



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

## Family Education

*TAP 21 Competency: Describe how substance use disorders affect families and concerned others.*

### **Treating the Family**

Traditionally, the focus in treatment for those with substance abuse problems has been on the substance abuser, not on the family members surrounding him. Treatment professionals did not realize that the substance abuser had a profound effect on family members and others who often developed problems and unhealthy behavior patterns of their own as a reaction to the substance abuser. Not until alcoholism became recognized as a disease did treatment begin to address the problems of the whole family and its individual members, not just those of the substance abuser.

In dysfunctional families it is natural for family members to care for and be affected by the member who has a substance abuse or serious behavior problem. As this member's problems become more serious and unresolved, the family members become more affected and react intensely. This is a reactionary process in which the family members/involved people see the substance abuser or unhealthy member destroying himself. As a result, they become compulsively "dependent" on similar destructive behavior patterns of their own, such as work addiction, eating disorders, or unhealthy relationships with one person or many people.

### **Family Dynamics**

It's common for family and loved ones of people with a substance abuse addiction to try to cope with the situation in unhealthy ways. These behaviors may have developed over years and sometimes are a result of childhood experiences. In most cases, these patterns of behavior are accompanied by the best of intentions, as loved ones want to help the person.

The loved one is usually concerned for the person's safety and wants them to be in protective environment where they know they are safe.

It's a common myth that certain types of treatment will guarantee that the person will be "fixed". Often loved ones hope there is a "cause" for the behavior and that as soon as this can be identified, the addictive behavior will stop.



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

Loved ones may also resent the amount of time and energy the person must dedicate to recovery, and urge them to turn their focus away from recovery and more on the needs of the family. As the person recovers, they may resent the lifestyle changes necessary for long-term change, as well as their loss of the role of the “healthy one” in the family. For the healthiest recovery, all family members must work on their own “recovery” and learn new ways of operating within the new family.

### Codependent Relationships & Family Dynamics

Understanding codependent relationships and family dynamics (how the family interacts with each other) is complicated.

It’s a bit easier to begin by seeing what positive family dynamics are:

- Open communication is present, and it is honest, clear and direct
- Each person has goals and plans to reach those goals
- Each family member supports the others in reaching their goals
- Family rules are present, but open to change and flexibility
- The family sees itself as naturally connected to society
- Home is viewed as a place of safety and comfort
- When conflicts arise, the family discusses, listens, keeps an open mind, and looks for a positive solution

In reality, we all know that conflicts come up, temperaments clash, and feelings get hurt. But healthy family dynamics lead to a positive outcome that helps a family grow.

What affects one family member generally affects other family members. This can be good or bad, depending on the circumstances.

In dysfunctional families, like those based on codependent relationships, open communication and resolution of problems is extremely difficult. Stress affects each member of the family in specific ways, and therefore affects the entire family unit. Families with addiction as the hub of daily life are surrounded by severe and ever present stress.

Here are some behaviors that may be repeated over and over:

- Family members aren’t sure what they feel, so have difficulty sharing their emotions
- Family interactions or decisions are often focused around the addict or alcoholic
- Open communication is difficult, since a pattern of avoidance or denial has been set in place



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

- Blame and anger are often present, making it difficult for common solutions to be found
- Codependent family roles keep the addict from “hitting rock bottom”
- Family members do whatever it takes to avoid confrontation, chaos or pain

### **More about Addiction and the Family**

#### **Healthy Family System:**

- Self-worth is high.
- Communication is direct, clear, specific and honest and feelings are expressed.
- Rules are human, flexible and appropriate to change.
- It is natural to link and be open to society.
- Each person has goals and plans to get there, and should be supported by the family.

#### **Rules in a dependent or addicted family:**

- Dependents use of drug is the most important thing in a family life.
- Drug use is not the cause of family problems, it is denial which is the root.
- Blaming others, don't make mention of it, covering up, alibis, and loyalty of family enables.
- Nobody may discuss problem outside the family.
- Nobody says what they feel or think.

### **ROLES IN ADDICTION**

#### **Family Role 1, The Addict**

The person with the addiction is the center, and though the key to alcohol and drug addiction recovery, not necessarily the most important in family recovery. The "world" revolves around this person, causing the addict to become the center of attention. As the roles are defined, the others unconsciously take on the rest of the roles to complete the balance after the problem has been introduced.

#### **Family Role 2, The Hero**

The Hero is the one who needs to make the family, and role players, look good. They ignore the problem and present things in a positive manner as if the roles within the family did not exist. The Hero is the perfectionist. If they overcome this role they can play an important part in the addiction recovery process.



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

The underlying feelings are fear, guilt, and shame.

### **Family Role 3, The Mascot**

The Mascot's role is that of the jester. They will often make inappropriate jokes about the those involved. Though they do bring humor to the family roles, it is often harmful humor, and they sometimes hinder addiction recovery.

The underlying feelings are embarrassment, shame, and anger.

### **Family Role 4, The Lost Child?**

The Lost Child is the silent, "out of the way" family member, and will never mention alcohol or recovery. They are quiet and reserved, careful to not make problems. The Lost Child gives up self needs and makes efforts to avoid any conversation regarding the underlying roles.

The underlying feelings are guilt, loneliness, neglect, and anger.

### **Family Role 5, The Scapegoat**

The Scapegoat often acts out in front of others. They will rebel, make noise, and divert attention from the person who is addicted and their need for help in addiction recovery. The Scapegoat covers or draws attention away from the real problem.

The underlying feelings are shame, guilt, and empty.

### **Family Role 6, The Caretaker (Enabler)**

The Caretaker (Enabler) makes all the other roles possible. They try to keep everyone happy and the family in balance, void of the issue. They make excuses for all behaviors and actions, and never mention addiction recovery or getting help. The Caretaker (Enabler) presents a situation without problems to the public.

The underlying feelings are inadequacy, fear, and helplessness.

### **Addiction and the Family Roles How the They lead to Codependency**

The parts played by family members lead to codependency. Members make decisions concerning what the other person needs. Codependency leads to aversion and lack of self-orientation in a situation where an addiction is present. Ultimately people "become" the part they are playing.



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

The goal in alcohol and drug addiction recovery is to bring each member as a whole into a situation where the problems can be dealt with. Individual talents and abilities should be integrated into the situation allowing emotional honesty about the situation without guilt or punishment.

***\* The overall goal in overcoming codependency is to make each person whole.***

People become familiar with and dependent on the role they play in families. In overcoming the family roles you will begin to overcome issues and what could be classified as the addiction to the role. While the conquering of the substance is important to the person with the addiction, a point to remember is the substance(s) is not the key to family recovery; removing the underlying roles are.

In beginning recovery each family member must become proactive against the addiction to the role and learn to become their true self. The goal is for each to person to become independent and then approach the substance addiction recovery as a group of individuals, rather than as people playing a part. Whole, independent people can freely contribute to the recovery of the person overcoming the addiction. A person playing a part can only perform the role.

### **Help for Families in Addiction**

As addiction professionals we owe it to the family members and significant others of the active addict to provide resources for on-going support and treatment. Education in these areas is of great importance. It is necessary to remember that even if the “addict” does not achieve recovery their family and/or significant absolutely can!!

Families and significant others can opt to attend family therapy and/or couples counseling or individual counseling (if the addict continues to use).

### **Family Systems & Recovery**

Systems theory proposes that all systems like the maintain balance and harmony. The common expression, "Don't rock the boat" aptly describes a system's need to maintain balance.

Therefore, every individual within any given system participates in the maintenance of that balance. However, if the natural balance (status quo) of a system is dysfunctional, then the system serves to maintain that dysfunction. In other words, it would "rock the boat" if we tried to improve the systems functioning. This is how some dysfunctional systems can promote and



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

foster addictive behavior for some individuals in that system. With respect to addiction, the principal system of interest is the family system.

Like all systems, families operate to maintain a balance. Usually this entails activities and pressures to avoid conflict, hostility, aggression, or other things that leads to disharmony. The cost of maintaining this balance can be quite high. When someone in a family attempts to discontinue their addiction, it affects all the family members. In other words, recovery "rocks the boat."

Recovery involves family therapy that evaluates the family system. This evaluation serves to uncover hidden forces that serve to continue dysfunction. These forces have allowed addiction to flourish. Once these forces are identified, family members work together to foster a more functional family system that does not promote addiction.

Bowen (creator of Family Systems Theory) proposed that the problems of one family member cannot be understood apart from those of all other members. And so it is also true with recovery.

In addition to treatment are support services/groups. The following are a list of a few.

### **Helpful Links for Family and Friends of Addicts**

- [Al-Anon.org](http://al-anon.org) (al-anon.org) For family members of alcoholics.
- [Nar-anon](http://nar-anon.org) (nar-anon.org) For family members of addicts.
- [Gam-anon](http://gam-anon.org) (gam-anon.org) For family members of gamblers.
- [Coda.org](http://coda.org) (coda.org) For co-dependent individuals.
- [Adultchildren.org](http://adultchildren.org) (adultchildren.org) For adult children of alcoholics and addicts.

***Instructor Note: The role of the family and significant others in the client's treatment and aftercare is huge; just as the impact of addiction on families and significant other's is huge, pervasive and all-encompassing when left untreated. Families operate in a system, as system that tries to function no matter how disrupted the system is by addiction. In order for an individual to heal and recover so must the individual's family and/or significant others. As long the client/individual plans to return to that family system then that system needs to be educated and treated as well. Never underestimate the power of the family system both positively and negatively.***



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

## Don't Forget Life Skills

*TAP 21 Competency: Teach life skills, including but not limited to stress management, relaxation, communication, assertiveness, and refusal skills.*

### **Psycho-education for Clients and Families – Individual and Group**

---

Psycho educational groups are designed to educate clients and their families about substance abuse, and related behaviors and consequences. This type of group presents structured, group-specific content, often taught using videotapes, audiocassette, or lectures.

Psycho-educational groups provide information that aims to have a direct application to clients' lives, such as instilling self-awareness, suggesting options for growth and change, and prompting people using substances to take action on their own behalf.

Some of the contexts in which psycho-educational groups may be useful are:

- Helping clients in the pre-contemplative or contemplative stage of change to reframe the impact of substance use on their lives, develop an internal need to seek help, and discover avenues for change.
- Helping clients in early recovery learn more about their disorders, recognize roadblocks to recovery, and deepen understanding of the path they will follow toward recovery.
- Helping families understand the behavior of a person with a substance use disorder in a way that allows them to support the individual in recovery and learn about their own needs for change.
- Helping clients learn about other resources that can be helpful in recovery, such as meditation, relaxation training, anger management, spiritual development, and nutrition.

Principal characteristics:

Psycho-educational groups generally teach clients that they need to learn to identify, avoid, and eventually master the specific internal states and external circumstances associated with substance abuse.



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

Leadership skills and styles - Leaders in psycho-educational groups primarily assume the roles of educator and facilitator.

Techniques - Techniques for conducting psycho-educational groups are concerned with (1) how information is presented and (2) how to assist clients to incorporate learning so that it leads to productive behavior, improved thinking, and emotional change.

### **Life Skills**

---

Many chemically dependent people have hidden deficits in basic life skills (e.g., knowing how to balance a checkbook, prepare a meal, and accept feedback from an employer). While these deficits are as individual as the client, it is of momentous importance that treatment programs address a range of instrumental skills (e.g., meal preparation, money management, laundry, resume writing), as well as some basic social skills, particularly those needed in employment and other interpersonal situations. In addition to the findings of the assessment or bio-psychosocial counselors should also observe clients to identify problem areas.

Among the skills most underdeveloped in substance abuse clients are basic problem-solving skills. Because of their impulsiveness and difficulty delaying gratification, many clients are particularly poor at breaking down moderately complex problems into the few basic steps required to get from problem to solution. Practice is needed to learn clear problem identification, generation of options, thinking through likely outcomes, option selection, trying out options, and reviewing outcomes.

### **Life Skills and Recovery**

Many addicts, alcoholics and those with co-occurring disorders lack basic life skills. The stress of leaving treatment and reintegrating into the larger community can be intense and challenging for some including those with [co-occurring disorders](#). Those who haven't received the information and experiences needed to avoid relapse or haven't incorporated the tools from treatment are at greater risk of relapse.

For most substance abusers, the basics of living day to day were never learned. Addictive behavior and thinking has destroyed the recovering substance abusers' ability to function calmly on a daily basis. Many treatment programs have incorporated aspects of daily living requirements to help ease the shock of moving from treatment back to everyday life.





6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

#### Some Life Skills that Strengthen Recovery:

- Educating clients about the benefits and impact of healthy nutrition is an important component of recovery and in rebuilding the body and mind. Since most alcoholics and addicts are in poor health it is always beneficial to implement a psycho-education group where clients can learn healthy eating habits, shopping for food, and cooking their food. Discussions about money and budgeting are also significant as these conversations prepare clients for aftercare and for living in a halfway house or independently.
- Clients often need to learn responsibility for cleaning their rooms and organizing their belongings. They are responsible for their own laundry. Clients also need education on how to follow dress codes that must be adhered to in various life/work situations and settings.
- When working with clients with co-occurring disorders, medication management as a life skill is crucial, as well as identifying healthy self-productive behaviors that stop a relapse from occurring.
- Learning social etiquette is extremely important to function in the daily world. No longer living in a world of drug and [alcohol](#) use, clients must learn how to engage in conversation, participate in healthy interactions, modulate emotions (not suppressing emotions), and more. This process provides clients with self-awareness and understanding of the interactions required for clear communications.
- Personal responsible such as getting up on time, arriving promptly to group, individual counseling or house meetings or being accountable are important skills for anyone hoping to function in daily life.
- Finally, life skills include learning how to enjoy one's self without drugs and alcohol. Most treatment programs take clients go to the movies, bowling, play laser tag, go to the beach and go boating etc. to establish fun, laughter and good times not associated with the use of drugs and alcohol.

***Final Instructor Note: Never underestimate the importance of teaching daily living skills to your clients. Just because your client is an adult do NOT assume they have practice completing simple daily***



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

*tasks like waking up on time to go to work, brushing their teeth, eating breakfast, prepping lunch, washing clothes etc. Most of our clients have been using for a very long time, and for that time drugs/getting high/getting the drugs/getting the money for the drugs was the center of their daily life; not taking care of themselves, their hygiene, their nutrition, their careers etc. But that is what will be expected of them by their families, significant others, future employees, friends etc. This could be more daunting than anything else we ask clients to do in their newly obtained sobriety. Don't set your client up to fail, make some of their treatment plan goals and objectives around practicing these daily living skills and when your client is able to wake up the same time for a week, make breakfast and follow a written daily plan give them big high fives, compliments, be their cheer leader, stress the importance of taking care of themselves, their presentation and their health. This will give them a boost of ego strength and confidence and empowerment. This is your job, our goal and hopefully your passion.*

## References

1. Road to Recovery 201-1: "Prevention and Early Intervention for Substance Use and Mental Health Conditions: What's Working, What's Needed?".[www.recoverymonth.gov](http://www.recoverymonth.gov)
2. Arthur, M. W., J. D. Hawkins, J. A. Pollard, R. F. Catalano, A. J. Baglioni, Jr. (2002), "Measuring Risk and Protective Factors for Substance Use, Delinquency, and Other Adolescent Problem Behaviors. The Communities That Care Survey," Evaluation Review, 26(6): 575–601.
3. Leading Change: A Plan for SAMHSA's Role and Actions 2011–2014, October 2010
4. CSAP's National Center for the Application of Prevention Technologies: <http://captus.samhsa.gov>
5. SAMHSA's National Registry of Evidence-based Programs and Practices: <http://www.nrepp.samhsa.gov/>
6. Prevention as intervention: The success of a universal prevention program among early adolescent substance users, Stephen Kulis et al, Southwest Interdisciplinary Research Consortium, Arizona State University, supported by the National Institutes of Health/National Institute on Drug Abuse grants funding the Drug Resistance Strategies—Next Generation Project (R01 DA14825).
7. Substance Abuse. Health People 2020. [www.healthypeople.gov](http://www.healthypeople.gov)
8. Substance Abuse: Magnitude. NIDA Archives.
9. Preventing Adolescent Substance Abuse. Hazelden Betty Ford Foundation. 2014



6555 NW 9<sup>th</sup> Avenue, Ste. 210 | Fort Lauderdale, FL 33309  
(954) 771-2091 – Fax (954) 771-2098

10. Codependent Relationships and Family Dynamics. The Recovered Family 2014.
11. Roles in Addiction. Learning Circle 2011.
12. Family Roles in Addiction and Codependency. Hopelinks 2014
13. Cultural Competency and its Impact on Addiction Treatment and Recovery, Curtis Upsher Jr., MS. Resource Links, Vol. 7, Issue 2
14. SBIRT: Screening, Brief Intervention, and Referral to Treatment. SAMSHA 2014.
15. Medical Consequences of Drug Abuse. National Institute of Drug Abuse, 2012
16. HIV, AIDS, and Viral Hepatitis. SAMSHA 09/2014.
17. Addiction and Sexually Transmitted Diseases. Alcoholrehab.com, 2014
18. Substance Abuse Treatment: Group Therapy. SAMSHA TAP Guide from TIP 41
19. DrugFacts: Nationwide Trends. National Institute on Drug Abuse. January 2014.
20. DrugFacts: Treatment Approaches for Drug Treatment. September 2009.
21. Alcohol Use Disorder: A Comparison between DSM IV and DSM 5. National Institute on Alcohol Abuse and Alcoholism. November 2013