

1.0: INTRODUCTION

Rarely have we seen a person fail who has thoroughly followed our path. Those who do not recover are people who cannot or will not completely give themselves to this simple program, usually men and women who are constitutionally incapable of being honest with themselves. (Alcoholics Anonymous, pg. 58)

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1.1: Treatment Facilities.

Jorgs Ark Rehabilitation Centre [Jorgs Ark Centre] is located in a 6.5 acre serene highlands of Tigoni along Old Limuru road about 28kms north of Nairobi near brakenhurst retreat. The Halfway House (Jorgs Sober house) is located at Ruaka 12km from Nairobi City near Village Market and UNEP.

Since 2005 we have been offering residential/ halfway and out-patient treatment program of over 1000 chemical dependency clients of whom over 63% are living in abstinence. We are recognized and regulated by The National Authority for Campaign against Alcohol and Drug Abuse (NACADA) as a service provider and partner in the campaign especially through our unit Jorgs Awareness, Training and Research On Drug Abuse (JATRODA).

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The Treatment Centre (Jorgs Ark) is in a consciously designed social environment within a residential unit in which the social and group process is harnessed with a therapeutic intent. Our approach is based on the tested 12 steps of **Alcoholics Anonymous / Narcotics Anonymous** (AA/NA) programs of recovery, blended with the Minnesota model's; *dynamic meditation, encounter groups & transactional analysis* which have proved successful in the treatment of chemical dependency over the years.

The basis of our treatment is on the belief: *that the chemically dependent person has the capacity:*

- 1. To abstain from mood altering drugs*
- 2. To actualize his human potential*
- 3. To demonstrate personal freedom and responsibility,*
- 4. To exercise self-determination and personal choice,*
- 5. To realize personal growth and change,*
- 6. To form a meaningful and workable relationship with a power greater than himself and the world outside himself.*

These factors are vital to recovery from chemical dependency.

The aim of our program is to help the chemically dependent person achieve two long-term goals:

- 1. Abstinence from all mood altering drugs and*
- 2. An improved life style.*

Of necessity, the final realization of these long-term goals is a lifelong pursuit and our treatment is viewed as only the beginning of what must be a continuing effort to maintain a lifestyle that is conducive to remaining free from mood altering drugs. However, achievement of the following four short-term goals is a satisfactory indication of progress towards long-term goal attainment:

- a) *To help the chemically dependent person recognize the illness and its implications.*
- b) *To help the chemically dependent person admit that he/she needs help, the illness cannot be cured but can be managed and to concentrate on learning to live with it in a constructive manner by developing a closer relationship with power greater than himself and using the AA/NA programs as a design for living.*
- c) *To help the chemically dependent person identify specifically what he/she needs to change in order to live with the illness in a constructive manner.*
- d) *To help the chemically dependent person translate that understanding into action, that is, to actively assist the patient in changes necessary to increase his/her level of functioning and to develop a new lifestyle.*

To accomplish these purposes, we use a variety of means, which includes the following:

1. *Social & Medical model in the detoxification and management of withdrawal.*
2. *Therapy; individual (directional) and group*

(encounter and other therapeutic groups)

3. *Psycho-Educational Skill and motivational lectures.*
4. *Group or personal meditation.*
5. *Peer assessment.*
6. *Provision of basic human needs.*
7. *Informal interactions with other patients.*
8. *Religious attendance (optional).*
9. *Recreational activities.*
10. *Environmental setting.*
11. *Therapeutic duties (work therapy)*
12. *Individual meetings with the clergyman.*

1:2. Program Philosophy

The Program has five stages.

1. **Orientation/social/ medical detoxification (4 weeks/28 days)/The Ark Centre*
2. **Primary treatment (9 weeks/63 days)/The Ark Centre*
3. **Relapse Prevention (6 weeks/45 days)/sober house*
4. **Discharge planning (2 weeks 15 days)/sober house*
5. *Community Re-integration (8 weeks) A.A./N.A. Meetings & Jorgs Soar- (survivors of addiction & recovery)*

*** Minimum Mandatory**

1:3 Program model

Our model is based on the concept of informed decision making.

In order for you to make an informed decision, there are two things that must be established; knowledge and awareness. To many, knowledge and awareness are synonymous, but there are subtle differences in their meanings at The Ark 10635.

Knowledge is the intellectual side of understanding. It is based on facts, figures, definitions, processes, and rules. Knowledge comes to us rather easily at times. It is the traditional way we learn in schools. It comes to us through books, lectures, and observations. By itself, it is no more than data stored in a computer, and statistically the computer can be programmed to make decisions. The computer, however, will not take into account life's experiences. It does not factor in personal preferences, flavors, and intrinsic values. The decisions it makes will be predictable in an unpredictable world. There will be errors. We cannot eliminate all errors, but we can minimize risks.

To minimize the risks, we add the second structural component to our model; awareness. Awareness is understanding at the emotional level. It takes into account all of our personal experiences. It shows us the effects on those for whom we care. It brings reality into the program and enhances our knowledge. With a more complete understanding, founded on knowledge and awareness, we are ready to choose to change our behaviors. We will have learned. We can use tobacco as a common frame of reference to see how this model works. The similarities are easily transferable to other substance addictions.

Everyone knows that tobacco is extremely harmful. No one argues that point any longer. Both smokers and non-smokers will acknowledge the life threatening effects of tobacco usage.

They can and will tell you what can and does happen to smokers at the intellectual level. They have the knowledge. So, why do smokers continue to smoke? They have the knowledge, but not the personal emotional level of knowing that we call awareness.

They are in denial; a nice little term that just means they have not given up the adolescent psychological phenomena of immortality. They still hang onto the unfounded belief that bad things happen to others, but not to them. They wish to believe, in some small measure, in their own immortality. It is not until they get a wakeup call, a life changing experience at a personal level, that they gain awareness. They or a loved one are diagnosed with cancer and the prognosis is not encouraging. Now they have a complete understanding by which to make a decision. They have awareness at a personal (emotional) level that demonstrates what the knowledge has been telling them at the intellectual level. Unfortunately, the knowledge and awareness often comes too late for the choice to be fully effective.

At Jorgs Ark 10635, our goal is to provide you with two components of the Knowledge/Awareness/Choice (Kay-See) model; to give you knowledge through classroom instructions (Psycho-education), to give you awareness through open forum discussions (Group therapy), and to get you started on a recognized A.A./N.A.12 step program for life long management of your choices. We will get you to the point where you can make an informed choice; the third component of Kay-See.

1:4. Admissions Policies

When you are ready to ask for help, our counselors/Psychologist are ready to guide you through admission and initial assessment. We're here to listen, to answer your questions, and to ease your transition into treatment and recovery. Jorgs Ark provides treatment for individuals age 16 and over of all Gender suffering from addictions to: Alcohol, marijuana, Prescription pain medications, Cocaine, Methamphetamine (speed or ice) Opiates, Benzodiazepines, Club drugs (GHB and Ecstasy) & others.

Jorgs Ark provide services without regard to race, ethnicity, religion, gender, age, national origin, sexual orientation, the presence of non-related medical condition or disability, or any other legally protected status. Admission policies require screening for various conditions which would influence a patient's ability to make use of our services. Although appropriateness will be determined on an individual basis, in some cases patients are not appropriate for treatment at The Ark due to a debilitating psychiatric, medical or physical condition. In each case where Jorgs Centre has determined that there could be an inappropriate placement, the individual (or the individual's family, friends or therapist) will be consulted

1; 5. Information on cost of treatment

Jorgs rehabilitation centre is a residential facility run and funded by Jorgs Ark Trust, a charitable organization registered in Kenya

whose main aims and objections is to assist narcotic and alcoholics recover hence the only payments required is the basic cost of inpatients

If you are worried about the cost of treating your alcohol or drug habit think about how much money you're going to save by staying sober. Carefully calculate the amount you spent on alcohol and/or drugs each week, then add on the legal fees you incurred, the speeding fines you paid periodically, the penalties for missed mortgage payments or rent, the late charges and interest on credit cards, the cost of lost promotions, alimony, clothes you ruined and the valuables you absentmindedly lost or left behind, and other expenses. Total it all up, and you have the financial cost of your drinking or drugging. Sobriety will reimburse you in a fairly short time. Once the bills are paid, open up a special bank account and each week save just half of what you would have spent on alcohol or drugs. Before you know it, you'll have money for something special - a subscription to the theatre, golf or tennis lessons, or, if you were a big spender, a European vacation, a Caribbean cruise, or a spanking new car. Another approach to socking away savings is to put a coin in a piggy bank or an oversized jar (a small one may fill up too quickly) every time you feel a craving. Every month, move the accumulated coins to your bank account. You could be rich by the end of the first year of recovery. By the second year, you may find your piggy bank remaining empty for weeks on end. But that's not so bad either. Your cravings will pass with time.

1:6. The Basic Admission Requirements

The interested suffering chemically dependent person who seeks admission can be admitted at any time on any day of the week provided he/she meets all the following requirements.

- 1.** He/she voluntarily desires to abstain completely from alcohol and any other mood- altering drugs such as opium, heroin, cannabis, and cocaine. etc. (*Gives him/her a chance to take an in-depth personal inventory concerning his/her use of mood-altering drugs and make own desired choice about what is really good for him/her. This marks the beginning of individual commitment.*)
- 2.** He/she accepts to undergo treatment for the average period of at least 3 months/90 days. (*He/she must be ready to break off from the drug- centered environment for the set period in order to reflect deeply about the consequences of drug use and to abstain from the drug in a drug-free and structured environment.*)

3. He/she pays on admission total *

- | | |
|---|--------------------------|
| a. Boarding and basic rehab fees of..... | Kshs 55,000.00 pm |
| b. Psychiatrist intake examination fees..... | Kshs 4,000.00 |
| c. General medical intake exam fees..... | Kshs 3,000.00 |
| d. Drug of use test..... | Ksh 2,500.00 |
| e. Screening/Assessments (Mast etc.) | Kshs 2,000.00 |
| Total on admission..... | Kshs 66,500.00 |
| Next two months..... | Kshs110,000.00 |

Total cost for minimum of three months-Kshs 176,500.00

Those in formal employment whose sick sheets need processing pay at admission Kshs 5,500.00.

(Marks the start of planned and profitable spending on daily needs. In most cases the family members or friends of the patient pay the fees. This revives in the patient, the needs of self-worth and to love and be loved which are the corner stones of the basic human needs. He/she sees himself/herself as a valuable member of his/her family reviving the need of belongingness)

4. He/she brings enough clothes and pocket money because the centre does not provide clothing nor pocket money for personal effects such as soap, toothpaste, writing material, fares, stamps, etc. *(The start of need to look presentable and take care of personal hygiene to build and boost self-worth and self-esteem.*

5. He/she accepts to adhere to the laid down norms and commits himself/herself in writing. *(Marks the start of structured living and re-adjustment to human morals, values and standards.)*

6. If the patient meets the basic admission requirements at admission, he/she has done about 30% of his/her recovery.

**Rates subject to change and are exclusive of further external professional fees e.g. Doctors/psychiatric, medicine etc. costs*

1:7 SELF DIAGNOSIS.

Most of us have been unwilling to admit we were real alcoholics. No person likes to think he is bodily and mentally different from his fellows. The idea that somehow, some day he will control and enjoy his drinking is a great obsession of every abnormal drinker. Many pursue it into the gates of insanity or death. We learned that we had to fully concede to our innermost selves that we were alcoholics. This is the first step in recovery. (Alcoholics Anonymous, pg. 30, 31)

Do I have a drinking problem?

We do not like to pronounce any individual as alcoholic but you can quickly diagnose yourself.

In the final stages of Alcoholism, even a ten-year-old child can recognize alcoholism. In earlier stages it is more difficult. We recognize the disease by its effects on a drinker's life, and the way we find out about its negative impact is to ask questions. The National Institute of Health through studies, show that paper and pencil test are much more consistent and accurate than even the most sophisticated lab test available. A lab test can only determine alcoholism in about fifty percent of the cases whereas a simple questionnaire is accurate 80 to 90 percent of the time and can determine the early stages of the disease. In the American Journal of Psychiatry 131 (1974) a little questionnaire was published by D. Mayfield MD which pretty much changed the way

we identify alcoholism and it is correct in more than 85 percent of people who take this simple test.

This was called the CAGE test and it stood for;

1. Have you ever tried to **C**ut down on your drinking?
2. Do you get **A**ngry when people discuss your drinking?
3. Do you feel **G**uilty about things you have done while drinking?
4. Do you ever have an **E**ye-opener (take a drink to get rid of a hangover or to start the day)?

Four simple questions, but answer *yes to any one of them* and you need to seek help. The biggest part of the problem is going to be denial. (***please do not change your answers nobody knows them yet!!!***) The addiction of the brain, unlike a heart attack or stomach pains or even infected lungs, will not tell you that it is hurting. The denial is created by the brain to protect its access to alcohol, which it perceives as being the solution to the problem, not the problem. So the brain in essence is doing what it is supposed to do by thinking it is on the pathway of smart health avoiding the pain not knowing the cure is causing the problem. Still not convinced?

Let us take one more test and see.

- Can you handle more alcohol now than you first started to drink?
- Do you sometimes feel a little guilty about your drinking?

- Has a family member or close friend ever expressed concern or complained about your drinking?
- Have you tried switching brands or drinks, or following different plans to control your drinking?
- Have you ever had a Driving while under the Influence traffic ticket or any legal problem related to your drinking?
- Are you having more financial, work, school, and/or family problems as a result of your drinking?
- Have you recently noticed that you can't drink as much as you used to?
- Do you ever feel depressed or anxious before, during, or after periods of heavy drinking?
- Have any of your blood relatives had a problem with alcohol?

*According to the National Council on Alcohol, if you answer yes to any one question you are at great risk for alcoholism and answer more than one and you need to seek treatment