



# Serene Scene

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LONG BEACH®

**SERENE CENTER**

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## THE CRITICAL EFFECTS OF LOYALTY

*Andrew Martin, MBA, CADC II, SAP*



Human beings are socialized to function in groups, villages, tribes etc. So it is no wonder that we have an innate need to interact with one another, trust one another, rely on one another, and help one another. We want to give one another the benefit of the doubt when it comes to precarious circumstances. We want to be loyal to our loved ones and our friends, and we want them to return that loyalty. These are normal needs, and in a normal life setting these needs work well for us. But what happens when the life situation is abnormal?

The disease of addiction definitely has a severe impact on life circumstances. Many of the behaviors of the addict are fundamentally narcissistic due to the nature of the disease. In fact, some of the most obvious signs of addiction are related to the addict's behaviors that do not conform to the norms of society. It is commonplace for the addict to lie, cheat, steal, and commit crimes in order to satisfy the self-serving short term needs of getting high. These actions are taken without thought to how these behaviors impact others; the thought process is focused solely on the immediate gratification of a perceived self-survival need. In short, the addict is not interested in mid-term or long-term results, nor is he/she interested in maintaining or developing any lasting relationships: these types of thought processes do not enter the mind of the addict. The addict is only interested in their selfish needs of the moment. This story may help to describe the impact of addictive behaviors and how loyalty is involved.

Jane is a 54 year old divorced woman with two children. She has been an alcoholic and addict since she had her last child 28 years ago. When her last child was six years old, Jane was desperate to obtain another prescription of opioids; however the normal doctors she was seeing to get the prescriptions would not provide her with another script. Jane found herself travelling into an area of the city that was known for drugs and violence: she had her six year old with her. She found a man on the street who said he knew where to get the drugs. Jane left her six year old in the car and followed the man into a rundown building. There Jane was shown how to shoot up heroin for the first time, and she found the euphoria to be intense. Jane was then raped by multiple men, and she found herself not caring that much. While Jane was inside the drug den, her vehicle where her six year old child was waiting was stolen for parts. The child was placed

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on the sidewalk in front of the drug den. It was hours before Jane's high dissipated enough to where she was able to make sense of the situation and went to check on her child: her child was nowhere to be found. Jane found her way back home and told her husband what had happened, he called the police. Fortunately, Jane's son was at the police station in the care of Child Protective Services after being turned in by a citizen. Jane's husband covered for her derelict behavior, and Jane agreed to see a therapist for her problems. Jane's husband also stopped allowing Jane access to any money. It was not long until Jane would prostitute herself, while her older child was in school, to raise money to buy her



heroin. On several occasions, Jane would have to bring her younger child along because she had no money for a baby sitter. When at home, Jane was usually high on heroin and was entirely incompetent as a parent. Often her six year old child would go all day without food, drink or supervision. Eventually Jane was arrested for solicitation and possession of narcotics. Child Protective Services launched a full investigation and the husband left with the children to stay with the children's grandparents. The six year old child desperately wanted to stay with Jane, despite how neglectful she was. Jane was sentenced to an addiction rehabilitation program where she desperately attempted to find the answer to live a sober life. After she returned to her home with her husband and children she quickly relapsed and sold her jewelry and some electronics to pay for heroin. Her husband filed for divorce, and insisted she maintain joint custody with their children as she was their Mother. When the children were staying with their Mother, the oldest child, who was twelve years of age, began to be the parent, taking care of Jane and the youngest child and reporting to Father everything was fine. On occasion, when Jane was sick with withdrawal symptoms, the oldest child would ride a bicycle to pick up drugs for Jane. One day Jane overdosed while her children were in the house. She was sent to addiction rehabilitation once again, and her children were awarded to her husband's sole custody by the courts. While in rehab, Jane attempted to take her life, leaving a note stating she could not bear the pain of the hurt she has caused her family.

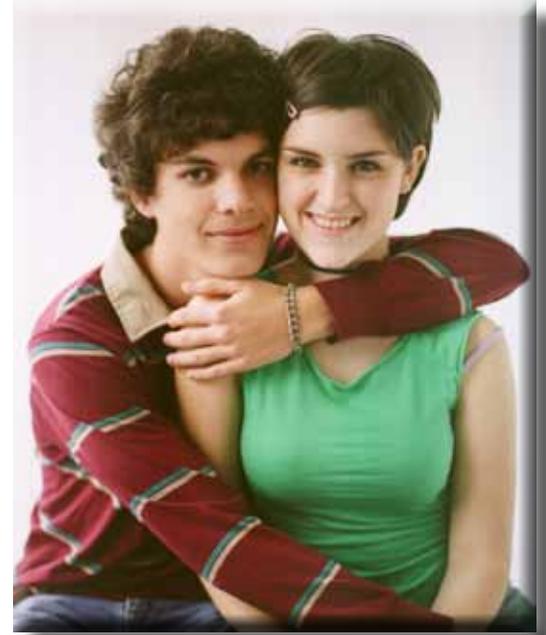
This sad story of turmoil and dysfunction represents many elements of loyalty gone awry. There is the husband who covers for his wife's addict behaviors and insists that a Mother needs to raise her children despite the danger of the relationship. There is the child who wants to be with Mother no matter the treatment received or the dangerous consequences. There is the child who feels it necessary to protect and take care of the family despite the child's age of twelve. And there is Jane, who's only loyalty was to herself: even when attempting to take her life her intentions were purely selfish and without thought of the impact such an action would have on her children.

In another example, John was a twenty year old addict with eleven months of sobriety and in residence at a sober living facility. John had many bouts with relapses and addiction treatment program since using primarily methamphetamine at age sixteen. He met a girl at a self-help meeting who helped him to feel excited and wanted. John became enamored with this girl who had a long history of relapses and bounc-

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ing in and out of treatment programs. The girl was sober for one week when John first met her and they had sexual relations for the first time. John was surrounded by people who attempted to talk to him about his choices, but John felt an intense loyalty to the girl and shunned his support system. One evening, the girl asked John to do drugs with her while they were having sex. John attempted to say no, but the temptation ate at his compulsive nature. John quickly convinced himself that the girl would not do anything that could hurt him because she said she loved him. John used heroin and cocaine with the girl that evening. John lost his job within a week, lost the support of his family and friends within two weeks, and was out of money soon after that. John started to burglarize cars and homes to support their lifestyle of drugging and living in motel rooms. John was inevitably arrested for home invasion and robbery. After being released from jail thirty days later, the girl had already found a replacement for John; someone who could provide the money for drugs and a sense of security. John was heartbroken but did not go back to using drugs. He worked on his sobriety very hard for the next three months. Then John saw the girl at a self-help meeting once again. She had been in the hospital and was sober for a few days, she told John she loved him and it was just her addiction that got in the way of her love. John decided she needed help with her recovery effort and began to see her every day. It was only a matter of weeks until both of them were back to using drugs and burglarizing homes to support their habit. The girl eventually left John for another man who had more money and a nice home. John found his way back to jail for three years.



This story exemplifies the type of loyalty that seems to be focused on another person, but is actually entirely self-centered. John's loyalty toward the girl was founded in his own desire to feel needed and to be the provider for another. Despite the girl's obvious use of John's intentions, he remained loyal to her. The girl's loyalty toward John was also self-serving as she only remained loyal as long as John was able to act as a financial provider for her.

As these stories exemplify, loyalty in an addict family system is often distorted. It is common for individuals to site loyalty towards another as a reason for acting out in unhealthy ways. Because this type of loyalty is often modeled within a family system with addiction, it is considered a normal part of life. An accepted sentiment in a family system with addiction is that every member of the family must come to the rescue of the one who is in trouble. This type of loyalty is damaging because it can lead to unhealthy behaviors by all members within the family system. Another habitual form of loyalty occurs when one or two parties in the family take charge of the addict's life in order to attempt to fix the addict. This type of loyalty ignores the fundamental needs of the addict to take responsibility for themselves and replaces it with a self-righteous form of control, often with the addict's full approval.

Healthy forms of loyalty are always identified with a clear set of behavioral boundaries. Healthy loyalty exists in a relationship with mutual reward, and the reward is not solely self-serving. Harold Laski stated, "A healthy loyalty is not passive and complacent, but active and critical." Loyalties are shades of grey, not black and

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white. And loyalty is earned.

For an individual in a family system with unhealthy loyalty, it can be a difficult task to practice healthy loyalty. One of the best places to get support for acting with healthy loyalty is in the company of a self-help group such as Al-Anon or Coda. A therapist can also be a tremendous help. No matter the place, it is very important to have candid conversation about loyalty, and how feelings and behaviors are being encountered in situations that require a sense of loyalty. With practice and reinforcement, healthy loyalty is obtained.



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