

Thriving in Recovery: Current Research and Interventions

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The purpose of this article is two-fold: 1) to increase awareness regarding the International Quit and Recovery Registry (IQRR, <https://quitandrecovery.org/>); and 2) to introduce the clinician to basic interventions that can facilitate people in their recovery from addictions enable them to better thrive in life.

IQRR

The IQRR is a project created in 2011 by Warren Bickel, PhD, Director of the Addiction Recovery Research Center (ARRC) at Virginia Tech Carilion Research Institute (VTCRI), to encourage those in recovery from addiction - any addiction - to share their insights and experiences and, above all, what strategies they utilize to stay in recovery. Recovery is a crucial component in the life cycle of addictions, yet with all the research that has been done on addictions and the process of addiction, very little has been done on the recovery process and how to maintain it. Assumptions have been made but until recently no one has asked those of us in recovery how we stay in recovery [I entered recovery for alcoholism in 1991].

The IQRR addresses this challenge by employing crowdsourcing technology to establish, maintain, and grow an unprecedented database on the process of recovery. Registering for the IQRR requires the completion of a comprehensive intake that continues to yield a plethora of descriptive demographics including the standard gender, age, race/ethnicity, income, and education levels. It also obtains data including the registrants' drug of choice, secondary addictions, family addictive history, time in recovery, and perceptions of most effective treatments - both acutely and long-term. To date there have been over 8,000 registrants from over 40 countries [1].

Every month registrants are notified of new psychometric research assessments that include measures and tasks aimed at understanding the characteristics of people in recovery. To date over 120 such assessments have been disseminated and, on average, 150 - 200 are completed monthly.

Social Interactome

A three-year study, The Social Interactome of Recovery, funded by a grant from the NIH/NIDA utilizing IQRR registrants was recently concluded [2]. The hypothesis was that social media may improve relapse prevention therapies for addiction by facilitating social learning. The experiments tested the idea that connecting individuals with shared characteristics using an online social interactome will increase engagement and exploration of resources for recovery maintenance and decrease the rate of relapse among social group members. The foci of the initial articles being prepared examine the experimental assessment of homophily in online groups, the role of contagion in explaining network dynamics, and the influence of neighbors in your activity online.

IQRR Studies

Other studies being currently compiled using IQRR registrants are examining relapse situations, prospective and retrospective memory, temporal discounting variances, alcohol and nicotine relapses, anxiety/depression in alcohol and nicotine recovery, and social isolation in recovery.

My personal research interest is in promoting the well-being of those in recovery, that is thriving in recovery [3]. Well-being for these purposes is measured using the Subjective Happiness Scale (SHS) [4], the Satisfaction With Life Scale (SWLS) [5] and the GRIT Scale [6].

Initial research [7] utilized only the SHS and compared recovery registrants to a general population recruited using mTurk [8]. Those in recovery appeared slightly less subjectively happy, but not with any statistical significance. Because my hypothesis was opposite this finding, research in this area continues.

Time in recovery and well-being

Later all three scales were compared with participants not in recovery but having similar demographics [8-11]. The recovery group was also delineated further into those in recovery less than one year, from 1-5 years, and for those in recovery longer than five years [12]. The only statistically significant difference was that there was an increase in subjective happiness by those in recovery versus the comparison groups. There was, however, a trend showing increasingly higher scores for each scale with length of time in recovery.

A study examining the phenotype of happiness in recovering alcoholics [13] noted there was an increase in the SHS, SWLS, and GRIT scales in alcoholics with more than five years in recovery compared to those with under five years in recovery. Building off the Quisenberry, et al. study [13], a further examination expanded the number of respondents and delineated the recovery respondents into three groups: less than one year, 1-5 years, and greater than five years. While there was minimal statistical significance, the upward trends were again present for all three scales [14].

More recently the SHS, SWLS, and GRIT surveys were re-distributed by the IQRR and all respondents' results (not just recovering alcoholics) were added from the earlier surveys [15]. Again, there was no statistically significant difference between the length of time in recovery and the SHS, SWLS, and GRIT, but there is a definite trend of enhancing subjective happiness, subjective well-being, and grit with longevity in recovery.

These studies constitute results from the IQRR regarding length of recovery and personality characteristics. These data can be used by clinicians to support individuals who are beginning the recovery process and can be presented as a prospect of hope and optimism that the road to recovery will become less difficult and ultimately result in an increased quality of life. This leads us to the second purpose of this paper: an introduction to some interventions and techniques that can facilitate people in their recovery from addictions and encourage enhanced well-being.

Positive self-talk

Positive self-talk is a mainstay of sport psychology. It works on the premise that self-talk creates our self-images, which in turn determine our performance or our behavior. This is a feedback loop - or self-talk cycle [16] - in which the self-talk reinforces the self-image which promotes the behavior; the behavior, in turn, reinforces the self-talk, and so on.

To initiate this intervention, you are required to wear a rubber-band on your wrist for 24 hours. Pay attention to - become consciously aware of - your negative self-talk and stereotypes. Every time you say something negative about yourself (or someone else) then "Snap-it!" Snap the rubber band. Negative self-talk includes, but is not limited to, put downs, sarcasm, ranking, belittling, stereotypes, etc. If you are not sure whether it is negative or not it probably is. So, Snap-it!

After paying attention to your self-talk for a minimum of 24 hours, reflect on the experience. Were you more or less negative than you thought you'd be? Is your wrist sore? Now that you've completed the first part of the 'Snap-it' exercise and become more aware of your negative self-talk (perhaps painfully so), it's time to make it applicable to promoting actual change in your life. Pick an area in your life that you want to change NOW (not this minute, but let's say in 4 - 6 weeks). Once you pick the area then begin to pay attention to your negative self-talk in that area. Every time you say something negative say: "Stop it!" and snap your rubber band. Then say, "I'm not like that anymore, I am ..." (replace with positive image). Continue using the Snap-it! technique until you manifest the change you desire (For a print-out of the instructions visit DrBobReese.com).

An example of positive self-talk is how those in recovery introduce themselves at a 12-Step meeting: "Hi, I'm Bob, and I'm an alcoholic". While it might seem counterintuitive to identify yourself as an alcoholic, it is incredibly important. It is important because prior to that admission drinking was not a choice because I either did not have a problem or did not consider myself an alcoholic. Once I admit to being an alcoholic, then I have to make a choice. I can either drink, or not drink. In this scenario, the recovering alcoholic would Snap it! whenever they think about having a drink or minimizing or denying they have a problem.

Broaden and build

After developing positive self-talk, your clients can be helped to broaden-and-build their positive emotions. Most positive psychology interventions or techniques are based on Fredrickson's Broaden and Build Theory [17]. The broaden-and-build theory states that if we broaden our positive thought action repertoires (joy, love, passion, happiness, optimism, etc.) we will build enduring personal resources (physical, intellectual, social, and psychological). Broadening and building a storehouse of positive emotions has been shown to enhance

creativity, motivation and energy, and physical health. It helps fuel psychological resilience and can have an undoing effect on lingering negative emotions [18,19].

Gratitude

The most important positive emotion for me is gratitude -- in good and bad times. It is the default emotion that I go to whenever things are not going right. Gratitude, quite frankly, is what has kept me sober over the years. It has taken me from just surviving in recovery, through striving to discern who I am, to thriving in life. Gratitude is the emotion I use most often to broaden and build my positive emotion storehouse.

Multiple exercises and interventions involving gratitude have been shown scientifically not only to broaden and build but also to increase enduring happiness [20-22]. One of the most powerful is the Gratitude Letter [20]. It involves writing a letter to someone who had a major positive impact in your life, but whom you may not have thanked appropriately at the time - e.g., a teacher, a coach, parent, spouse, or significant other. The exercise requires you not only write the letter but also hand-deliver it and read it aloud to the recipient. If you absolutely cannot do it in person, then you can phone or Skype the recipient. If the individual is deceased, you can go to the cemetery or mausoleum and read it aloud. This is an incredibly powerful intervention.

Another popular gratitude intervention is the Gratitude Journal [21]. Reflect on the positive events (blessings) for which you are grateful and write them in your Gratitude Journal. Begin by listing three blessings a day. These may be as simple as being grateful for the food on your table or witnessing a beautiful sunset. The idea is to realize the many people and things (blessings) deserving gratitude. If you find you cannot do this daily, at least do it weekly. Build the positive emotional stores.

Savoring

Another great way to stockpile your positive emotions is savoring [23]. Savoring refers to our awareness of pleasure and our deliberate attempt to make it last. Think of it as the opposite of coping. To get started I suggest savoring a portion of a meal [24]. You can do this at home or make it special by going out to your favorite restaurant, or even a fast food eatery. Instead of choosing a wonderful appetizer, a wonderful entree, and a wonderful dessert, choose one - and only one - to be the focus of your meal and savor it without flooding your taste buds with all the others [25-27].

After savoring one part of the meal - savor the event. Peterson ([23], p 71) lists the following Savoring Strategies as a guideline and incorporate as many as are appropriate:

- **Sharing with Others:** Share your experience of the meal with someone (in other words, relive the experience).
- **Memory Building:** Take mental (or actual) photographs or even a physical souvenir of the event to reminisce about later with others.
- **Sharpening Perceptions:** Focus on certain elements of the experience - and block out others.
- **Absorption:** Let yourself get totally immersed in the pleasure and try not to think about other matters - Wallow in the positivity.
- **Self-Congratulation:** If the meal (or part of the meal) is a reward for some accomplishment, do not be afraid of pride - enjoy it. Tell yourself how impressed others are and remember how long you have waited for this moment or event to happen.

I recommend savoring multiple times a day. Make it a habit.

There are many other positive psychology techniques and interventions. You can find some of them in my book, *The 13th Step: Thriving in Recovery* and on my website DrBobReese.com. If you have specific questions, e-mail me at bobreese@cox.net.

Finally, our goal at ARRC is to transform addiction treatment. Help us help others by participating. Also, if you are a researcher we share data! If you want to know more or participate in ongoing research, contact:

- ARRC (n.d.) Addiction Recovery Research Center. <http://labs.vtc.vt.edu/arrc/>
- IQRR (n.d.) International Quit and Recovery Registry. <https://quitandrecovery.org/>
- DrBobReese.com (n.d.) Magis Thinking to Thrive and Flourish. <http://drbobreese.com>
- VTCRI (n.d.) Virginia Tech-Carilion Research Institute. <http://research.vtc.vt.edu>

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