



Choosing The Right Rehab

INSIDE THIS GUIDE YOU FIND INFORMATION REGARDING:

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Go To [DrugRehab.org](https://www.drugrehab.org)

DRUG-FREE LIFE BEGINS WITH EFFECTIVE TREATMENT FOR ADDICTION



MORE THAN 23 MILLION
AMERICANS ARE IN LONG-TERM
RECOVERY FROM DRUG AND
ALCOHOL ADDICTION



The Moment Recovery Began:

"I folded my arms over my chest, longing for comfort, for peace. I was so sick. So sick and tired of it all. In that moment I realized the hopelessness of my situation, and in a sudden, brief flash of clarity, I asked myself: Now what? I stared at the filthy wood floor littered with half-empty beer cans, cigarette butts and used syringes. The answer wasn't here in this room anymore. It was all over. I was done."

— William Cope Moyers, author of *"Broken: My Story of Addiction and Redemption"*

The foundation for a healthy, drug-free life begins with effective treatment for addiction. You may have tried to stop using drugs or alcohol on your own without success. Or, perhaps you've delayed getting help because of anxiety about the treatment process. If your current path is marked by reluctance and relapse, know that you're not alone.

Addiction is a complex, pervasive brain disease and there's no quick fix for a serious substance abuse problem. Like diabetes and other chronic conditions, relapse is common among those affected by drugs and alcohol. But addiction is treatable, and with the right care – which likely will include a range of medical and support services – you can build a remarkable life in recovery.

In fact, there are many personal success stories, and the odds of long-term recovery increase significantly after that difficult first year of abstinence, according to the National Institute on Drug Abuse (NIDA).

At three years of continued sobriety, a person in recovery has a 66 percent chance of sustaining long-term sobriety; if they avoid using substances for five years, the odds of recovery jump to 86 percent, NIDA reports. Currently, more than 23 million Americans are in long-term recovery from drug and alcohol addiction, according to Faces & Voices of Recovery, a national advocacy movement.

A QUALITY TREATMENT
PROGRAM SHOULD HAVE A
MULTI-DISCIPLINARY TEAM
WITH SPECIALIZED TRAINING IN
ADDICTION



LOOK FOR DRUG AND
ALCOHOL COUNSELORS WHO
WILL TREAT YOU IN INDIVIDUAL
SESSIONS

What Makes A Great Rehab?

Today there's an overwhelming array of treatment options for addiction. More than 14,300 public and private facilities offer substance abuse treatment in the United States – including outpatient programs, residential programs and hospital inpatient care for drug and alcohol addiction, according to the Substance Abuse and Mental Health Services Administration (SAMHSA).

So how do you choose the best program for your needs? Drugrehab.org offers these guidelines to help you identify the right care and achieve lasting recovery.

Quality Indicators For Addiction Treatment

Expert, Multi-Disciplinary Staff

Recovery from drug and alcohol addiction often requires a broad range of clinical interventions. To achieve the best results, a quality treatment program should have a multi-disciplinary team with specialized training in addiction. This includes physicians certified in addiction medicine or addiction psychiatry; full-time nursing staff; and qualified substance abuse counselors, case managers and nutritionists.

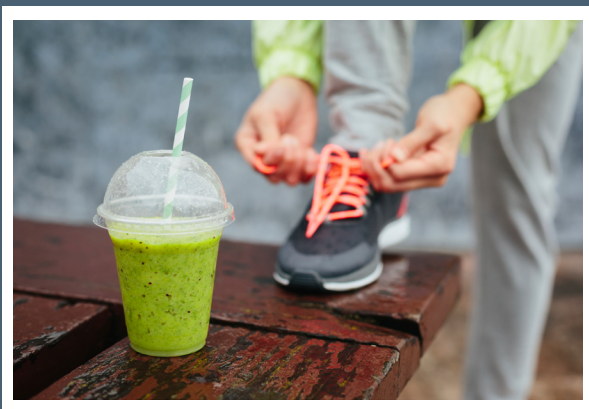
Look for drug and alcohol counselors who will treat you in individual sessions. They should hold, at a minimum, state licensure and certification in their field of practice (education requirements vary widely by state for licensure/certification).

Ideally, counselors will have advanced degrees in their field and proven mastery of treating substance use disorders with credentials from the National Certification Commission for Addiction Professionals (NCC AP). There are three levels of NCC AP certification – based on the professional's formal training, knowledge and skills:

QUALITY PROGRAMS WILL HAVE A FULL-TIME MEDICAL DIRECTOR



SUCCESSFUL REHAB PROGRAMS PROVIDE ONSITE ACCESS TO CERTIFIED NUTRITIONISTS



National Certified Addiction Counselor, Level I (NCAC I) –

Requires three years full-time or 6,000 hours of supervised experience as an addiction counselor, passing score on a national examination for Level I, and other criteria

National Certified Addiction Counselor, Level II (NCAC II) –

Requires a bachelor's degree, five years full-time or 10,000 hours of supervised experience as an addiction counselor, and other criteria

Master Addiction Counselor (MAC) –

Requires a master's degree in the healing arts or related field with in-depth study in substance use disorder treatment. Also requires three years full-time or 6,000 hours of supervised experience, and other criteria

A quality program should have a full-time Medical Director (not just a consultant) who oversees patient care. This physician should demonstrate the knowledge, skills and experience to treat addictions with board-certification from either the American Board of Addiction Medicine (ABAM) or subspecialty certification in addiction psychiatry by the American Board of Psychiatry and Neurology (ABPN).

Successful rehab programs also provide onsite nursing and access to certified nutritionists, who can address any deficiencies or malnutrition related to drug and alcohol use. Case managers and social workers also play a key role, as they can assess family dynamics and advocate for jobs, transportation, housing and support programs needed to sustain recovery.

IT IS ALSO IMPORTANT THAT
TREATMENT BE APPROPRIATE
TO THE INDIVIDUAL'S AGE,
GENDER, ETHNICITY AND
CULTURE



YOU SHOULD ALSO RECEIVE
ONGOING EVALUATIONS
AND MODIFICATIONS TO
TREATMENT AS NECESSARY

Tailored Treatment Plan

"To be effective, treatment must address the individual's drug abuse and any associated medical, psychological, social, vocational and legal problems. It is also important that treatment be appropriate to the individual's age, gender, ethnicity and culture."

— The National Institute on Drug Abuse, Principles of Effective Treatment

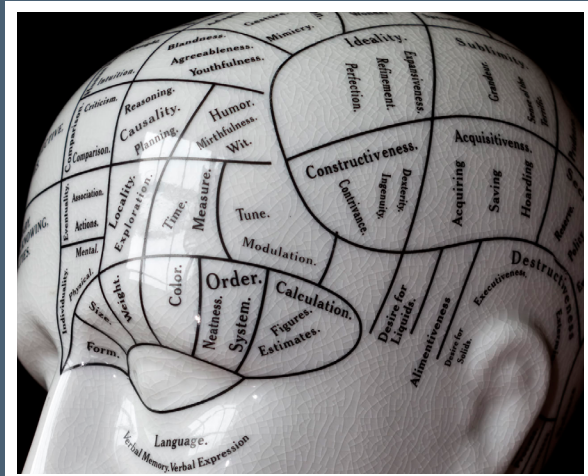
Your unique mental and physical needs should be the focus of an individualized treatment plan. You may require care for other conditions such as dual addictions, depression, trauma, living with HIV or other serious health issues. Any illness that co-occurs with addiction should be part of the treatment plan – along with legal, social or employment issues that could impede recovery.

Effective treatment includes a thorough clinical assessment that evaluates the progression and severity of your addiction, including prior treatment and relapses. You should also receive ongoing evaluations and modifications to treatment as necessary, to address your changing health needs.

Ideally, treatment also will reflect your values and specialized needs. For example, some women benefit from a women-only rehab program, where they feel safer discussing sensitive issues such as sexual abuse or domestic violence.

Other people in recovery thrive with the spiritual guidance offered in a Christian drug rehab center, while others benefit from an LGBT program, where they can talk freely about issues such as gender identity, sexual orientation and addiction. There's no one-size-fits-all treatment that works in rehab, and the best approach is tailored to your level of addiction and unique needs.

NEUROSCIENCE HAS ADVANCED OUR UNDERSTANDING OF ADDICTION



THERE ARE STILL OUTDATED PROGRAMS THAT FAIL TO ADDRESS ADDICTION AS A MEDICAL ILLNESS



Evidence-Based Practices

"As is true of other chronic diseases, while all patients with addiction will not respond equally well to treatment, the provision of evidence-based treatment does increase the odds of success."

— "Addiction Medicine: Closing the Gap between Science and Practice," The National Center on Addiction and Substance Abuse at Columbia University (2012)

Neuroscience has advanced our understanding of addiction as a chronic but treatable brain disease. A person's judgment and behavior are greatly affected by addiction, which alters the physical structure and function of the brain. Today's scientific advances are driving more effective, research-based approaches to addiction treatment.

Unfortunately, there is still a stigma to drug and alcohol addiction, which some people consider a moral failing. Progress is being made to incorporate evidence-based treatment approaches, but in the United States there are still outdated programs that fail to address addiction as a medical illness.

When choosing a rehab center, look for one that uses standard medical practice to treat and manage addiction, like any chronic disease. A certified physician addiction specialist should oversee your care, including stabilization through medical detox if necessary, as well as lab-based screenings, evaluation and a comprehensive treatment plan based on addiction science.

For the best outcomes, addiction experts recommend using a combination of evidence-based treatments such as pharmaceutical and psychosocial therapies. Research studies show this multi-pronged approach can help patients tolerate withdrawal symptoms, maintain abstinence and develop lifestyle and behavioral changes needed for lasting recovery.

BUPRENORPHINE CAN HELP
WEAN A PATIENT OFF OPIOIDS
WITHOUT EXPERIENCING
WITHDRAWAL SYMPTOMS



NALTREXONE IS ALSO USED
TO TREAT OPIOID ADDICTION
BY BLOCKING THE DRUG'S
EUPHORIC HIGH

Pharmaceutical Therapies

These medication-assisted options help ease physical withdrawal symptoms during the acute phase of treatment, and also reduce strong drug cravings. Examples include:

Buprenorphine (Suboxone, Zubslov) – is used to treat addiction to narcotics (opioids) such as heroin or prescription painkillers. Buprenorphine binds to the same opioid cell receptors as the addictive substance, and blocks the drug's euphoric effects. Used correctly, buprenorphine can help wean a patient off opioids without experiencing withdrawal symptoms, and also reduce drug cravings.

Naltrexone (Revia, Depade, Vivitrol), Acamprosate (Campral) and Disulfiram (Antabuse) – are approved to treat alcohol dependence. Naltrexone and Acamprosate reduce cravings/the urge to drink, and Disulfiram produces aversive affects that make alcohol use unpleasant.

Naltrexone is also used to treat opioid addiction by blocking the drug's euphoric high. Vivitrol is a newer, injectable form of naltrexone that is administered just once a month.

Methadone (Dolophine, Methadose) – has been available for more than 50 years to treat opioid addiction. Methadone dampens the "high" associated with the drug, reduces cravings and withdrawal symptoms. Methadone treatment must be done in a structured, medically-supervised program; the medication is dispensed daily and lasts up to 24 hours.

Topiramate (Topamax) – is a drug approved for epilepsy that has been shown to help patients with alcoholism reduce their drinking.

HELPS CLIENTS PREVENT
ADDICTION RELAPSE BY
CHANGING THEIR THINKING
PATTERNS AND BEHAVIORS
ABOUT SUBSTANCE USE



TEACHES LIFE SKILLS TO
REDUCE SUBSTANCE USE

Psychosocial Therapies

These practices help clients prevent addiction relapse by changing their thinking patterns and behaviors about substance use. Psychosocial therapies are well-proven to help those in recovery cope with cravings and high-risk situations. Examples include:

Cognitive Behavioral Therapy (CBT) – teaches practical skills and strategies to help people reframe negative self-talk, cope more effectively with cravings and break habits that lead to addiction relapse. The emphasis in CBT is how our thoughts can have a profound effect on our behaviors. Many research studies and meta-analyses have concluded that CBT is an empirically validated, or evidence-based therapy.

Contingency Management (CM) – rewards patients with vouchers and incentives to participate in treatment and stop using drugs (one measurement is a drug-free urine test). This intervention has been shown in research studies to be effective for a variety of addictions – including methamphetamine, cocaine and alcohol.

Community Reinforcement Approach (CRA) – teaches life skills to reduce substance use. Patients attend CRA counseling sessions, where they learn how to create new social networks, acquire job skills, refuse offers to use drugs, and develop creative pursuits as part of a rewarding, drug-free life. Participation in CRA has been shown to increase employment rates and decrease criminal involvement.

Motivational Interviewing (MI) and Motivational-Enhancement Therapy (MET) – bolster a patient's ability to change behaviors by decreasing their ambivalence about substance use. Studies show that MI and MET increase rates of abstinence and treatment completion.

PATIENTS IMPROVE
THEIR INTER-PERSONAL
RELATIONSHIPS, MAINTAIN
ABSTINENCE AND COME TO
TERMS WITH THEIR ADDICTION



THOSE WHO ATTEND AA OR
ANOTHER 12-STEP GROUP
FOLLOWING TREATMENT HAVE
ABOUT TWICE THE RATE OF
ABSTINENCE AS THOSE WHO
DO NOT



Other psychosocial therapies include group, couple and family therapy. These help patients improve their inter-personal relationships, maintain abstinence and come to terms with their addiction.

In addition, evidence-based practices may be combined with 12-step programs such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), among others. These mutual support programs are a valuable and sometimes lifesaving support for those in recovery from addiction.

“One finding that emerges consistently from the available research is that patients who had been in addiction treatment and then followed up with involvement in mutual support programs fare better than those who do not . . . those who attend AA or another 12-step group following treatment have about twice the rate of abstinence as those who do not participate in these mutual support programs.”

— “Addiction Medicine: Closing the Gap between Science and Practice,” The National Center on Addiction and Substance Abuse at Columbia University (2012)



MEDICAL DETOX IS ONLY THE
FIRST STAGE OF TREATMENT
AND DOES NOT AFFECT
LONG-TERM RECOVERY FROM
ADDICTION



SOME PEOPLE PREFER TO
RECEIVE ADDICTION CARE
IN AN OUT-OF-STATE REHAB
PROGRAM

Adequate Time in Treatment

Patients who stay in **residential drug treatment** for **at least three months** have **better outcomes** than those who have **shorter length of stays**, according to research studies published in the *Journal of Substance Abuse Treatment*.

Keep in mind that medical detox is only the first stage of treatment and does not affect long-term recovery from addiction. Remaining in treatment for an adequate period is critical to success, according to the National Institute on Drug Abuse (NIDA). While the typical rehab program is about 28 days (mirroring insurance coverage), most people need longer to achieve stability and prevent drug relapse, reports NIDA, which recommends at least 90 days in treatment.

“Generally, for residential or outpatient treatment, participation for less than 90 days is of limited effectiveness, and treatment lasting significantly longer is recommended for maintaining positive outcomes. For methadone maintenance, 12 months is considered the minimum, and some opioid-addicted individuals continue to benefit from methadone maintenance for many years.”

— National Institute on Drug Abuse (NIDA)

As a chronic disease, **addiction requires continual maintenance to prevent relapse** and sometimes multiple treatment episodes. Some people prefer to receive addiction care in an out-of-state rehab program, so they can focus on their recovery without distractions.

ONE FAMILY MEMBER
ADDICTED TO ALCOHOL AND
DRUGS MEANS THE WHOLE
FAMILY SUFFERS



FAMILY MEMBERS CAN ALSO
BENEFIT FROM THERAPY TO
RESTORE THEIR HEALING



Family Engagement

Family involvement is a hallmark of quality addiction treatment programs. Research shows that having a strong support network improves the chances of long-term recovery.

Family members can be invaluable, motivating their loved one to complete treatment and helping them regain mental and physical well-being. In the wake of addiction, family members can also benefit from therapy to restore their healing.

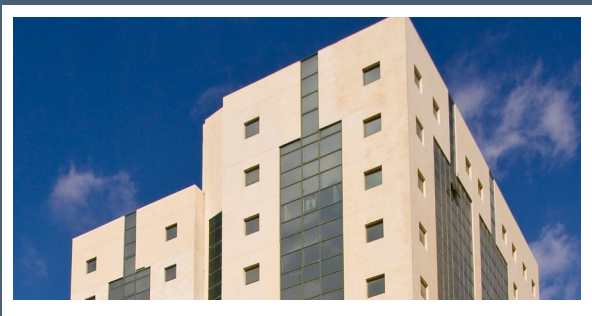
“One family member addicted to alcohol and drugs means the whole family suffers. Addiction is a family disease that stresses the family to the breaking point, impacts the stability of the home, the family’s unity, mental health, physical health, finances and overall family dynamics. Without help, active addiction can totally disrupt family life and cause harmful effects that can last a lifetime.”

— National Council on Alcoholism and Drug Dependence (NCADD)

Ask the rehab center what level of family engagement and support is available. How will the family be involved in the post-rehab recovery plan? Are there opportunities for family education and counseling? (this can be helpful whether the addiction continues or not). Look for programs that help the family learn more effective communication and coping skills (i.e., preparing for relapse, setting boundaries).



A STRONG AFTERCARE PROGRAM SHOULD BE PART OF YOUR TREATMENT CONTINUUM



DRUG-FREE APARTMENTS



Emphasis on Aftercare

A strong **aftercare program** should be part of your treatment continuum, to help you remain drug-free. Aftercare services may include:

Sober living homes

These are **drug-free apartments or other residential facilities** where you live with others in recovery from drug and alcohol addiction. Residents must comply with house rules (i.e., paying rent, staying drug-free) and attend ongoing 12-step or support group meetings.

Alumni networks

Connect you with former rehab patients who are now in long-term recovery and support each other.

Mutual support programs

These well-known peer fellowships help you reaffirm your recovery at regular support meetings. They include 12-step programs such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), and secular organizations such as LifeRing and SMART Recovery.

ASK THE REHAB FACILITY IF
THEY HAVE ACCREDITATION(S)



BE SKEPTICAL OF ANY CENTER
THAT PROMOTES A QUICK
FIX FOR ADDICTION OR HAS
UNREALISTIC SUCCESS RATES



National Accreditation

At a minimum, a treatment facility should have local and state licensure to operate. In addition, a program can demonstrate high quality performance standards through national accreditation.

Be sure to ask the rehab facility if they have accreditation(s), when the facility was last evaluated, and if accreditation was maintained/renewed.

There are two major accrediting bodies for rehab centers in the United States. Both are independent, non-profit organizations that use a rigorous peer review process. Their results are accepted by many states when granting licensure to rehab centers.

The **Joint Commission** is the largest accreditor of health care organizations in the United States (rehab centers, hospitals, labs, nursing homes, etc.). Stringent industry standards for safety and quality must be met for accreditation by The Joint Commission.

The **Commission on Accreditation of Rehabilitation Facilities (CARF)** is the largest accreditor of rehab facilities worldwide, including addiction treatment programs. CARF requires addiction facilities to use "current research, evidence-based practice, peer-reviewed scientific and health publications, clinical practice guidelines and/or expert professional consensus."

Other accrediting bodies include The (international) Council on Accreditation (COA), The National Committee for Quality Assurance (NCQA) and The National Commission on Correctional Health Care (NCCHC).

Since many rehab facilities are not accredited – and there are no universal requirements – you may want to ask a facility how it measures patient outcomes. Be skeptical of any center that promotes a quick fix for addiction or has unrealistic success rates, given the chronic and relapsing nature of this disease.

ALL REHAB EMPLOYEES SIGN A CONFIDENTIALITY AGREEMENT TO PROTECT YOUR PERSONAL INFORMATION



Protection of Privacy

An ethical, quality drug rehab program will protect your privacy and confidentiality. In the United States, healthcare organizations are bound by the Health Insurance Portability and Accountability Act (HIPAA). Enacted in 1996, the federal HIPPA law establishes national standards for securing the privacy and integrity of individual electronic health records, with criminal penalties for violations.

Some people in recovery choose an out-of-state rehab program, in order to guard their privacy. However, **all rehab employees sign a confidentiality agreement to protect your personal information.**

CONTACT US TODAY AT

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(833-473-4227)