

SereneScene

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Interview with
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How to Help a Family
Member With a Drug or
Alcohol Problem

Effective Time
Management for
High Achievers, Part 3

By Andrew Martin,
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12-Step Trek
Worksheet

The Unbelief Challenge

By Sheryle Cruse

The FBI Intervened

By Mike P.



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How to Help a Family Member With a Drug or Alcohol Problem

A surprise phone call or a visit from a friend or loved one exposes a family member as having a drug or alcohol problem. Now what?

The natural inclination is to become skeptical of the evidence and opinions being expressed by the loved one or friend bringing you this worrisome message. After all, how could your family member have a drug or alcohol problem when you know them so well? Wouldn't you recognize the behaviors of an alcoholic or an addict within your family system? Perhaps your family member has done something to wrong the friend or loved one that is reporting to you. Could it be that the friend or loved one is out to cause problems for your family member? Perhaps the problem really lies with the friend or loved one, and the family member is simply a victim in a dramatic sequence of events.

This type of thought process is normal for someone who, for the first time, is hearing accusations that a close family member may have an alcohol or drug

problem. It is common for emotions to intensify and anxiety to flare. Most individuals will experience a form of denial when confronted with unexpected information, particularly when that information is potentially damaging to the family system. This form of denial is sinister in that the individual encountering the denial is not aware of their state of mind.




The best thing to do, when there are indications that a family member may have a drug or alcohol problem, is to get informed about addiction before making any decisions or taking any action with regard to confronting the family member. If you were to immediately confront the family member, who does have a drug or alcohol problem, and ask them if they are abusing drugs or alcohol, they will simply deny the allegations and create a series of lies that divert your attention away. Their intense and definitive reaction to your inquiry, combined with your state of denial, will allow your mind to calm itself by dismissing the problem. However, if you were to be informed about the disease

of addiction prior to confronting the family member, you will be infinitely better equipped to handle any response that family member produces. Furthermore, because addiction is complicated, if you do not have the necessary knowledge to provide genuine help to the family member your efforts may be counterproductive and delay the family member from engaging in an effort to find recovery.

There are many sources of information when it comes to drug abuse and addiction. When researching information, be careful that the information is originating from credentialed clinicians in the treatment of addiction. Discard information coming from non-credentialed individuals and individuals trying to sell their services or products as this information is often invalid and based on opinion rather than fact. One excellent source of information is the National Institute on Drug Abuse which is a United States federal government research Institute whose mission is to "Lead the nation in bringing the power of science to bear on drug abuse and addiction." Their website can be found at www.drugabuse.gov. Additional information can be found at www.serenescenemagazine.com and www.serenedirectory.com, both of which are affiliated with Serene Recovery Network and are free from commercial bias.

The Basics

Briefly, addiction impacts three areas of the addicts being: physiology, psychology, sociology.

Physiological	Psychological	Sociological
mechanical, physical and biomedical functions	mental processes and behaviors	metaphysical connection, emotional reverence
		

The physiological impact on the addict varies with the drug/drugs being used and the severity and frequency of use. In general, impairment of the vital filtering organs in the body is commonplace. Often there are symptoms identified within abnormal skin coloring, impaired fine motor skills, reduced body mass, intensified heart and respiratory rate, and prolonged cold and flu symptoms. There can also be obvious indicators

such as needle tracks on the arms legs and feet, or a constantly running nose, or dilated pupils regardless of light conditions. Erratic speech patterns, slurring of speech, staying up beyond 18 hours, and not being able to calm one's body are also indicators of potential drug use.

The psychological impact on the addict is severe. The disease of addiction creates an aberration in the genetic profile within the reward center of the brain. This aberration causes an inability for the addict to make appropriate choices when it comes to remaining abstinent from drugs or alcohol. Quite literally, the choice system is hijacked by the disease. This can be equated to a healthy individuals drive to eat, protect oneself, and procreate. The addict experiences an equivalent drive to escape perceived pain through the use of drugs and alcohol. As a result, the addict will go to incomprehensible lengths to ensure access to the drugs and alcohol that they desperately need to survive.

The sociological impact on the addict is equally detrimental. The addict learns to trust no one but themselves, and to treat others as tools or objects that can be manipulated to obtain the drugs and alcohol they need. It does not take long for the addict to lose all humanitarian connection with others. Shortly thereafter, the addict also loses touch with themselves as a person of value. It follows that the addict also loses any spiritual connection.

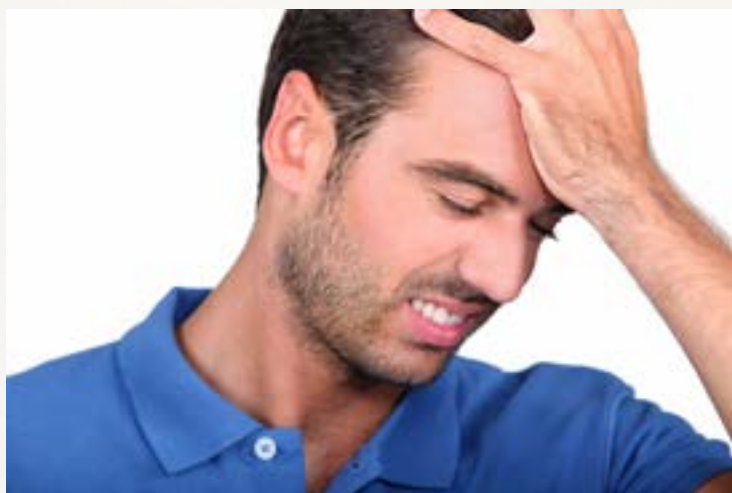
There is yet another significant impact that addiction brings to the table; that is the impact on the family system. Within the family system the addict manifests



as the problem that the remainder of the family system needs to solve. As a consequence others within the family system begin to sacrifice for the addict. Behaviors such as enabling the addict, avoiding the problem, and attempts to control outcomes are routinely exhibited within the family system.

How to Help

When the time comes to help a family member with a drug or alcohol problem there is usually a decision point pertaining to the addict's disposition. A determination as to the addict's willingness to accept genuine help must be made.



If the addict is not willing to accept genuine help in the form of treatment and continued care for their addiction, perhaps the best form of help is for the family to obtain family counseling and attend self-help meetings designed for the family system. This is suggested because it will be the family's job to discontinue all financial support, granting of shelter, and provisioning of food in order for the addict to experience the full negative consequences of their addiction. The family system must remain in contact with the addict, communicating with love and warmth that they wish to help, but help will only come when the addict commits to treatment and continued care. This task is tremendously difficult for family members who have strong loving bonds with the addict. Compounding the difficulty is the addict's uncanny ability to manipulate and lie, taking advantage of the family's strong desire to help.

If the addict is willing to accept genuine help in the

form of treatment and continued care for their addiction, the best form of help the family system can provide is to engage a credentialed recovery expert to conduct a full assessment of the addict and make recommendations for a treatment plan. If it is not possible to engage this type of an expert, then research the various approaches to treatment and help that are available for both the addict and the family system. A good source of information pertaining to the various approaches to treatment can be found at www.serenedirectory.com.

Once the addict has started their treatment plan, the family system should then engage in family counseling and attend self-help meetings designed for the family system. This is suggested because the addict will likely encounter obstacles in their treatment plan which seem impossible to overcome, and at these intervals the addict will revert to old behavior and attempted to manipulate the family system. It is also possible that the addict will undergo partial treatment and then leave the assistance of the professionals. The family system must know how to switch into a mode of loving the addict without accepting their unacceptable behaviors.



If the family system is supporting the addict through treatment and continued care, then the family system must remain in contact with the clinicians providing treatment. Furthermore, it is suggested that the family system attend the family programs provided by the various treatment facilities. This is because recovery must take place for the addict and the family simultaneously.

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