

Do You Love Someone Who is Struggling With Addiction?

Watching someone you love in the throes of an addiction can be devastating. The fact that you are reading this means that you care enough about the person to go out of your way to help. That may make the difference between life and death for your loved one.

Any addiction is dysfunctional and disruptive not only in the addict's life but to anyone connected to this person.

For families of addicts, feelings of fear, shame, anger, guilt, frustration and confusion over a loved one's addiction can cause deep anxiety, sleepless nights, and even physical illness. The emotional distress family members suffer is often compounded by the belief that they somehow caused or contributed to their loved one's addiction or that they could have done something to prevent it. No doubt you have also felt love for the addict.

A Questionnaire for Parents, Spouses, Relatives, Friends

	YES	NO
1. Do you find yourself making excuses, lying or covering up for your loved one?	_____	_____
2. Do you have reason not to trust your loved one?	_____	_____
3. Is it becoming difficult for you to believe his/her explanations?	_____	_____
4. Do you lie awake worrying about your loved one?	_____	_____
5. Is your loved one missing school/work often without your knowledge?	_____	_____
6. Are the bills piling up?	_____	_____
7. Are the savings mysteriously disappearing?	_____	_____
8. Are the unanswered questions causing hostility and undermining your marriage?	_____	_____
9. Are you asking yourself "What is wrong?" and "Is it my fault?"	_____	_____
10. Are your suspicions turning you into a detective and are you afraid of what you might find?	_____	_____
11. Are normal family disagreements becoming hostile or violent?	_____	_____
12. Are you canceling your social functions with vague excuses?	_____	_____
13. Are you becoming increasingly reluctant to invite friends to your home?	_____	_____
14. Is concern for your loved one causing you headaches, a knotty stomach and anxiety?	_____	_____
15. Is your loved one easily irritated by minute matters?	_____	_____

16. Are you unable to discuss the situation with friends or relatives because of embarrassment? _____
17. Are your attempts at control frustrating? _____
18. Do you over compensate and try not to make waves? _____
19. Do you keep trying to make things better and nothing helps? _____
20. Are the lifestyle and friends of your loved one changing? _____
21. Do you ever think they may be using drugs? _____

Living With an Alcoholic/Drug Addict Often Results in Co-dependent Behavior.

Often times, the presence of an addiction is mistakenly viewed as a problem of the identified individual alone and not as a family disorder. Family members, just like the addict, experience pain and dysfunction as a result of the addiction. That's called codependency.

Family members of addicts are often viewed as codependents. "Co" from Webster's dictionary means "together, with, or joint." Dependent is defined as "influenced, controlled, or determined by something else. (the addiction)" A codependent is someone whose life is intertwined with the addicted person. Unknowingly their attitudes and actions enable the addict to continue their behavior. By enabling the addict, a dysfunctional pattern of interaction within the family contributes to the dysfunction in one's own life.

Codependents often feel that if they can only control the disease, everything will turn out OK. Codependents usually start off trying to help the addict by giving support and trying to reward the desired behaviors. When encouragement and reward do not work, the codependent changes strategies and delivers subtle threats. These threats quickly escalate, culminating in the ultimate threat of all, leaving the relationship. This threat is usually withdrawn, leaving the codependent feeling helpless and guilty. The investment in controlling the disease is so great because they not only want to save their loved one but also their self esteem is at risk.

Recovery Begins With an Honest Self-Diagnosis

We have found that there are basically two general categories of destructive patterns of behavior; compliance-pleasing others, and control-manipulating others. The following is a checklist of characteristics, behaviors, and attitudes. In responding; it may be helpful to use the notations: "Always," "Usually," "Sometimes," "Never."

From the Co-Dependents Anonymous brochure, "What is Co Dependency"

1. I must be "needed" in order to have a relationship with others.
2. I value others approval of my thinking, feelings, and behaviors over my own.
3. I agree with others so they will like me.
4. I focus my attention on protecting others.
5. I believe that most other people are incapable of taking care of themselves.
6. I keep a score of "good deeds and favors," becoming very hurt when they are not repaid.
7. I am very skilled at guessing how other people are feeling.
8. I can anticipate others needs and desires, meeting them before they are asked to be met.
9. I become resentful when others will don't let me help them.
10. I am calm and efficient in other people's crisis situations.
11. I feel good about myself only when I am helping others.
12. I freely offer others advice and directions without being asked.
13. I put aside my own interests and concerns in order to do what others want.
14. I ask for help and nurturing only when I am ill, and then reluctantly.
15. I cannot tolerate seeing others in pain.
16. I lavish gifts and favors on those I care about.
17. I use sex to gain approval and acceptance.
18. I attempt to convince others of how they "truly" think and "should" feel.
19. I perceive myself as completely unselfish and dedicated to the well-being of others.
20. I assume responsibility for others feelings and behaviors.
21. I feel guilty about others feelings and behaviors.
22. I have difficulty identifying what I am feeling.
23. I have difficulty expressing feelings.
24. I am afraid of my anger, yet sometimes erupt in a rage.
25. I worry how others may respond to my feelings, opinions and behavior.
26. I have difficulty making decisions.
27. I am afraid of being hurt and/or rejected by others.
28. I minimize, alter or deny how I truly feel.
29. I am very sensitive to how others are feeling and feel the same.
30. I am afraid to express differing opinions or feelings.
31. I value others opinions and feelings more than my own.
32. I put other people's needs and desires before mine.
33. I am embarrassed to receive recognition, praise, or gifts.
34. I judge everything I think, say, or do harshly, as never "good enough."
35. I am perfectionistic.
36. I am extremely loyal, remaining in harmful situations too long.
37. I do not ask others to meet my needs or desires.
38. I do not perceive myself as a lovable and worthwhile person.

39. I compromise my own values and integrity to avoid rejection or others anger.

Common Roles Played in a Substance Abuse Family

Family members often take on certain roles within the family system. These roles are not set in stone and family members often take on different roles at different times in their life. Some of the most common roles are:

Enabler: The enabler is usually the individual emotionally closest to the addict. They watch over, protect and hide things to “help” the addict.

Hero: Usually the oldest child in the family takes on, or is given, the role of the hero. They are often perceived as being helpful within the family. Getting attention early in their life gives them a partial sense of worth and they often continuously strive to achieve approval and recognition. The hero is often the beacon of the family and represents for the family what is right with the family. Underneath the successful and confident exterior lies a sense of inadequacy and guilt. Part of these feelings are a result of the hero's inability to fix the family and the addict.

Scapegoat: The scapegoat is often the second child in the family. Since much of the family attention has been directed to the hero, the scapegoat gains attention by acting out and getting in trouble. Since they perceive they can never get the praise the hero receives, negative attention is better than receiving no attention at all.

Lost Child: The lost child is usually the middle child in the family. By the time the lost child enters the family, the family members are too preoccupied with their own behaviors and roles to allow for quality time. The lost child is often shy, introverted and withdrawn. Since they never had the opportunity to learn to socialize within the family, they find making friends difficult. To cope, the lost child turns inward and develops a fantasy life. The lost child is particularly vulnerable to the development of an addiction as they often use alcohol or drugs to comfort themselves.

Mascot: The mascot is usually the last one born into the family. The way they receive attention is to be funny, cute, and entertaining. When there is pain in the family they divert attention through making light of the situation. The mascot finds difficulty with growing up because they have been

rewarded for their childlike behavior. Since they have not been taken seriously in the family they often grow up feeling unimportant and inadequate.

Coping with an Alcoholic or Drug Addict

Often times, family member or friends plagued by addiction don't know what to do. Do you remain silent and stay with them or confront them and leave? Should you use tough love or tread gently?

If there is someone in your life that is having problems with drugs or alcohol remember that **you didn't cause the addiction, nor can you cure it, but you can contribute to the recovery of a loved one.** You cannot change their behavior, only your own. Below are some tips.

Don't regard Alcoholism/Chemical Dependency as a family DISGRACE.
Recovery from this disease can and does happen.

Don't nag, preach, or lecture. Chances are they have already told themselves everything you can tell them. They will take just so much and shut out the rest. You may only increase their need to lie or force them to make promises they cannot possibly keep.

Guard against the "holier than thou" or martyr-like attitudes. It is possible to create this impression without saying a word. Begin to look at your own attitudes and behaviors.

Don't use the "if you loved me" appeal. Since the drinking/using is compulsive and cannot be controlled by willpower, this approach cannot work. It's like saying, "If you loved me, you would not have sugar Diabetes."

Don't do for the alcoholic/chemically dependent persons what they can do for themselves....or that which must be done by themselves. You cannot take their medicine for them. Don't remove the problem before they can face it, solve it, or suffer the consequences.

Begin to understand and live ONE DAY AT A TIME.

Begin to learn the facts about this disease and the role that you have in it.

Be willing to assume responsibility for your own life completely and abandon any attempt to change him/her – even for their own good. Stop trying to manage their lives and begin to manage your own.

Begin to learn the 12 Steps as taught by Al-Anon and apply them to your life on a daily basis as a recovery program. Start with Step 1, admitting powerlessness over another person and recognizing unmanageability in your own life.

Be willing to recognize that your former methods have not worked.

Hold On. Change is never easy. The addict will probably accuse you of abandoning them, put guilt trips on you, or even threaten you. You must realize that this is because the addict does not want the current situation to change, no matter what they say. They need your help to continue the way they have been living, and losing you means they may have to face up to their problems they have been avoiding with their substance of choice. You are not responsible for them, their choices, or their actions, only your own.

Take care of yourself. Remember that you choose how to live your life, and you make choices of how you react to what happens to you. It's not your fault that someone else has an addiction. But you don't have to allow that person to negative impact your life because of their actions.

You Are Not Alone

Go to a 12 step meeting. Everyone there has been through the same thing you are going through. Nowhere else will you find a more sympathetic ear.

Resources

Al-Anon & Alateen Phone (888) 425-2666

<http://www.al-anon.alateen.org>

<http://www.al-anon.alateen.org/meetings/california.html>

CODA Phone (602) 277-7991

<http://www.codependents.org>

Adult Children of Alcoholics Phone (310) 534-1815

<http://www.adultchildren.org>

Families in Recovery Bibliography

Alcoholism and the Family

Gilda Berger; Franklin Watts; Dec. 1993

Beyond Codependency: And Getting Better All the Time

Melody Beattie; Hazeldon Info. Edu. July 1996

Chemical Dependency: A Family Affair

Oliva Curtio; Brooks Cole Pub. Co; June 1999

Co-Dependency: Issues in Treatment and Recovery

Bruce Carruth; Haworth; July 1989

Codependents' Guide to the 12 Steps

Melody Beattie; Simon and Schuster; March 1993

Codependent No More: How to Stop Controlling Others and Start Caring for Yourself

Melody Beattie; Walker & Co.; December 1989

Concerned Intervention: When Your Loved One Won't Quit Alcohol or Drugs

Mary Price Lee, Richard S. Lee; Hazeldon Info. Ed.; April 1999

Drugs and Codependency

Mary Price Lee, Richard S. Lee; Hazeldon Info. Ed.; April 1999

Good News for the Chemically Dependent and Those Who Love Them

Jeff Vanvonderen; Bethany House; March 1995

Love, Hope and Recovery: Healing the Pain of Addiction

Joann E. Breeden; Blue Dolpin Pub.; December 1993

The Alcoholic Family in Recovery: A Developmental Model

Stephanie Brown, Virginia Lewis; Guilford Press; Jan. 1999

The Family Therapy of Drug Abuse and Addiction

M. Duncan Stanton, Thomas C. Todd; Guilford Press; March 1999

We Can Help

Our professional and caring staff understands the dysfunction alcohol and drug addiction has caused in the family member's life. We have an effective treatment program for the addict and help for the family!

At New Bridge Foundation, we know that if you have been close to someone who is addicted, you have been affected. That's why we offer a Family Program component to our services. Our focus will not be on how to make someone else stop drinking or using, but rather, on how the whole family can recover - - what each person needs to do to start on her or his own path of recovery. The best support for the person you care about is to make sure you are healthy. For the family members, that means learning about chemical dependency and how it has affected you, then beginning to change the destructive patterns to healthier behaviors.

Come to our Family Support Group.

The group's purpose is to:

- Provide information and education about chemical dependency and recovery
- Provide support for the people most affected by an addiction
- Facilitate more honest and open communication between clients and family members.

Attend Al-Anon Family Groups or Nar-Anon or CODA (Codependents Anonymous). These 12 Step groups are specifically for people who are dealing with a chemically dependent person. These meetings will, over time, teach you many important ideas about the disease of chemical dependence and about family recovery. They can also be a strong source of emotional support for you. It is difficult to make the decision to participate in 12 Step groups, but it is more than worth the effort.

Read Recovery Literature to improve your understanding of chemical dependency problems and recovery. There are many excellent pamphlets and books that will aid your recovery.

You Need to Look After Yourself Now