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| Speak Up- KōrerotiaOvercoming addiction7 September 2016 |
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| Male | This programme was first broadcast on Canterbury’s community access radio station Plains FM 96.9 and was made with the assistance of New Zealand on Air. |
| Female | Coming up next conversations on human rights with “Speak Up” – “Kōrerotia”, here on Plains FM. |
| Sally | E ngā mana, E ngā reo, E ngā hau e whāTēnā koutou katoaNau mai ki tēnei hōtaka: “Speak Up” – “Kōrerotia”. Tune in as our guests “Speak Up”, sharing their unique and powerful experiences and opinions and may you also be inspired to “Speak Up” when the moment is right.Kia ora nau mai haere mai, welcome to “Speak Up” – “Kōrerotia”. Today we’re discussion overcoming addictions. I’m particularly interested in this topic, it’s something I know very little about so I’m looking forward to learning heaps. And to help me do some learning is my co-host Mallory Quail, Mal if you could tell us about yourself please.  |
| Mallory | Hi my name is Mal and I’m currently a student at University of Canterbury studying Psychology. Before that though I worked in addictions as an addiction counsellor and I’m really looking forward to today’s topic.  |
| Sally | And thanks for suggesting the topic to me, too. And now we’ve got three guests with us in the studio today. Marg, how about we start with you? |
| Marg | Hi my name’s Marg, I’m a recovering alcoholic, I had four days short of two years’ sobriety and then sadly relapsed in February of this year but I was able to get help for my addiction again and I’ve been sober since then and taking each day as it comes, very happy to be sober.  |
| Sally | And thanks as well for being courageous enough to come on the show, I think that’s a pretty big deal.  |
| Marg | Thank you it’s nice to be here.  |
| Damian | My name’s Damian Holt, I’m a consumer advocate and peer support worker working for MHAPS in the Central City.  |
| Sally | Maybe you could just tell us what MHAPS stands for?  |
| Damian | MHAPS stands for Mental Health Advocacy and Peer Support and we work with anxiety, mental health, addictions and we run a programme called Recovery Works and we have a lot of evening themes and day programmes including mood swingers and all sorts of activities for people to be able to come and share the pressures they’re under with life.  |
| Sally | So do people just show up at the door?  |
| Damian | Yes they do and they generally get signed up and the people know what the groups are and they attend those groups and there’s a small fee for some and yes, it’s just a place to be understood, be with people where they’re understood.  |
| Sally | And Doug, our final guest.  |
| Doug | Kia ora koutou, Doug Sellman, I’m director of the National Addiction Centre here at the University of Otago here in Christchurch, I’m a psychiatrist and addiction medicine specialist. I’ve been working in the addiction treatment field since….well I put down to 1985 when I was senior registrar training to be a psychiatrist here in Christchurch and I’ve worked in the addiction treatment field since that time.  |
| Sally | You’re going to bring I think a very longitudinal perspective to the conversation.   |
| Doug | Hopefully!  |
| Mallory | So what is addiction? What does the word addiction mean to you guys?  |
| Marg | Well for me it is an uncontrollable desire to have a substance that doesn’t agree with me. I’m allergic to alcohol but the addiction, when it was rife, I felt I had to have wine, I had to have some form of alcohol. At times I needed to have a wine before I got on a bus to go to the dentist, to do anything. I’d get nervous and upset, it got to the stage where my self-esteem was very low and I felt I needed to drink to be able to go to a function, sometimes even just for daily activities. And it was very powerful. My son said to me at one time just prior to my stopping drinking - I was begging him to get me a drink and I said I really, really need a drink, I was in tears - and he said you don’t need a drink mum, you want a drink. And I went two days in that desperate state of absolutely desperate to have a drink, wasn’t able to have one, I had no money, no-one would get me one and I suddenly just thought I can’t do this anymore, there’s more to life than this, I don’t need a drink I want a drink. So it was pretty hard for a few days but as I say I went almost the two years and had wonderful life. My family got to trust me again, I was able to be the old Marg back again, it was a big relief for me and certainly a big relief for them as well.  |
| Doug | I think Marg has put her finger on it in terms of what addiction is, there develops this great compulsion to do something that another part of yourself really doesn’t want to do because you know the consequences and it’s this tension between really feeling you need to do something and really not wanting to do it. Some people have described the process as moving from liking to wanting to needing because not everything you like is an addiction but as the process develops over time - as you move from liking something to wanting something and then from wanting to needing it to feel normal - that’s the measure of when addiction is descending on a person.  |
| Marg | Absolutely.  |
| Damian | I think for me personally, addiction is such a controlling disease to have because addiction is so controlling that personally one has a lack of self-control, of self-regulation and also of control over one’s own destiny. I talk a lot about default mode and what we do as addicts - because I’m also a recovering addict myself - we return to default mode that we’ve learnt an addiction which nine times out of ten has really bad consequences and being sucked into those consequences is a form of lack of control or compulsion from the substance is for me what the face of addiction is.  |
| Mallory | Is that default mode do you mean just using the substance?  |
| Damian | Instead of dealing with life’s issues of nice terms. The default mode is I’m going to get wasted tonight and I’ll deal with it tomorrow. Well you don’t deal with it tomorrow, another issue occurs and you do the same default mode and then you keep on putting yesterday’s on to today’s on to tomorrow and eventually the pile of unaddressed issues will just tip the scales.  |
| Sally | Doug, you spoke about that progress from liking to wanting to needing, what is it that I guess causes addiction? So what is it that makes you go from just liking something or just wanting something to really needing it?  |
| Doug | Well I think for any one individual there’s a whole range of factors that can determine it but anything that is compelling - we are pleasure seeking animals so there are many pleasures in the world - but for one reason or another certain pleasures hit the spot for certain people and there’s undoubtedly a genetic element to that, there’s a great early learning element to that, whether the addiction be alcohol or other drugs or food or gambling or any range of compulsive behaviours, they can hit the spot in terms of what Damian’s just said, they allow the person to dissociate from the stress of life.  |
| Sally | I’m seeing lots of nodding going on.  |
| Marg | Yes it’s so true. I know when I picked up a drink after the two years I went out to the garage to the fridge to get a non-alcoholic drink, there’s always ginger beer or lemon lime and bitters or some sort of fruit juice, some non-alcoholic drink and there happened to be a bottle of wine there and without… I wasn’t stressed or anything but it was there and without hesitation off came the lid and I was halfway down the bottle still out in the garage without even thinking. I don’t know yet having to try and explain why I did that, I didn’t really know, it was because it was there and it was almost I suppose I felt justified in having a drink because I’d done so well and I’d had so much praise from my family and friends, they were so thrilled to see me well and happy and that was just the beginning of a very nasty relapse that went on for a week and I very quickly became unwell, very emotional and of course I felt so bad about what I’d done that I was giving myself a really hard time and I was being told you’ve relapsed, get back on the horse and ride again sort of thing. It was quite difficult to do that, I didn’t want to drink anymore but the shame I felt, the guilt I felt was really quite unbearable at times. But in a way I feel thankful that that happened because it reassured me that my addiction is still very much alive and well, doing push ups waiting to pounce when I’m vulnerable and it always will be. So it was a difficult way to be reminded of that but it’s something that I won’t forget in a hurry.  |
| Mallory | Do you think those feelings of shame and guilt - I think you mentioned that too, Damian - are tied into addiction and addiction and its processes?  |
| Marg | For me definitely, I always felt very ashamed that I’m the addict and I’ve lost a lot of years through my addiction, I have four beautiful children, unfortunately I can’t say they haven’t been affected because obviously they will have been in some form or other but they’re wonderful children, I’m very proud of them and I just guess I want to remain sober but I want to keep being a positive helpful healthy mum and wife which I wasn’t while I was drinking. There’s certainly a lot of shame and guilt. My behaviour whilst I was drinking, some of it I’m quite ashamed of, the dishonesty, I used to hide alcohol and deny that I’d drunk it; say I’d only had one bottle where in fact I’d had three and it’s not me. That’s not the normal me, to be dishonest, so it didn’t sit right with me. But I’d have another drink and wouldn’t worry about it so much… Vicious cycle.  |
| Mallory | Yes similar to what you were saying Damian.  |
| Damian | Yes well it takes such a small thing to lose a person’s trust and it takes a long, long time to regain it and when you put relapse into the mix and what that happens is it comes back to us. Self-stigma is a huge, huge part of getting better. I think many times I’m like I can’t be bothered trying because I’m just going to fail at this as well like I did last time - because if you hear something from somebody else often enough you will start to believe it yourself so that’s a real barrier.  |
| Mallory | That sort of self-sabotage comes into play as well.  |
| Damian | Absolutely and we’re really good at self-sabotaging without anybody telling us.  |
| Sally | Well this seems like a good part to have our first break and I think we’ll get back into this discussion of how do you try and face and eventually overcome these addictions. We’ve got a song – ‘Feel Good’ by the Gorillaz - which was suggested to us as a good song for recovery.  |
|  | **MUSIC BY THE GORILLAZ – FEEL GOOD**  |
| Sally  | Nau mai haere mai, welcome back to “Speak Up” – “Kōrerotia”. We’re speaking with Mallory Quail – my co-host, Doug Sellman, Damian Holt and Marg Brown about overcoming addictions and we’re just going to kick off this segment by, I guess, continuing on the conversation about facing those barriers and trying to confront some of them. Why can’t people just stop?  |
| Marg | I’d like to understand that more and I’m sure Doug will have some input. Many times I wanted to stop. I remembered vividly my sister saying to me, Marg all you have to do is not drink and if it were that simple… Every time I tried to stop something told me that I couldn’t cope with life without it, it was my crutch and I needed it to be whatever I thought it made me be which is not true at all and I don’t like the person I became when I had too much, a little bit was alright. So for me it was too scary to stop, I really felt I had to… I tried to cut it down and I was convinced that I would always need to have a little bit but I just wouldn’t have too much but it never worked like that, I always had too much, it progressively got - as I say - from one bottle to three bottles before lunchtime and then of course I was argumentative or tearful, emotional for the rest of the day and when I look back now I lost a lot of days, weeks, months, years through my addiction and if only I could have just stopped… I felt I had to have that alcohol to function.  |
| Doug | I think one of the intriguing things about addiction is we’re getting to understand addiction and Marg’s story - you describe it so clearly, it’s wonderful - it’s informing us actually about how the human brain works. It’s almost like we’ve been brought up to think something that’s not actually the case: that our behaviour is guided by our conscious thinking and in fact our behaviour is motivated almost always by deeper things within us so that when a person has developed an addiction they’ve developed a very sticky compulsive habit, a set of behaviours that have been learnt over and over and over again and I think Mal used the term automatic before when we were discussing and that’s right, it becomes an automatic, very well-trod path that can get sparked off by a whole range of things simply feeling. Good things and negative things can spark off an addiction once that habitual behaviour has become engrained in the brain. And so coming back, Sally, why can’t people just stop? Well people can’t just stop because they’ve got a programme in their brains that’s been driven actually by some of the most powerful machinery in our brains which is our survival instincts, our limbic system and some people have described addiction as a hijacking of that machinery in our brains so it’s a hijacking of our instinctual survival mechanisms so that people start to behave, their addictive behaviour, as if their lives depend upon it and there is that fear of stopping it because something in the brain is saying it’s going to be really bad if you stop doing this.  |
| Marg | Exactly. |
| Damian | Wow what an amazing picture to paint, that’s awesome. I think it would probably answer why there’s such a history of relapse and also the lack of acceptance, I mean we know that what we’re doing is wrong, we know it’s not making us go any further but that pre-programming and that addiction - doing press ups in the corner - it’s saying to us no, no, this will be OK. So it’s a lack of acceptance. I think for me half the battle was won when I put my hands up and said actually I can’t do this anymore and please can somebody help me to navigate my way out of this? And that’s when I believe I beat that mechanism or at least put the brakes on it and used an engineer - if we’re to go into that analogy - to help me through now that the machine is broken, to help me survive through.  |
| Doug | Well a whole new set of behaviours have to be worked on and that’s what recovery is all about, working on a whole new set of behaviours that ultimately will trump the old addictive behaviours.  |
| Marg | It’s rewiring your brain. I’m a great believer - and I think for me especially - that for recovery you have to have the want. I believe no pill or counselling or anything will help unless you first have the want and then these other things are such an advantage. But I didn’t want recovery for a long time, I didn’t want to be person I was, I didn’t want to be an alcoholic or a drunk and it was only when I made the decision that I didn’t want that life anymore, I wanted to be a better person and I wanted to be well that I was open to anything and everything to help me to find sobriety and learn how to maintain it. It is a daily commitment for me which is why the relapse was a wakeup call that I can’t just… I have Antabuse, I still take Antabuse every evening and I know that if I stop taking Antabuse I’m giving myself permission to have a drink. And I don’t like the idea that I’m dependant on a tablet to stop me but to me it’s my assurance, it’s sort of my back up that I know I’d never drink with Antabuse in my system. I did it once and was very, very ill; I would never do it again. So it is a backup in case there’s another time like when I went out to the garage and there was a bottle there, I hadn’t had Antabuse for three days then so subconsciously I must have… |
| Mal | …slowly building up to the relapse. Do you mind explaining what Antabuse is for the listeners?  |
| Marg | All I know is it’s a medication that, after it’s in your system for two or three days I think perhaps, you’re very ill. I had dreadful headache, dry reaching, very hot one minute sweating and then freezing cold, my heart palpitations, I thought my heart was going to leap right out of my body.   |
| Damian | Can I just interrupt? When reacted with alcohol.  |
| Marg | Yes sorry, that was after I had a glass of wine with alcohol in my system and I’ll never ever forget how very unwell. I thought I was dying, I really did, and so that I know with alcohol in my system it’s just another safety measure for me to… I’d like to think that I just don’t drink anymore but there’s always the fear of that one little time where I’m weak and think one won’t hurt, one will always hurt.  |
| Damian | Do you think there’s going to be a time in the future where your brain will be - in your words - rewired your brain, which is a fantastic analogy and works in with what Doug was saying - that your brain will be in a new default mode that doesn’t drink and that you won’t need to have Antabuse?  |
| Marg | I would like to think that, Damian, yes, it would be great to and I think sometimes it is there and then there might be just a day where I just feel a little bit vulnerable. Some bad news… we did have some sad news in our family, I took it on board, I couldn’t really do too much about it but I worried about it and at a time like that I just don’t know how strong I would be because in my mind still thinks if I had a couple of drinks it would ease the pain that I’m feeling and not think further to consequences.  |
| Doug | I think that’s a good way of describing the use of Antabuse, it’s other name is Disulfiram, that initially taking it for an extended period of time like nine months or two years or something in that region, something that suits the person and then using it for high risk situations and the high risk situations could be a wedding or a tangi or an overseas trip or something like that, starting up the Disulfiram three or four days before the event and then just continuing to take it through that event.  |
| Sally | Is it, Doug, specifically for alcohol?  |
| Doug | It is, yes, it works… It actually interferes with an enzyme which helps break down alcohol and it actually means that if you drink alcohol you get a build-up of one of the metabolites, it’s called acetaldehyde which is even more toxic to the brain than alcohol is and Marg gave a very good description of what happens when you get that build-up of acetaldehyde in the body, the flush reaction.  |
| Sally | For people with addictions other than alcohol addictions, are there similar types of drugs that they could take that might create the same sort of… |
| Doug | No unfortunately there isn’t. There are medications which can block the effect but the great thing about Disulfiram is that it actually produces a negative reaction and that is quite a powerful thing. But as Marg already said, there has to be a want. So taking it every day, the best way of taking Disulfiram is it’s supervised by someone who is chosen so it’s outside the person’s own control and sometimes that’s a pharmacist. I’ve got several professionals who go to the pharmacy on Mondays, Wednesdays and Fridays and take… you’re taking it every day aren’t you, Marg? Some of these professionals are taking it 400 double up on… taking 400 on Monday, Wednesday and Fridays because it continues to act, you don’t need to take it every day but I think for many people it’s actually a really good thing to take every day because it’s like a daily commitment, it becomes a symbol of recovery.  |
| Mallory | And could that also be a sign of relapse if you notice that you stop taking if you do take it every day, it’s like thinking I want to drink in three days’ time so I’ll stop? |
| Damian | I call it a safety belt and it’s fantastic in a crash but it’s no use if you don’t wear it. And the thing with addiction - and Marg’s really touched on this - it’s a devious little thing, addiction, and with Marg going into the fridge and picking out that bottle of wine and not realising, she could also not purposefully but not… Addiction will say don’t take that Antabuse today and if you’re not vigilant enough all of a sudden a couple of days have gone by and then you realise oh a couple of days have gone by, either “Crikey I should get onto it” or a couple of days have gone by: “Hmm…I’ve got a one spare day here.”  |
| Mallory | That wee window of opportunity.  |
| Marg | Yes.  |
| Sally | Just to interrupt the conversation again, we’ll have our next song. Doug you chose ‘Isn’t it a Pity.’ Was there a reason for that? |
| Doug | Well I’m just thinking of the words: Isn’t it a pity, isn’t it a shame how we take each other’s love and cause each other pain. I thought there were some words there that were quite apt to our discussion.  |
| Sally | And I think we’ll probably pick up on those themes of how does it impact upon others as we move forward.  |
|  | **MUSIC BY GEORGE HARRISON – ISN’T IT A PITY** |
| Sally  | Nau mai hoki mai, welcome back to “Speak Up” – “Kōrerotia”. I’m your host Sally Carlton and today my co-host Mallory Quail. We’re with Doug Sellman, Damian Holt and Marg Brown talking about overcoming addiction. We just finished up very loosely touching on how addictions impact on others and I think that would be a great place to pick up this conversation. You’ve seen it from a lot of different perspectives so I’d be keen to hear about the personal level and the professional level as well.  |
| Marg | Well I personally can start that I’m extremely lucky to have the husband I have and the children that I have. My husband, the last time when I relapsed he did actually say he couldn’t take it anymore, he was sort of thinking that I was right back into it and going to continue and he just couldn’t mentally or physically cope with anymore. It was extremely difficult when I was difficult, I would be very unwell, refusing to get help. They sectioned me two or three times because they were quite frankly thinking I was going to die and I possibly was going to do die.  |
| Sally | Just to interrupt sorry. What is sectioned?  |
| Marg | Section 9 which is when a family member or somebody close to you can have you sectioned for two years which means I went to Nova Lodge, you have to go and… |
| Doug | It’s a Court Order, a committal under the Alcoholism and Drug Addiction Act.  |
| Marg | And while my drinking, my serious drinking, my damaging drinking didn’t start until later on in my life and I always said my children hadn’t been affected, I believe they have. They’re not drinkers themselves, they don’t have any form of addiction thank God, but I think the trust issue… If I happen to be having a sleep in the afternoon when they come around the first thing they’ll ask my husband is, “Is mum alright? Is she having a sleep because she’s tired or?” Just those bad memories of when I was drinking. So there has been some damage done there I believe but they’re thrilled that I make a commitment each day to remain sober and it’s brought so much happiness into the family. I’m very grateful to them for standing by me, encouraging me and supporting me 100%. A lot of men would have walked out long ago so I’m very, very lucky.  |
| Sally | I guess something that comes to mind is how much harder would it be without having that kind of support and maybe Damian as someone who supports people you probably see that. |
| Damian | Yes I do particularly a lot of the work I do is around generally mothers that have had their children removed and the children have gone to the fathers’ care and protection and they’ve separated and all of a sudden it used to be a family unit and all of a sudden they’re on their own and you know… “I’ve got nothing now so I might as well just drink.” So it makes it really, really hard, that’s a real big barrier right there. But I’d like to turn it around because that’s quite a negative outcome and I think: Right now you’ve got everything taken away, you can concentrate wholly 100% on getting well to get yourself fit enough to fight this and get yourself ready and your house ready to not only fight for your children to come back but your children to come back in a much healthier environment because children come first but before anything, the individual comes before any children because I work with a lot of people saying it’s all about my children. Well that’s beautiful but you need to be absolutely on your game for the children to benefit from that.  |
| Marg | Exactly.  |
| Sally | We have spoken about children being taken away and I guess that’s Child, Youth & Family. Are there other kind of barriers in terms of systems to overcoming addiction?  |
| Damian | I’d like to talk a little bit about self-stigma. I think one of the big barriers is within ourselves whether that be through a history of relapse or a lack of future thinking which is something that I really, really suffered from because of the substance that I was taking, I only really saw through to the next pay day so I couldn’t actually imagine myself on a waiting list and going through a residential programme, which is going to answer your question. One of the hardest things I do in my job is I have people coming to me and saying that’s it, I’ve had enough and I’m going fantastic you’re half way there, let’s get you hooked up and get you ready for the residential but I’m sorry but the first bed won’t be available until 27 November and they go oh mate I might as well go off and party but I try to make it really… And there’s nothing we can do about that because there are a limited amount of beds. Unfortunately there’s a lot of people with addiction in Christchurch - well globally but I’m talking about Christchurch, that’s where I work and live - and there is going to be a waiting list. So that is an answer to your question, that is a huge barrier, it’s not intentional it’s just the way of the world unfortunately.  |
| Mallory | And maybe even fear of having to tell the employers as well so if you want to go into treatment you’ll have to get time off work and therefore they might have to tell the employers and then worry about what they think and if their jobs secured.  |
| Damian | And most likely telling an employer who you’ve had 27 days of absence in the last six months always on Monday and they’re going oh yeah, tell me why I just don’t get another guy in to do your job who is not going to give me as much grief - which is the discrimination.  |
| Doug | We have an enormous stigma towards people with addiction, it’s sort of the modern day leprosy, and I think that this is a huge barrier to people getting treatment, it reflects in the resources being given to treatment services. I think it reflects on people… It makes people with addiction feel even worse because they have a disorder for which they’re being judged by ordinary members of society.And added to that: we’ve focused on alcoholism which is really good because that’s one of our most serious addictions in New Zealand. When people go to the supermarket to get their ordinary groceries they’re confronted at the front door by shelves of highly discounted alcohol. I’ve made an educated guess around the number of people with compulsive alcohol problems in New Zealand and it’s possibly around 140,000 if not more, that’s an enormous number of citizens in New Zealand who are having to confront ordinary public spaces like supermarkets on a weekly basis. So we’re setting people with alcoholism up for failure, not only through the stigma but by the way we arrange our ordinary grocery item buying.  |
| Damian | And in addition to what Doug just said, the wait time in the services, quite often the people in that wait time, the people in the beds in the service are returning second, third, fourth, fifth time because they all have to go to the supermarket to buy their bread and they’re battling… They’ve got some time up and then go back to Marg’s fridge situation, they’ve gone in there for bread and celery and they’ve walked out with bread, celery and a bottle of wine for $4.99.  |
| Marg | And seeing that bottle of wine, my mind would be thinking I’ll take that because that’s a Jacobs Creek, that’s not too bad and it’s only $7.99 and I’m not taking it because I want it in case a friend comes around for dinner and already then that self-talk is just a load of rubbish because the reason it’s going in the basket is because I’m going to drink.  |
| Mallory | And you’re justifying it.  |
| Marg | Yes and if somebody stopped me and said oh good lord you’ve bought a bottle of wine I’d be horrified, I’d say oh it’s not for me and go into this great long story as to why I purchased… And I’d be feeling terribly guilty but deep down a wee thrill there because there’s a bottle there if I really, really want it.  |
| Damian | I think to put it into a different scope: If you’re on a diet and you walk in and there’s four large chocolate bars for $3 you go “Cor, that’s a bargain, too good for me to walk away from” and all of a sudden you’ve got four blocks of chocolate and you’re on a diet! |
| Sally | It sounds to me you’re talking about temptation plus accessibility.  |
| Damian | Yes absolutely. |
| Sally | And that dangerous combination.  |
| Mallory | Would that also be another barrier to getting help, just turning away from alcohol for a bit to other drugs? So people might have to give up a lot of friends who are using because they don’t want to be around that temptation all the time?  |
| Damian | Yes well if we’re going to go back to the rewiring the brain, the rewiring the brain is also rewiring your personal circumstances and your whole lifestyle really and you think they’re 40 friends but they’re actually 40 acquaintances and you can’t imagine somebody that’s not of that ilk being friends with or you might even think if I shed these 40 people maybe I’ll never ever make another friend in my life. And it’s a lonely road because at the end of the day we really are doing this for ourselves and that’s a tough call, put me in charge of myself well crikey, I haven’t done a very good job so far! And that comes right back to self-stigma again, I can’t do this and that’s really, really hard.  |
| Doug | The wonderful thing about addiction though is that recovery is possible and many people do recover. It sometimes feels like cancer, that there is no hope but that is the wonderful thing about this field and not only is recovery possibly but as people recover, in order to recover you’ve really got to get to the depths of yourself as a person and words like spiritual renewal or a renaissance of values in your life, people tend to become better people, better than they have perhaps every been. So people in recovery are wonderful models of how to be a good human being.  |
| Damian | I’d like to add to that, personally I’m in recovery as I said earlier on and the first two or three years were really, really hard but I was forced to put a really, really strong foundation down and I’ve been clean and sober for 16 years without any drugs or any alcohol and people say to me “How often do you think about your recovery?” and the reality is I don’t actually consciously think of my recovery at all these days, all I do today is what I did yesterday because yesterday worked and then all I’m going to do tomorrow is what I did today. And I’m not consciously thinking about one day at a time because I’ve been in a great position to change my default mode and to bring the stuff that Doug was talking about out to the forefront and it took a lot of work, it’s probably one of the hardest things I’ve ever had to do in all my life and the rewards are just being able to live today like I did yesterday because I didn’t get it any trouble yesterday so if I don’t get into any trouble today it’s a good day! Yesterday was a good day so today should be the same.  |
| Sally | Damian I suspect that probably ties into the song that you’ve chosen which is ‘Bliss’ by Th’ Dudes, was there a reason?  |
| Damian | Oh absolutely, this is such a serious thing, addiction, you know, but I do have a black humour and the chorus line is “Drink yourself more bliss” and we all know that we can drink some bliss so it’s a tongue in cheek black humour song but the sentiment of recovery is absolutely there, it’s a wonderful thing to achieve.  |
|  | **MUSIC BY TH’ DUDES – BLISS** |
| Sally  | Welcome back to “Speak Up” – “Kōrerotia” here on Plains FM 96.9. I’m your host Sally Carlton and today we’ve got Mallory Quail co-hosting with me. We’re speaking with Doug, Damian and Marg about overcoming addiction and in this final segment my first question to you is this is a human rights show and we’ve been talking about addiction and Doug I think when I first met you, you said I hadn’t considered addiction and human rights together before. I actually think there’s probably quite a lot of parallels that could be drawn so I just open the floor for your comments.  |
| Damian | Well I’m an advocate as I said so I deal with quite a lot of agencies just in my day to day living. The ones that stand out are probably Child, Youth & Family, Work & Income, employers, landlords and GPs. As human beings we’re very a judgemental species and my argument always is give the individual an individual opportunity to either prove themselves or disprove themselves so I spend a lot of time… A lot of my job as an advocate is education and mediation such as walking into an employer’s meeting and saying this guy, the reason he has lost so much time off work and he wants 12 weeks off to go to a rehab is he wants to be a better human being. “Well why can’t he just pull his socks up?” It’s not that easy! And then I educate around how difficult addiction is to try and get some the stigmatic which Doug was talking about earlier, the stigmatic community to see what is actually going on for people with addiction.  |
| Doug | New Zealand is becoming an incredibly unequal place, we’re becoming a little America very, very quickly and addiction within that, even though addiction does span the full range of socioeconomic advantage and disadvantage, there is a bias towards lower socioeconomic people as there is with all disease and disability and problems and when you add to that the stigma around addiction, the resources available for treatment for this disorder are just not there. So I think that there is a real issue of equity on this particular disorder.  |
| Damian | Watching the news the other night and you’re hearing all about poverty and homelessness and I’m hearing a lot of drug and alcohol in it and they’re using the same three words so as Doug was saying it’s a purge on low socioeconomic communities. But as Doug said it covers the range and it’s as hard for a high-flying lawyer, for instance, to put his hand up and say actually I’m an alcoholic because he’s going to lose an awful lot of mana and be judged absolutely. I’d quickly like to touch on the Code of Ethics with DAPANZ which is Drug and Alcohol Practitioners Aotearoa New Zealand and the Code of Ethics is how drug and alcohol practitioners treat clientele with dignity, respect and honesty and stuff like that and I think it’s quite easy for people working in the addiction sector to get what I call the 30 second assessment where your judgement comes in, ah, I’ve seen this guy five times, nothing is going to change and again I go back to that individual and that individual chance.  |
| Mallory | At the moment as well because I think a lot of the time with the high relapse rate people do just give up especially if you’ve got an employer that’s constantly… I mean a staff member or friend that’s constantly doing that cycle, maybe this is the time that they will make that change.  |
| Damian | Because that’s the thing with addiction, we never know when our time is. I was convinced in ‘97 when I came out of Queen Mary I told everybody even a lamppost a couple of times how I was cured and I wasn’t. When it was my time it just arrived. , |
| Sally | This ties into something that I think would be great to touch on before we finish up which is how can other people help out?  |
| Damian | Alcohol Help Line 0800 787 797, that’s the first port of call.  |
| Marg | I think the first thing is to admit that you have a problem to start with, if you have a friend and you can see that someone is… Ask them, “Are you comfortable with where you’re at with your drinking or do you think maybe you have a problem with alcohol?” Depending on the person but recognise if you have a problem and I have a couple of friends who are struggling and talking to me seems to help them, I often get them to come around and diversion is a good thing, go and have a coffee or go to a sale somewhere and take their mind off the urge to have a drink. But being able to listen I think is very important too. Sometimes people I know, you get a quick phone call and it can go on for 30 minutes but you know that person is needing to talk and just be given some encouragement or reassurance.  |
| Mallory | So just being there for someone and letting them know that you care and that they are a good person.  |
| Marg | Exactly.  |
| Doug | I think having an addiction can be an incredibly lonely feeling and just to know that there are empathic people out there who do know what it’s like. About a third of our field, the addiction treatment field, are in recovery themselves so there’s a big dollop of natural empathy within the field. But we haven’t touched on the recovery groups yet and I think that that’s so important. Our treatment field is underfunded, it’s doesn’t have the resources to deal with the range of addictions and the number of addictions but we have Alcoholics Anonymous, Narcotics Anonymous, Gamblers Anonymous, Overeaters Anonymous. We have a range of those and we have Al-Anon for family members and it’s easy to access these groups and they are a wonderful prelude to getting into potentially other form of treatment along the way. But everyone’s recovery is different and I think finding initially someone who you can trust and who you feel will understand, as you say. The difficulty you’re finding yourself in is… It’s there, just reach out. Sometimes it’s your GP and GPs these days are getting better at addiction and understanding the struggle, the immense psychological struggle that people with addiction have.  |
| Sally | I think something that I’ve taken away from this is that it’s all very individualised, everyone has got their own pathway and what might work for one person might not work for somebody else.  |
| Damian | Absolutely which is great because there’s more than one way to skin the cat.  |
| Marg | I actually go to a group 65 Alive every Wednesday, 65 Alive being the age and funnily enough I qualify but it’s a great group, I really enjoy it, we’re all very open and honest and each member in the group… It’s a very friendly group, we all have our own stories and our own situations and if something is bothering you it’s a great place to unload and get some feedback from the group and you come away thinking well that’s what I’ll do and just a bit of encouragement. A wee plug for 65 Alive!  |
| Damian | I think returning to Fellowship, which Doug was talking about, it’s for some people, not for everybody, but one thing’s that available at Fellowship is sponsorship and I couldn’t speak enough highly of sponsorship. The beauty of sponsorship is generally you get to choose who your sponsor is going to be and I got mine through a really, really strong message and I knew he loved me and I knew he was empathetic but I knew that he wasn’t going to take any of my BS that was for sure and that’s exactly what I needed to structure… I was getting information from somebody that had been around for a lot longer than I had and was walking the walk and all I needed to do was to role model from him and then that strengthened my recovery really, really… Can’t speak highly enough of really good sponsorship.  |
| Sally | Well any final thoughts, any final questions, Mal? No.  |
| Damian | Well I just thank you for the opportunity for us to come in here and share our opinion with you guys.  |
| Sally | Well I’d like to thank you very much because I certainly have learned an awful lot today.And I’d just like to remind the listeners out there that we’re on Facebook, we just set up a Twitter account so that’s pretty exciting and just a reminder all our shows are available as transcripts as well if you would prefer to read it. So thank you very much and see you back next time.  |