

Meet B Here Today's Recovery Carrier Lisa Frederiksen

William White defines recovery carriers as "people, usually in recovery, who make recovery infectious to those around them by their openness about their recovery experiences, their quality of life and character, and the compassion they exhibit for those still suffering." (www.williamwhitepapers.com, 2012)

Today begins the first in a series of interviews with folks across the nation (and maybe the world!) who live and breathe a life of recovery. Please enjoy this chat with Lisa Frederiksen, author of BreakingTheCycles.com.



When you hear the term “recovery carrier,” as it relates to addiction, what does that mean to you? Do you think you’re a recovery carrier?

I do consider myself a recovery carrier. In my view, a "recovery carrier" is someone who is sharing with those in their sphere of influence information, expert opinions, current research, stories of hope and/or engaging in advocacy efforts related to the many aspects of addiction recovery. This advances the fact that addiction recovery is real; it happens to real people and it happens all the time. Not only that, but the information, research, expert opinions, advocacy efforts all help others understand the complexities of the disease of addiction, which in turn reinforces the fact that there is no one, nor right way to do recovery - many paths will get you there, and it's in our sharing that we help others find one (or ones) that will work for them.

Can you describe your work and explain why you do it?

My niche in this well-represented field is my ability to simplify the science – much of it 21st century – for a variety of audiences so that it's understood in a manner that can truly change how we view, treat, prevent and intervene with addiction and its myriad of impacts, including those on the family, children, coworkers, fellow students and society as a whole.

I've been working in this area for over a decade, now, and carry these various messages to others through my presentations, books, over 800 blog posts and consulting work with business, agencies, treatment centers, families and individuals.

I do this work because I've had decades experience with various family members and close friends' alcohol abuse and alcoholism and fighting the battle of trying to get them to stop without understanding what it was that I was fighting - namely, a chronic, often relapsing brain disease. I was also fighting the impacts of secondhand drinking (SHD) without understanding how the chronic activation of the brain's fight-or-flight stress

response system, such as that which occurs with repeatedly coping with SHD, changes a person's brain function and emotional and physical health. (SHD is a term to describe the impacts of a person's drinking behaviors on others. Secondhand drugging (SHD) is a similar term to describe the impacts of a person's drugging behaviors on others.)

As a result, my life - my quality of life - spiraled, along with that of my loved ones, until 2003 when one of my loved ones entered residential treatment for alcoholism, and I found myself plunged into the world of addiction treatment and recovery. It was a world with terms and concepts, such as: codependency, addiction is a disease, family members need help along with the drug addict | alcoholic, sober living environments, 12-step programs and the list went on and on. I was overwhelmed. I was extremely angry and frustrated and believed that if my loved one just got well, the rest of us would be fine.



Having published several books by 2003 – four of them biographies of leaders in the Women's Rights and Civil Rights movements – I was well versed in researching complex subjects and decided to shift my efforts to understanding this new world I'd now found myself living. I started with trying to figure out why "they" called it a "disease," and began my own recovery work through participation in a 12-step program for family members and intensive therapy with a therapist specializing in addiction (I can't emphasize the importance of having a therapist who understands addiction if you choose to work with a therapist!)

The result was the publication of my seventh book in 2009, *If You Loved Me, You'd Stop!*, followed by *Loved One In Treatment? Now What!* in 2010 and *Crossing The Line From Alcohol Use to Abuse to Dependence* in 2012.

These are the books I wished I could have found in 2003. Two of these have been translated into Spanish and published by Editores Mexicanos Unidos, S.A. and are titled: *Si me amaras... dejarías de beber* and *Adicciones*. and *Codependencia, El ser querido bajo tratamiento... ¡Y ahora qué!*

My hope is in all of us sharing our piece – as you call it – being "recovery carriers" – and working together, we can collectively change the conversations and break the cycles. Recall the early 1970s – many teens and adults smoked cigarettes, we didn't use bike helmets, infant car seats hadn't been invented and we rarely used our seat belts. And, think about how we viewed and treated HIV-AIDS!

All of that changed drastically in just 20+ years — simply because people started talking about and sharing the new research and taking action as they gathered knowledge. Laws were passed requiring bike helmets and car seats and movements were mounted around the health impacts of secondhand smoke on others. Today, HIV-Aids is

recognized as a body fluid-to-body fluid transmitted disease that is “treated like this” and “prevented like this.”

Today, there are 1 million Americans living with HIV. By contrast, there are 23.2 million Americans struggling with addiction, of which only 10 percent are getting the help they need. Not only that, but the estimates are some 100 million Americans – the parents, spouses, children, siblings, aunts, uncles, grandparents, in-laws of those struggling with the disease – are in their own, independent struggle – that which I call a struggle with secondhand drinking. They are struggling with how to cope with the drinking behaviors – the verbal, physical and emotional abuse, the fear and terror of what will happen to their loved one if they don’t get help, the sexual assault or DUI, the blackouts, the insane, circular arguments – the behaviors that result when alcohol or drugs change brain function. They are struggling, along with their loved ones, baffled by the question, “Why can’t they just stop?”

Societally, we do not understand, let alone embrace, how critical it is to bring the family side – secondhand drinking | secondhand drugging – of this family disease into the equation. Not only for what it will do to improve the lives of these family members, but what it can do to break the cycles and to help them effectively support their loved one seeking treatment and succeeding in long-term recovery. It will also substantially bolster the numbers involved in the New Recovery Advocacy Movement!

It is my hope that through our collective efforts, society will soon see addiction as a chronic, often relapsing brain disease that can be “prevented like this” and “treated like this,” the same way it views HIV.

From where you sit, what is the number one issue or challenge recovery carriers must face?

I would say the #1 challenge is remaining open to learning the latest research and other practices – I mean think about this. The explosion in social networking opportunities of just the past decade which gave us Twitter, Facebook, Instagram, Pinterest, YouTube and the Smartphone where the result of advances in technology, unprecedented funding opportunities and the collaborative efforts of brilliant minds. It’s that same kind of rapid, far-reaching research findings that is coming now as a result of advances in imaging technologies, funding opportunities, collaborative efforts and the brilliant neuroscientists and scientific minds studying varying aspects of this complicated disease through study of the brain itself. Now they can “see” the visual proof and study the live human brain as it develops, with mental illness, with and without medications, after trauma, with addiction, after addiction treatment. Access to this new, much of it 21st century knowledge, could be life-changing for millions of Americans.

So if we step up to the challenge and we remain open to learning the latest, we will be more open and welcoming of the fact that addiction treatment and recovery is complicated and there is no one, nor right way to do it, but it all centers on returning the brain to health (whether that be through spiritual practices, mindfulness practices,

medications, nutrition, exercise, sleep, cognitive behavior therapy, tapping, art therapy, 12-step programs, non-12 step programs, effective co-occurring disorders treatment, real – effective – long-term continuing care and/or some combination of all or others not even mentioned).

Switching to recovery advocacy, we're in a time period that many in the field consider the New Recovery Advocacy Movement similar to other movements in our country's history. What changes do you believe the movement advocates?

Having studied, written and spoken extensively on the Women's Rights and Civil Rights Movements, I agree that the New Recovery Advocacy Movement is very similar to these and other movements in our country's history.

I believe the New Recovery Advocacy Movement advocates an open, informed sharing of research and information, and then our taking a stand to run for office, elect legislators, and support and pass legislative, legal and policy changes that account for these new facts.

As you know, Greg Williams' documentary, "The Anonymous People," blew the doors wide off, so to speak, the idea that addiction needs secrecy in order to be successfully treated. Rather, it was pointing to the fact there are 23 million Americans living their lives in recovery – in other words, they are loving and living their lives – but societally, we don't know this!

So I believe this New Movement is about those who are comfortable with talking about having this disease (and similarly SHD, family side of this they treated their impacts) and what they doing so openly. I mean it took women and and ALL of those who with them to risk their and fight centuries-old a whole sex and a something not even of alone banning them from equal access to jobs, voting, equal pay, equal education, discrimination protection. And think of the courage it took to run for office, elect new officials, pass new legislation, advocate publicly for changed institutional policies that finally extended these freedoms and opportunities to all. It took the courage of hundreds of thousands working together for decades, doing their part, for the good of the whole to win out.



Recovery Advocacy those who are about having this for those on the disease) and how disease (their SHD do to avoid a relapse think of the courage African Americans stepped into the fight very lives to stand up beliefs that relegated whole race to citizen status let

And that's what I believe this New Recovery Advocacy Movement is doing - working together to shatter the secrecy and shame which is allowing this disease to progress and devastate the lives of those with the disease and the family members and friends who love them; they are advocating for policy, legislative and institutional changes that support the treatment, prevention, intervention and recovery of addiction and secondhand drinking with 21st century scientific findings and facts; and they are sharing the stories of those willing to share in order to put a face on recovery.

And let me be clear – I am not talking about persons in 12-step programs having to disclose their participation in those programs. That is entirely their business, and the anonymity of those “in the rooms” is a key reason why 12-step programs work for people. BUT, if a person wants to share with the world they have a brain disease and are treating their brain disease – whether they label it addiction or alcoholism or drug addiction or nothing – that's their business, as well. Those willing or in a position to talk about it shine a very bright light on the truth that life in recovery is possible.

Where do you see the addiction recovery field 10 years from now? How about the recovery advocacy movement?

I see both making HUGE strides. As society better understands addiction for what it is, our political leaders and the decision makers at every level will realize we must re-think our war on drugs – incarceration is not the answer; we must re-think our more traditional “Just Say No” youth prevention messages – they don't work because it's not true for the millions of youth who abused drugs or alcohol and came out the other side without developing addiction; we need to rethink our death by suicide, sexual assault, domestic violence, bullying and mental illness prevention messages and treatment strategies to incorporate their common feature – the brain – how it's functions, what gets in the way of its health and what one can do to restore it to health.

Incorporating this new brain and addiction-related research and all the new research findings to come, as part and parcel of the recovery advocacy movement, will rock our world. That's when we'll have replaced old stereotypes and belief systems with state-of-the-science policies, prevention, intervention and treatment protocols and society will finally view addiction recovery the same way it now views seatbelts, car seats, bike helmets, secondhand smoke and HIV.

To learn more about Lisa Frederiksen and her work, please visit her website, BreakingTheCycles.com. You can also follow her on [Facebook](#) • [Twitter](#) • [LinkedIn](#) • [Google+](#) • [NowWeKnow App](#) • [YouTube](#)