

volume I number I

Welcome to the first issue of the Vital Sources newsletter! One of the time-honored hallmarks of Vital Sources is that we intentionally remain relational. We take time regardless of cost to stay personal and engaged. As you know, in our culture, this is a real challenge. We stay connected in-house with regular team times, ad hoc meetings, and gatherings. We keep in touch outside our walls with meals, coffee, conversations—and now a newsletter. We know that sometimes you'll find the particular edition stimulating, other times perhaps (hopefully) controversial and other times downright boring. We're shooting for more of the first two categories and will accept a few of the latter.

We hope you'll take a couple minutes and browse this newsletter. Now let me say from the start, I know none of us needs another thing to do...but in our fast-paced lives, it seems that staying connected is not only one of the most challenging things facing us but also one of the most important. Our communion with each other is so critical to our viability and vitality. I remember in grad school reading a book entitled *We Really Do Need Each Other*. I no longer have any idea what the additional points were that the author was making—but, in my mind, the title says it all. We do need each other. And please know that each additional newsletter is our way to say an informal “hey there” and wish you God's peace.

NEW HOPE



New Hope is a faith-based, non-profit agency that is dedicated to bringing the highest quality psychological services to people in Frederick County and surrounding areas, regardless of a person's ability to pay. Born out of Vital Sources, New Hope's vision is to offer services to those who have no health insurance and whose household income is less than \$45,000/year. Those criteria are not rigid, however, because we recognize that the important thing is that people get the help they need.

New Hope began to offer psychological services about two years ago. Since then the Board has continued to develop, and our outreach to the community has grown. New Hope now has two partnerships with area churches. These churches supply an office space one day a week for clients to be seen by a New Hope therapist. Part of our vision is that New Hope be in the community where the needs are. Partnering with churches and other non-profit agencies to reach our clients is an important part of our mission.

If you have any other questions about New Hope or want to refer someone, please contact Charlanne Brubaker, MA, LGPC at 301-696-8880 or go to our website at www.newhopefrederick.org.



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• **Jim Roembke**
• Senior Partner
• Vital Sources, LLC



Understanding Addiction

By Erik N. Hadden, M.A.

Addiction continues to be a concept and entity that causes debate in our culture, health care systems and families. Questions abound: Doesn't a disease model of addiction deny personal responsibility for one's actions? Why does the addict who wants help keep choosing to go back to his or her addiction? Why do addicts lie so much? Why can't they just “stop it”?! Addiction is a confusing and convoluted state. As those in its throes struggle to free themselves from it, those around them struggle to understand its ugly and debilitating power.

Terms and Definitions

In an effort to help us become more knowledgeable about the current understandings of addiction, it would help to review and correct some terms. In the diagnostics of psychology the word “addiction” does not exist. Though we do not diagnostically use the word “addiction,” it is still used commonly in the psychological field and in our culture. Diagnostically, to describe a struggle with a substance like alcohol or drugs we have two categories: 1) Substance Abuse and 2) Substance Dependence. Both are

defined by use of substance that has caused specific distress and impairment to one's life. Substance Dependence adds the criteria of the development of tolerance or withdrawal symptoms related to the substance. To describe an addictive behavior (separate from a substance), like gambling or kleptomania, we have the diagnostic category of “Impulse-Control Disorders.” There is no current official diagnosis for any type of sexual addiction. This does not mean that sexual addiction does not exist; it simply means that it is still being researched and understood until the next revision of our diagnostic manual. Indeed, many who suffer from sexual addiction would argue, with the evidence of their wrecked lives and families, that it truly is a horrible addiction and sickness.

Addiction vs. Bad Behavior

Many who have not wrestled with addiction express their concern that people will use the term “addiction” to excuse their recurrent awful behavior, when they still have full volitional control over their actions. During my few years working in emergency rooms performing psychiatric evaluations, I saw many patients return time and time again to the ER drunk or high, seeking help for

their addiction: always getting help (and maybe staying sober for some time) but almost always returning some time later,



having used the substance again. Some of the nurses and doctors were flat out rude to these patients, angry at them for

taking up an ER room for the fortieth time just for addiction. They viewed them as a nuisance and as deserving less care. In some churches I have seen the same struggle to understand why some people cannot seem to help themselves, and I have seen the addict blamed for lack of faith.

Some researchers describe addiction as a breakdown of the self-regulatory process. A person becomes much less able to regulate his or her own behavior in healthy ways. Gerald May, in his book *Addiction and Grace*, states that addiction damages the will of the individual. People struggling with addiction are severely disabled in their ability to will their own behavior. (In fact, May goes so far as to say that addiction feeds and grows on the addict's attempts to use his or her will

to control it.) So, if we tell alcoholics that they must increase their willpower to stop drinking, then that is similar to telling a ballerina to dance on her broken leg to improve her routine; we are asking them to use the damaged part of themselves to fix the damaged part of themselves, which is a recipe of disaster, frustration, guilt, shame and failure.

How to Help an Addict

It seems that many people think that what the person struggling with addiction needs is "tough love." Depending on the situation, this may be true. However, it must be remembered that the main emotional experiences of such people are guilt and shame. The self-justifying, lying behavior displayed by many addicts (which makes it hard to have compassion on them) is really their way of trying to avoid the intense shame they feel for their behavior. Studies have shown that supportive, empathetic therapy brings more of a decrease in addictive behavior than confrontational therapy.

Though one must be compassionate and supportive, it must be remembered that you cannot make the other person change. To use a cliché, they have to

want to change. And even when they do, a HUGE part of recovery is relapse. For this reason, people struggling with addiction cannot make promises. Do not ask them to make a pact or promise with you not to drink (or not use drugs or look at pornography). Their failure at upholding such an agreement (which will probably happen) will just increase their experience of shame and make it harder for them to come back to you in honesty.

We must also avoid enabling the person struggling with addiction. Supporting the person but not the addiction is a difficult line to walk. No one gets it right 100% of the time. One of the hardest things for those trying to care for individuals struggling with addiction is watching them ruin their lives (as often happens). We can do what we can to care for them, but we cannot take responsibility for their decisions.

How should you refer a person who suffers with addiction? Research shows that the combination of group therapy (AA, etc.) and individual therapy can be very effective. Recent research is showing that an increase in a person's spiritual well-being coincides with a decrease in substance abuse. Experiencing the transcendent (through prayer or meditation) and adding purpose and meaning to life all seem to help reduce the frequency and intensity of substance abuse behavior.

Conclusion

Unfortunately, to truly understand addiction one must go through it. It is a unique, torturous journey that so often seems hopeless. However, there is always hope, no matter how many times a person "relapses" or "falls." The only real failure in addiction is giving up the struggle against it altogether. So, if a patient, client, friend, parishioner, or family member is struggling, remember, that means they are still engaged in the healing process.

Suggested Resource

Addiction & Grace, (1988), by Gerald G. May, M.D., Published by HarperSanFrancisco.

introducing

Our New Team Members!

Vital Sources has grown in the past year! We have hired two new therapists. Both come to us with a wealth of experience and education. It is very important to us at Vital Sources that 1) we provide high-quality, professional psychological services and 2) our team here functions like a family. Both Jeeyoung and Mary-Eileen are excellent therapists that fit very well into our "family."



Jeeyoung Ahn, Psy.D.

Jeeyoung (G-young) is a psychology associate specializing in child and adolescent clinical psychology. She earned her doctorate from Wright State University in Ohio and has completed post-doctoral training as a Child Psychologist. She has a passion for helping children and their families find strength and stabilization through the challenges of life. Jeeyoung engages quickly and easily with children and teens and you will find her a strong ally for your family.



Mary-Eileen Hahn, M.S.

Mary-Eileen earned her M.S. degree from Loyola College of Maryland. She earned her B.S. degree in Psychology from James Madison University, Virginia. Client work to date includes helping clients to navigate life transition issues, anxiety and depression struggles, work/life satisfaction issues and relational concerns. M.E. has a passion for and willingness to journey with clients through a model of self discovery; encouraging all to discern their unique and individual areas of challenge and strength while developing healthy coping skills that lead to wholeness and healing with a hopeful outlook to the future. Her training integrates theology and psychology supporting her willingness to incorporate Christian spirituality in her work.

Life can throw a number of difficulties our way.

Vital Sources helps people struggling with...

- Intimate relationships
- Managing emotions
- Recent losses or traumatic events
- Marriage or family issues
- Moving forward in life

ASSESSMENT SERVICES

We offer assessment services for children, teens and adults who are wrestling with...

- Academic struggles
- Attention and hyperactivity difficulties
- Social and emotional difficulties
- Parenting and family issues

THERAPY SERVICES

We offer therapy as an effective way to help restore and enrich lives. Our highly trained therapists work with...

- Adults
- Couples
- Families
- Teens
- Children

