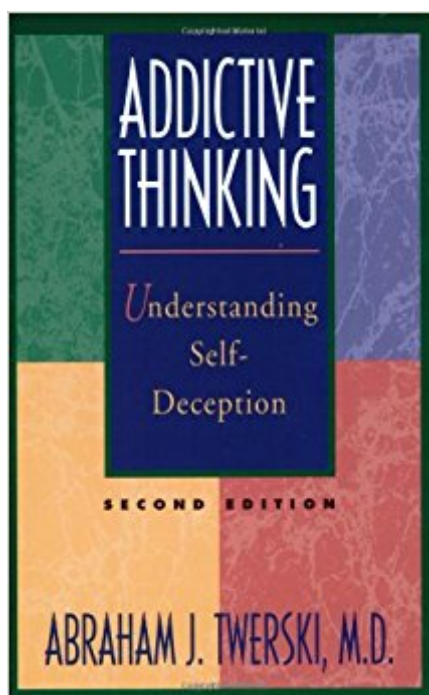


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Addictive Thinking: Understanding Self-Deception



Synopsis

Author Abraham Twerski reveals how self-deceptive thought can undermine self-esteem and threaten the sobriety of a recovering individual and offers hope to those seeking a healthy and rewarding recovery. Abnormal thinking in addiction was originally recognized by members of Alcoholics Anonymous, who coined the term "stinking thinking." Addictive thinking often appears rational superficially, hence addicts as well as their family members are easily seduced by the attendant--and erroneous--reasoning process it can foster. In *Addictive Thinking*, author Abraham Twerski reveals how self-deceptive thought can undermine self-esteem and threaten the sobriety of a recovering individual. This timely revision of the original classic includes updated information and research on depression and affective disorders, the relationship between addictive thinking and relapse, and the origins of addictive thought. Ultimately, *Addictive Thinking* offers hope to those seeking a healthy and rewarding life recovery.

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Customer Reviews

Dr. Abraham J. Twerski is founder and medical director emeritus of the Gateway Rehabilitation Center in Pittsburgh, Pennsylvania. A rabbi, psychiatrist, and chemical dependency counselor, he is the author of numerous journal articles and books, including *Self-Discovery in Recovery*, *I Didn't Ask to Be in This Family: Sibling Relationships and How They Shape Adult Behavior and Dependencies*, and, with "Peanuts" cartoonist Charles Schulz, *When Do the Good Things Start?*

Chapter 1 What Is Addictive Thinking? Interviewing Ray, a young man who had been admitted to a rehabilitation unit for drug addiction, I asked, "What made you decide it was time to do something about the problem?" "I've been on cocaine for a few years," Ray replied, "and occasionally I'd quit using for a few weeks at a time, but I'd never decided to stop for good before." "For the past year my wife has been pressuring me to stop completely. She used to do cocaine too, but she's been off for several years now. I finally got to the point where doing coke wasn't worth the hassle, so I decided to give it up completely." "I sincerely wanted to stop for good, but after two weeks I started up again, and that proved something to me. I'm not stupid. I now know that it is absolutely impossible for me to stop on my own, maybe." I repeated Ray's last sentence several times because I wanted him to hear what he had just said. But he could not see what I was trying to point out. I said, "It is perfectly logical to say, 'Maybe I can stop by myself.' It is also perfectly logical to say, 'It is absolutely impossible for me to stop by myself.' But to say, 'I now know that it is absolutely impossible for me to stop on my own, maybe,' is absurd because it is self-contradictory. It is either 'absolutely impossible' or 'maybe,' but it cannot be both." Ray, however, was unable to see my point. I have repeated this conversation to a number of people, and even seasoned therapists initially show no reaction, waiting for the punch line. Only after I point out the contradiction between "absolutely impossible" and "maybe" do they see the absurdity of the statement and the distortion of thought taking place in this man's mind.

Distortion of Thought The phenomenon of abnormal thinking in addiction was first recognized in Alcoholics Anonymous, where the highly descriptive term 'stinkin' thinkin' was coined. Old-timers in AA use this term to describe the "dry drunk," or the alcoholic who abstains from drinking but behaves in many other ways much like an active drinker. Distortions of thinking are not unique to addictive disorders, however; nor are they necessarily related to chemical use at all. Thought distortions can be found in people who may have other adjustment problems. For example, one young woman was procrastinating turning in her term paper for a class. "Why don't you finish it?" I asked. "It's finished already," she said. "Then why haven't you submitted it?" I asked. "Because I need to do some more work on it," she said. "But I thought you said it's finished," I remarked. "It is," she said. While her assertion appears illogical to most people, it can make perfect sense to someone who thinks addictively. Furthermore, although distorted thinking does not necessarily indicate addiction, the intensity and regularity of this type of thinking are most common among addicts. We all recognize that the statements "The term paper is all finished" and "I have to do more work on it" are contradictory. But Ray's statement, "I now know that it is absolutely impossible for me to stop on my own, maybe," may not appear absurd until we stop to analyze it. In normal conversation, we generally do not have time to pause and analyze what we hear. Hence, we

may be deceived by, and accept as reasonable, statements that are meaningless. Sometimes these contradictions can be even more subtle. For example, a woman, asked whether she had resolved all the conflicts connected with her divorce, answered, "I think so." There is nothing patently absurd about this woman's answer, until we pause to analyze it. The question "Have you resolved the conflicts?" means "Have you done away with the various uncertainties and eliminated the emotional problems incidental to your divorce?" That is what the word resolved means. The answer "I think so" is thus an assertion "I am still uncertain that I am certain" and is really meaningless.

Thinking Processes in Schizophrenia

To understand more fully what we are talking about when we use the term distortion of thought, let's look at an extreme example of it, the system of thinking used by a schizophrenic person. As absurd as a particular distorted thought may be to a healthy person, it may make perfect sense to a schizophrenic. Therapists familiar with paranoid schizophrenic patients who have delusions of grandeur know how futile it is trying to convince a patient that he or she is not the Messiah or the victim of worldwide conspiracy. The therapist and the patient are operating on two totally different wavelengths, with two completely different rules of thought. Normal thinking is as absurd to a schizophrenic as schizophrenic thinking is to a healthy person. A typical schizophrenic's adjustment to life in a normal society can be described in terms of a baseball manager who orders the team to punt or a football coach who calls for stealing a base. Schizophrenic people do not realize that their thinking processes are different from the thinking processes of most other people. They can't see why others refuse to recognize them as the Messiah or the victim of a worldwide conspiracy. Still, many people, some therapists included, may argue with a schizophrenic person and then become frustrated when the person fails to see the validity of their arguments. But this is like asking a color-blind person to distinguish colors. Yet the thinking of the schizophrenic is so obviously irrational that most of us clearly recognize it as such. We may not be able to communicate effectively with a schizophrenic person, but at least we are not fooled by the delusions created in the schizophrenic's mind. We are more frequently taken in by the relative subtlety of distortions caused by addictive thinking.

How Addictive Diseases Resemble Schizophrenia

Sometimes people with addictive diseases are misdiagnosed as schizophrenic. They may have some of the same symptoms, including delusions, hallucinations, inappropriate moods, and very abnormal behavior. All of these symptoms, however, may be manifestations of the toxic effects of chemicals on the brain. These people have what is called a chemically induced psychosis, which may resemble but is not schizophrenia. These symptoms usually disappear after the chemical toxicity is alleviated and the brain chemistry returns to normal. A person with schizophrenia,

however, may also use alcohol or other drugs addictively. This presents a very difficult treatment problem. A schizophrenic is likely to require long-term maintenance on potent antipsychotic medications. Furthermore, a person with schizophrenia may not be able to tolerate the confrontational techniques commonly effective with addicts in treatment. Therapists teach addicts to desist from escapism and to use their skills to cope effectively with reality. No such demands can be made on a schizophrenic, who may actually lack the ability to cope with reality. In a sense, both the addict and the schizophrenic are like derailed trains. With some effort, an addict can be put back onto the track. The schizophrenic, however, can't be put back on the same track. The best that may be accomplished is getting this person on another track that leads to the destination. This other track is not a 'through' track. It has countless junctions and turnoffs, and at any point the schizophrenic may go off in a direction other than the desired one. Constant vigilance and guidance are necessary to avoid such turnoffs, and it may be necessary to use medications to slow the traveling speed and stay on track. Being confronted with the thinking of an alcoholic, or someone with another addiction, can be as frustrating as dealing with the schizophrenic. Just as we are unable to budge the schizophrenic from the conviction of being the Messiah, so we are unable to budge an alcoholic from the belief that he or she is a safe, social drinker, or a safe user of tranquilizers, or a "recreational" user of marijuana and cocaine. For instance, someone close enough to observe a late-stage alcoholic (or other drug addict) sees a person whose life is steadily falling apart; perhaps the addict's physical health is deteriorating, family life is in ruins, and job is in jeopardy. All of these problems are obviously due to the effects of alcohol or other drugs, yet the addict appears unable to recognize this. He or she may firmly believe that using chemicals has nothing to do with any of these problems and seems blind to logical arguments to the contrary. A defining difference between addictive thinking and schizophrenic thinking is this: schizophrenic thinking is blatantly absurd; addictive thinking has a superficial logic that can be very seductive and misleading. The addict may not always be as willfully conniving as others think. This person is not necessarily consciously and purposely misleading others, though this does occur sometimes. Often addicts are taken in by their own thinking, actually deceiving themselves. Especially in the early stages of addiction, an addict's perspective and account of what is happening may look reasonable on the surface. As discussed, many people are naturally taken in by addictive reasoning. Thus, an addict's family may see things the "addictive thinking way" for a long time. The addict may sound convincing to friends, pastor, employer, doctor, or even to a psychotherapist. Each statement the addict makes appears to hold up; long accounts of events may

even appear valid. Obsessions and Compu...

My daughter requested this book while she was in treatment for drug addiction. The book had been recommended by a friend who had the same struggles. This book has given her more insight into herself and her addiction than anything else she has read or done. She has been battling this for several years and I think this book is what is helping her to stay clean and strong. If you have a child in jail or treatment and they want to change their behaviors I highly recommend it..

A therapist actually suggested I give this a read to better understand those around me that were suffering from addiction and while I haven't finished it yet, it's already helped more than anything else has as of yet. It really gives the best depiction of an addict's mind and puts it into the most sensible comparison a normal person could understand, and all the while is comfortable to read and not full of jargon and such.

This book was recommended to me by a recovery professional dealing with a family member I care deeply for but was tired and fed up with their behaviors and failures, I enjoyed reading this book because it provided great information and gave me a better understanding of the disease being a disease, it also enabled me to be able to adjust my rejective behaviors that was hurting the addict in my life and since then we have been on a better path to their recovery. *~f~ ~ Å~ Æ'*

Truly great book. Have read many books about addiction and recovery but this one helped me to understand my son far better than any other so far. It will help me to have a better relationship with him and to understand the difficulties he faces every day Great book.

A very good book with the basics on addiction. I especially enjoyed the chapter on spirituality and the addict, although I would have liked to have seen a little more on this subject. Twerski's book "The Spiritual Self" has what I was looking for and much more. I think it is a must read for ANYONE on the road to recovery. He explains how the role of the human spirit is essential in the addict's new life and how one does not even need to be religious (although it certainly helps!).

As a counselor, I recommend this book to any clients who have family members struggling with addiction. As a person, this book helped me understand the thought process of a loved one of my own in the midst of addiction. Even though I have taken many graduate courses and continuing

education on brain chemistry, addiction - however, this was a book that connected and helped make sense of what I didn't understand in the minds of addicts.

My husband is an alcoholic & I am co-dependent. Our counselor recommended we read this book together. We read 20 minutes each night. It has really opened our eyes and helped us make healthy changes. I highly recommend this book!

This book is a great introduction for those working with or living with someone with an addiction. It uses simple, easy language with many stories and metaphors to understand how a person's thought processes keep them addicted. I recommend this book to everyone and many of the counselors I know do the same.

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