

R.Thomas Corbin, Circuit Judge

The father meets the accepted definition of an addict, that is, a person whose use of substances is compulsive, which means she has lost the ability to control her use of substances, as evidenced by the recurrence of major life problems because of her use of substances, such as, [separation from his child, an arrest for possession, etc., (fill in the blanks), loss of his driver s license.] If the compulsive use of substances is not the cause of these major life problems, then some other explanation must be given for each of them.

In other words: *Look at the pattern: an addiction is proven by what a person does, or, addiction is as addiction does.* An addict's life is out of control. Drug tests are not necessary to show the addiction. The addict's life is a life with major life problems over a period of time, problems that have no other explanation than out of control drug use.

Alcohol is a drug and an alcoholic is a drug addict. The accepted understanding of drug addiction, upon which all drug courts are based, is that it is a compulsive brain disease and the addict's brain has been permanently altered by the substances.

There is no cure. There is only recovery and recovery is a process that must be pursued every hour and every day for the rest of an addict's life because a relapse can occur at any time, even after many years of sobriety. The accepted understanding of recovery is that it can be successful in the long term only with help that is outside of the addict, that the addict cannot stay clean by will power alone.

The standard model for drug treatment is a 12 step group and regular attendance at 12 step meetings, which means Alcoholics Anonymous, Cocaine Anonymous, or Narcotics Anonymous, and requires regular attendance at one or all of these. The group gives the addict the outside help to overcome the addiction and stay in recovery. This is the standard model because it works.

Substances of abuse take over the impulsive functions of the brain and weaken the functions that control impulses. The drugs hijack the unconscious, instinctive, "go" functions of the brain and diminish the conscious, thoughtful, "stop" functions. The "go" functions exist to drive a person to seek what is necessary for survival, such as food and water, by making the person feel good or feel better when the object is obtained. The feel good or feel better reward propels a person to learn behaviors that will lead to the needed object. Substances of abuse give immediate and magnified feel good or feel better experiences artificially and take over the reward process in the brain. The drugs propel an addict to learn behaviors that will get more substances of abuse, just like these natural mental processes drive us to learn behaviors that will get us something to eat every day. The search for more drugs becomes compulsive. Careless and criminal behaviors are usually necessary to get more drugs. Drugs are expensive and the quantity needed to feel good or feel better increases as the body's resistance to the use increases.

Lying, deception, stealing and manipulation of well-meaning friends and relatives are means for obtaining more drugs. Friends and relatives who allow themselves to be manipulated enable the addict to continue taking drugs. Manipulating and using people to get more drugs is a drug seeking behavior that addicts learn naturally. As a result, family members and friends break off relationships with the addict because these behaviors are intolerable and continuing the relationship only helps the addict keep on using. The addict ends up associating only with people who are also using because clean people will have nothing to do with them. Careless and criminal behaviors come naturally to the addict and his associates because they cannot support themselves

and their drug use any other way. Still, using addicts deny that they have a problem because self-deception and denial are also necessary to continue using.

The behaviors an addict learned in order to get more drugs are not changed just because an addict stops using drugs. The addict must redevelop his ability to control his impulses and must recognize the self-deception and denial that comes with an addiction. This requires a long term effort with group support. Recovery is a long term process. It is a life long process because the addiction never goes away. The use of substances of abuse changes the brain permanently so that a user unconsciously preserves a memory of how it felt to use a substance. Using the substance, even after years of abstinence, will bring back the old reward and the old compulsion to get more of the substance. It is like eating apple pie after many years of going without it. The flavors bring back memories and feelings that go beyond the taste alone. Memories associated with feelings are powerful and those associated with substances of abuse are overwhelming. A return to the places where an addict formerly used or to the people the addict used with or to the clothes or things an addict had on while using brings back the associated memories and brings back the compulsion and drug seeking behaviors. An addict in recovery can never take his sobriety for granted and he must permanently change his friends and his environment. The effort to stay clean must be renewed every day for the rest of his life.

Generally speaking, an addict who is not in recovery is not likely to take good care of a child because the addict's drug seeking behaviors are more important than anything else, including taking care of a child. A using addict experiences a need for drugs that is like the need a starving person feels for food. Taking the drug brings relief that is like the relief a starving person feels when he finds food. It is difficult for a using addict to think about anything but drugs, just as it is difficult for a starving person to think about anything but food because the "go" functions of the brain drive a person to get what is needed to survive. A demonstrated capacity to provide the child with an environment free of substances is a factor that the court must consider. F.S. §61.13(3)(q). Using addicts cannot provide this environment.

A negative drug test here or there does not establish sobriety and recovery. Addicts learn how to beat drug tests, by masking, purging, substituting, adulterating, and other means. Defeating drug tests is a skill that most addicts perfect as another drug seeking behavior. Nevertheless, a weekly regimen of random drug tests over an extended period of time is very difficult to defeat because the addict does not know when a test will be conducted. An addict who wants to demonstrate sobriety might submit to a treatment program that requires random drug tests.

The provider of the drug test must be qualified. All providers are not equally qualified to collect samples and there is no uniform protocol for analyzing the sample. The qualifications of the professional collecting the sample and the qualifications the laboratory that conducts the test determine the reliability of the test result.

Just as an addiction is shown by a person's conduct over a period of time, recovery is proven by an addict's conduct over time, not by a clean drug test here or there. To recover from an addiction, the addict must change his behavior and must change all of the people, places and things in his life. All of his past associations will unconsciously pull him back to the substances and the addiction, so all of these must be changed.

You will know an addict has changed when the addict changes. Recovery is as recovery does, just as addiction is as addiction does. An addict in recovery is trustworthy, holds a job, has a driver's license, pays his bills, stops being irresponsible, stops acting impulsively, works in the 12 step community, helps other people stay sober, and otherwise demonstrates a clean and sober life.

Denial is the mental process that makes an addiction hard to overcome. Every person lives with some degree of denial, that is, a refusal to see reality. *Minimizing is a form of denial.* Denial is

a natural mental process that allows us to ignore unpleasant facts. In the addict, denial aids and abets the continuing use of substances. The brain is compelled to use the substances because it has been altered and the brain denies there is a problem because the brain must continue using the substances in order to feel well. Withdrawal from the substances is extremely uncomfortable and the brain is compelled to think and act to avoid the discomfort. *So, the addict's brain denies the drug use is a problem.* The addict denies the consequences of the addiction on him, the child, and his family members. The addict does not see the problem. He is in denial that there is any problem at all, despite ample evidence that the addiction is a very great problem for him, as evidenced by the major life problems caused by the addiction. He is defensive and evasive about his lifestyle. Until an addict sees and stops denying the consequences of the addiction, he is not going to get into recovery and stay there.

Southwest Florida Addiction Services, Inc., is the local, nonprofit drug treatment provider. SWFAS provides its services to anyone who comes to them. SWFAS' charges are based on the addict's ability to pay. The standard outpatient model for drug treatment at SWFAS requires a weekly group therapy session. It might also include one-on-one counseling. A SWFAS outpatient program may be from 90 to 180 days. Every participant must also attend 12 step meetings every week and must obtain a 12 step sponsor. Participants must submit to random drug tests at SWFAS. SWFAS uses the same laboratory for analyzing all samples and the laboratory meets accepted standards for analyzing the samples.

If the addict cannot remain clean in outpatient treatment then the standard treatment model requires the addict to enter inpatient treatment in a 28 day program or a longer program, such as the Salvation Army 6 month program, followed by a period of aftercare that will require attendance at 12 step meetings and might also include more group and one-on-one counseling and a recommendation to live in a halfway house.

The goals of the treatment at SWFAS are (1) to demonstrate to the addict that with group support he can live clean, (2) to overcome the addict's denial that his drug use is a problem, (3) to teach the addict how to live responsibly because drug addiction is an irresponsible lifestyle, (4) to involve the addict in the 12 step community, and (5) to teach the addict that working the 12 steps for the rest of the addict's life will keep him in recovery.