

Rehabilitation for Drug Addiction: Physical Dependence and Recovery

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Commentary

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Drug rehabilitation is the process of treating a person's dependency on psychoactive substances such as alcohol, prescription medications, and illicit drugs like cannabis, cocaine, heroin, or amphetamines by medical or psychotherapy means. The main goal is to empower the patient to address any substance dependence they may have and to cease abusing drugs in order to prevent potential psychological, legal, financial, social, and physical repercussions.

Medication for depression or other problems, professional counselling, and interaction with other addicts are all part of treatment. In many drug rehabilitation programmes, psychological dependency is addressed by attempting to educate the client new ways to interact in a drug-free environment. Patients are often advised to avoid hanging out with friends who still use the addictive substance, and may even be obliged to do so. Twelve-step programmes encourage addicts to analyze and modify behaviors that are connected to their addictions in addition to quitting drinking or using other drugs or alcohol. Several programmes place a strong emphasis on the fact that recovery is a never-ending process. Complete abstinence is encouraged rather than attempts at moderation, which could result in relapse, for legal drugs like alcohol.

Addictive chemicals alter the chemical structure of the brain, and these modifications last for a long time after a person stops using. Treatment is crucial to the rehabilitation process since this alteration in brain structure raises the chance of relapse.

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Residential treatment (in-patient/out-patient), neighbourhood support groups, long-term care facilities, recovery or sober homes, addiction therapy, mental health services, and medical care are just a few of the programmes that can help with drug rehabilitation. Some rehabilitation facilities provide age- and gender-specific programmes.

The idea of recovery in drug rehabilitation is still debatable and arbitrary because there are no set measures for measuring it. The Betty Ford Centre defined recovery as achieving total abstinence as well as personal wellbeing.

The Recovery Model was born out of the US psychiatric survivor movement, which argues that receiving a certain diagnosis can be humiliating and disempowering. Other treatment programmes focus on remission or a cure for drug use, however the recovery model employs a humanistic approach to help people deal with addiction. Some characteristics of the recovery model include social inclusion, empowerment to overcome substance use, a focus on the client's strengths rather than their weaknesses, and aid in leading more fulfilling lives even in the midst of addiction symptoms. Another crucial component of the recovery model is the collaboration between the client and the provider in developing the client's abstinence strategy. The recovery model states that a programme is specifically developed to meet each individual's needs.

Integral theory is a four-part approach that is used in the recovery model and places an emphasis on the person, society as a whole, as well as internal and external influences. The four Integral Theory quadrants that correspond to each one are Consciousness, Behavior, Culture, and Systems. The first quadrant focuses on the neurological aspect of addiction. The second quadrant focuses on developing self-worth and a sense of community, sometimes through faith. Healing "eroded relationships" brought on by active addiction is the main goal of the third quadrant. Dealing with significant drug-related consequences including unemployment, legal troubles, or eviction is frequent in fourth quadrant.