids (Watts, Duncan, & Quan, 2018)
- Kids who are told they are patient actually display more patience on the test (Doolnal & Munkata, 2018)
 - Pre-treatment abstinence self-efficacy predicts 3 month outcomes (White, Harris, and Robinson, 2008)

Key Takeaways (White & Cloud, 2008)

- Recovery capital plays a major role in the success of both natural and assisted recovery
- Increases in recovery capital can spark “turning points” that increase coping skills, initiate treatment, and end addiction careers.
- Harm Reduction and Recovery Capital are NOT at odds; rather, they are the means to recovery
- Shift the focus from abstinence to recovery capital and harm reduction
- Harm Reduction is for everyone in addiction and recovery: AB

Questions or Comments?

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