



Serene Scene

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Andrew Martin, MBA, CADC 1

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Photo by Dina Marie



Family Systems in Recovery

Addiction is a chronic and progressive disease affecting the body, mind and spirit of the individual with the chemical dependency. While this may be common knowledge, what is less likely to be understood is how addiction affects the family system. Anyone that is a member of a family system with addiction will tell you that the disease does not only impact the chemically dependent individual, but the entire family system as well. In short, addiction is a family disruption.

The family system includes blood relatives as well as significant others and other very close and/or intimate relationships: These are the people upon whom we grow to count on to support us through life's trials and share with us life's triumphs.

The family system is far more powerful than any one person within the system; that is why it is called a family 'system'. Likewise, when one individual within the family system becomes ill or otherwise displaces himself, the family system is impacted. This is what can occur with addiction, the addict becomes ill with the disease of addiction and the family system is directly impacted.

Family systems with addiction can take on one or several characteristics. Most notably are the following:

Denial: Individuals within the family system cannot accept the addiction problem, so they deny its existence or minimize its existence. Or, they accept the problem of addiction but transfer the responsibility to someone else.

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Boundaries: The separation between individuals within the family system become blurred or diminished creating an environment of over-control and/or over-criticism.

Rules: Family system rules become dysfunctional; don't talk, don't trust, don't feel.

Communication: Triangulated communication between family system members targets the addict; communication in general becomes guarded, dishonest, indirect, and possibly abusive.

Recovery: Family system members get involved in self-help and counseling efforts, they take care of their spirit and body, and they participate in life beyond their family system.

When discussing family systems it is also important to understand the difference between a nurturing family dynamic and a troubled family dynamic.

Nurturing Family Dynamic	Troubled Family Dynamic
<ul style="list-style-type: none">-Flexible-Rules promoting harmony and honesty-Boundaries promote individual identity-Communication is direct, open to feelings, and allows freedom to speak-Encourages growth and independence-Allows healthy conflict-Goals are appropriate and constructive	<ul style="list-style-type: none">-Inflexible-Confusing rules that are impossible to follow-Boundaries are rigid, or are absent-Communication is indirect and covert, and feelings are not valued-Rebellion and dependence are encouraged

The reality is that most family systems reside somewhere between a nurturing and troubled family dynamic. However, most families try to be more on the nurturing dynamic side of things and recognize when they move toward the troubled dynamic. This recognition is made more difficult in a family system with addiction because the rules of the family system interfere.

A family system with addiction tends to follow a set of rules resembling the following:

- **The addiction is the most important thing in the family's life.**
- **The addiction is not perceived as the cause of the family's problems.**
- **The family system must not be upset or put through any pain.**
- **Everyone in the family system must rescue those in need.**

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- **Family problems must remain inside the family system and be kept secret from the outside world.**
- **Individual feelings should not be disclosed.**

Additionally, a family system with addiction is usually comprised of individual fulfilling one or several roles. One model that is helpful in identifying family system behaviors is that of Sharon Wegscheider-Cruse. In this model, family members adopt various coping and enabling roles.

Caretaker

The caretaker role is often a carbon copy of the partner of the addict. They take care of the addict; getting drinks/drugs, cleaning up after the addict and soothing over stressful situations and events. They are validated by approval for taking responsibility for the addict and their behavior. This family member often goes on to become a partner of an addict or other dysfunctional person if they do not get treatment.

Family hero

The family hero role brings pride to the family by being successful at school or work. At home, the hero assumes the responsibilities that the enabling parent abdicates. By being overly involved in work or school, they can avoid dealing with the real problem at home and patterns of work-aholicism can develop. Although portraying the image of self-confidence and success, the hero may feel inadequate and experience the same stress-related symptoms as the enabler.

Scapegoat

The scapegoat role diverts attention away from the addict's behavior by acting out their anger. Because other family members sublimates their anger, the scapegoat has no role model for healthy expression of this normal feeling. They become at high risk for self-destructive behaviors and may be hospitalized with a variety of traumatic injuries. This family member is often considered the highest risk because of their association with risk-taking activities and peers. Although tough and defiant, the scapegoat is also in pain.

Lost child

The lost child role withdraws from family and social activities to escape the problem. Family members feel that they do not need to worry about them because they are quiet and appear content. They leave the family without departing physically by being involved with television, video games, or reading. These family members do not bring attention to themselves, but also do not learn to interact with peers. Many clinicians have noted that bulimia is common in chemically dependent families and feel this family member is prone to satisfy their pain through eating.

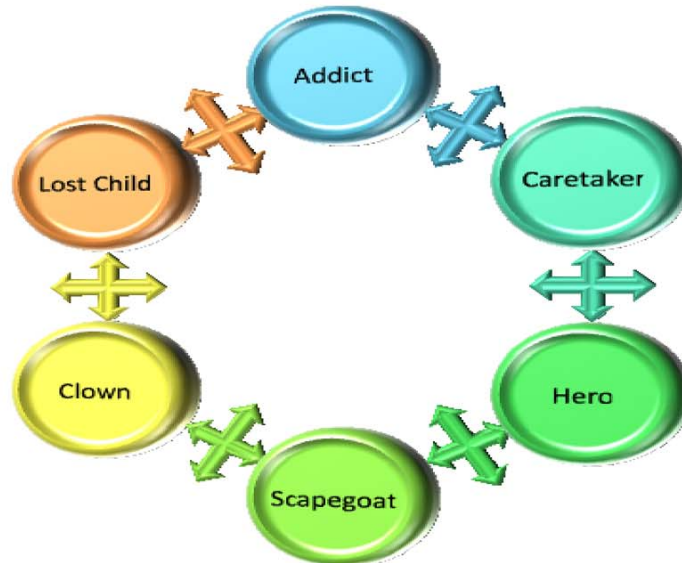
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Family clown

The family clown role brings comic relief to the family. Often the youngest child, they try to get attention by being cute or funny. With family reinforcement, their behavior continues to be immature and they may have difficulty learning in school.

As mentioned earlier in this article, the family system is impacted by the actions of any one individual within the system. This is a powerful tool in the family system that wants recovery because one individual can begin to effect the changes necessary for a progression toward a healthy and nurturing family system. The challenge for members of the family system is to recognize when they may be getting stuck in an unhealthy role, and to shift behaviors.



Recognizing when one is stuck in an unhealthy role is more difficult than it may appear to be on the surface. It is a tremendous challenge to recognize one's own thinking as healthy or unhealthy without a concerted effort and contemplation. Usually it is necessary for individuals to be guided in a series of questions that explore one's thought processes: this is called therapy. Since it is not realistic to have a therapist around all the time, one must be able to recognize getting stuck in an unhealthy role in other ways such as behavioral observation or asking others to disclose one's unhealthy behaviors.

One of the most valuable tools a person can learn is the skill of behavioral self-awareness. At first, it may take a serious effort to analyze one's own behaviors throughout the day; and over time, the self-awareness will become automatic.

The goal of behavioral self-awareness is to identify associated behaviors pertaining to the problem and/or the solution.

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As an example, the Caretaker may instinctually act on behalf of the addict in order to keep the addict from suffering the consequences of their own actions. In doing so, the Caretaker accepts responsibility for the addict in an unhealthy way. In order to shift out of the Caretaker role, the Caretaker must recognize that their behavior is unhealthy. If the Caretaker calls the Addict's boss to report that the Addict is ill and will not be coming in to work, when really the Addict is under the influence, the Caretaker is acting in an unhealthy way. It is the responsibility of the Caretaker to recognize that making the telephone call to the boss is unhealthy. Once recognized, the Caretaker will likely tell the Addict to make the call themselves.

While being aware of one's own behaviors is difficult, it is easier when others help out. Involvement in self-help programs is likely one of the most effective ways to construct a new support system of individuals with similar experiences. Self-help programs such as Al-Anon and Codependents Anonymous are terrific in educating family members about healthy vs. unhealthy behaviors, as well as providing support and community for shifting to more healthy behaviors. These self-help programs are valuable for all members of the family system, including the Addict. As an integral part of the family system's recovery effort, self-help is crucial.

Therapeutic support is also beneficial for many family members. Therapists are trained in methods for creating awareness when individuals are having trouble with self-disclosure. Therapists are also very useful when crisis or trauma results from an unhealthy family dynamic. Often therapists are included in family system sessions in order to encourage effective and healthy communication between family system members.

A family system in recovery will exhibit continual efforts to improve each individual's recovery, as well as the family system's recovery. While the road of recovery is challenging, it is one of the most enlightening experiences one can have. In building strength amongst individuals within the family system, the entire family system will be affected for the better. Everyone has the capability and ability to choose more healthy behaviors and a more healthy and joyous life. Choose recovery. **SS**

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