

On Autonomy and Addiction

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Received: August 18, 2018; Published: October 31, 2018

Abstract

Addiction is a complex disorder of which treatment is not yet conclusive. It is inversely related to autonomy, the development of which is important in shaping one's self. A supportive environment with practical opportunities for autonomy is important in addiction rehabilitation.

Keywords: Addiction; Autonomy; Self; Supportive Environment

Addiction has been studied extensively for over a century. It has undergone many changes in its form, and consequently its understanding and treatment have changed over time [1,2]. The newer view of addiction highlights the need of the person to react to a lack or a disturbing experience whether personal or communal [1,3]. Individuals with addictions struggle and suffer incessantly despite the continuous updates in the development of research-based theoretical models. To date, this field has produced an array of highly specialized treatment models. Individually, many of these models have reached a high level of precision and feasibility, particularly in promoting the reconstruction and maintenance of healthy lifestyles. However, despite these advancements, treatment in general is still not comprehensive enough to yield even better results, specifically in regards to relapse, its frequency and its intensity. Perhaps highlighting different elements involved in addiction such asautonomy, and giving them equal weight and attention in their application during treatment can contribute to better recovery and less suffering.

Autonomy is considered to be an important element in one's well-being, and many therapeutic approaches acknowledge its worth in motivating the person to recovery and to own his/her treatment [4]. This makes the individual trustful in his/her inner abilities. This is significant for in addiction lies a fundamental difficulty with autonomy in all its different levels and manifestations. Addiction refers to the state of being dependent on something other than one's self, a trait shared with those who have dependent personality disorders (DPD). Morse., *et al.* [5] found autonomy not to be related to DPD. Autonomy and dependence don't go well together, and in addiction we see autonomy weakened along with a feeling of estrangement from oneself and others, a notion shared with Kinsella [4].

Moreover, a study in Lebanon [6] found that addicts lacked knowledge of one's self, acceptance of one's self, and protection. These are characteristics of the third fundamental existential motivation (3FM) of Existential Analysis (EA) theory, which highlights boundaries, respect, appreciation, and just treatment. This is something that the addicts suffer from. They have a difficulty in setting boundaries, are unable to say no to others or to their own urges, and do not feel appreciated neither by themselves nor by others. "Autonomy is concerned with more than being able to shape one's life; at its core and indeed the key to shaping one's life is the ability to understand and shape who... [one is] as a person" ([4], p.94). If the addict has a lack in knowledge of self, how will s/he be able to self-govern or to trust his/ herself to do so? "...Authentic or autonomous acts proceed from one's core self, representing those preferences and values that are whole-heartedly endorsed....For an act to be autonomous it must be endorsed by the self, fully identified with and 'owned'" [7].

Meanwhile, internal organization of who one is, identification and satisfaction of needs, and containment of emotions are all essential in a healthy development of self. Taking care of oneself includes the ability to contain and regulate one's emotions. The inability to contain and regulate one's emotions is one of the main triggers for relapse. "Positive...guidance, characterized by efforts to reinforce and support the child's attempts at autonomy, may contribute to the development of appropriate self-regulatory behavior and emotional control" [8]. Self-mentalization, or the ability to understand one's mental state includes the capability to actively arrange and adjust one's identity, instincts, and emotions. The absence of said regulation creates difficulties that hinder normal psychological functioning according to Fonagy and associates in 2002 [9]. Addiction and self-regulation have been studied extensively, pointing to the role addiction plays where deficiency in self-regulation lies [10-13]. Self- regulation has been found to be important in individuals recovering from addiction to alcohol, enabling the growth of one's person [14]. Moreover, Ghadimi., *et al.* [15] have found a negative correlation between emotional intelligence and a tendency for addiction. Taking care of oneself includes more than one's physical needs, it includes taking care of one's emotions and knowing how to deal with them, as well as one's thoughts and behaviors. This is the importance of a healthy integrated self, where one is not estranged from it.

Moreover, one of explanations of the etiological factors of autonomy is Erik Erikson's theory of development. In his second Psychosocial stage of development Erikson emphasizes the conflict of autonomy versus doubt and shame. According to Erikson, if the individual as a younger child is encouraged to be autonomous, he will develop trust in his abilities and choices. However, overprotectiveness, overpermissiveness, or anxiety do not encourage one to become autonomous, rather, they instill doubt and shame [16]. If the individual learns to become autonomous through being allowed to learn to control his bodily functions and daily choices as well as learn to self-control, then the results are hope and will. This is significant as in addiction the will is weakened, rendering the person a slave to an external force [17].

Nonetheless, "Autonomy [seen from a philosophical stance] is...not equivalent to independence" ([7], p. 1561). In addition, the core issue is that of dependence, and recovery is a road to independence. If we look for the antidote to addiction it might not be a one size fit all cure; nonetheless, encouraging the development of autonomy could possibly be an effective factor. From the existing extensive knowledge on addiction, one wonders how much the individual would benefit if treatment proceeded to actually allow for opportunities for the addict to experience autonomy in a supportive and guiding environment. Furthermore, on a practical level, how beneficial would it be to create opportunities for the addict to make decisions that range from daily specific acts (e.g. food choices, activity preferences, even clothing selection) to gain a sense of personal control, to global life choices (e.g. vocational, relational, and community preference)? These opportunities for autonomy, if and when created, need to be regular and consistent. Support and guidance need to be present without negating the individual's autonomy, and without acting and/or deciding on the behalf of the individual no matter how much hepleads. This is because once he experiences autonomy, it might be easier to be motivated to be autonomous despite this change invoking fear and anxiety, which is why the genuine and positive presence and support of those providing treatment would be as important and necessary as a parent's genuine presence would be to a child. When one knows first-hand what it is like to be autonomous, then one can consequently tap into that knowledge when need be. Learning to trust oneself, to trust that one has what it takes to take care of oneself, to build confidence in one's abilities, and no longer be estranged from self could be significant in addiction rehabilitation.

In conclusion, treating a complex disorder like addiction is not simple. It requires close attention to many factors involved, one of which is autonomy. It is considered to be important for the well-being of any individual. Autonomy is the beginning of shaping one's self, identity, thoughts, emotions, and actions. Autonomy helps in the process of liberation from the slavery experienced in addiction. A positive, supportive, and guiding environment that encourages autonomy helps one become autonomous. Not having learned to be autonomous in one's early years requires one to learn it through experiencing first-hand what it is like to be autonomous through opportunities created for this purpose. It would be encouraging for addiction rehabilitation programs to adopt such an environment and for autonomy to be weighed as a possible key factor in addiction treatment.

Citation: Sareen Hagopian. "On Autonomy and Addiction". EC Psychology and Psychiatry 7.11 (2018): 826-828.

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