SUBSTANCE ABUSE AS A FAMILY DISEASE

Part II: The Family in Recovery

When an addicted family member finally enters recovery, the rest of the family often breathes a collective sigh of relief. For months or years, they have likely experienced many emotional responses to the chaos of substance abuse – anger, fear, embarrassment, frustration, disappointment, and helplessness. With the addict’s sobriety, the family members sense that the nightmare is over, the painful feelings are in the past, and their loved one will rejoin the family as a fully participating member. At long last, the family can now return to normal.

Such hopeful anticipation is common, but it fails to consider that family dysfunction has become the norm during the period of substance abuse. The void created by removing the problematic substance is not automatically filled with healthy feelings and behaviors. Non-addicted spouses and partners may continue to experience lingering resentments, find it difficult to engage in conversation, and feel uneasy about reestablishing a close relationship with their newly recovered family member. Children may have found alternatives to home as a place of safety, continue to suffer from the previous absence of parental involvement, or simply have grown up and lost the opportunity to experience the presence of a parent kept unengaged by substance abuse.

Families need to recognize that recovery is a process, not an event. The family’s working dynamics, previously skewed by substance abuse, will essentially need to be dismantled and reconstructed. Achieving sobriety is the first step – a courageous act to be regarded with gratitude, respect, and acceptance of the addiction as a disease. All family members who are willing to become involved must then commit to maintaining an ongoing recovery lifestyle, which requires leaving behind old, unhealthy patterns of relating to each other. Recovery requires respect for the interests and rights of other family members, willingness to explore new ways of interacting as a family unit, and communicating legitimate needs without fear of rejection or ridicule. Each family will experience its own pace of recovery.

Early Recovery

By the time the substance-abusing family member first gets into recovery, the family has often existed in a state of denial about the addiction for some years. They have unwittingly created an illusion that all is well, or at least tolerable, and that they are a functioning family, if not a particularly happy one. Family members have often expended significant energy trying to ignore the elephant in the room, when possible, and work around it when necessary.

Personal self-care is a frequent casualty of substance abuse for both the substance abuser and the family. Given the attention paid to the substance abuser, other family members often ignore their own physical, social, and emotional needs. Attending to one’s self may seem to jeopardize the person’s role as protector or may feel self-indulgent. Similarly, poor lifestyle practices by the substance abuser are often difficult habits to break.
Healthy, effective communication also usually suffers with substance abuse. During early recovery, family members may find it difficult to express their feelings or constructively address normal tensions. Family interaction, previously characterized by either strained silence or heated arguments and accusations, can be challenging. The threat of relapse and a return to the chaos of the past is an ever-present and often unspoken fear that creates an uncertainty and tentativeness in how family members deal with each other.

The primary task of early recovery is for each willing family member to individually heal from the past and develop the skills to enhance his or her own well-being. Family members now need to attend to their own individual growth – to become reacquainted with themselves and their own needs. Without developing healthy self-care and communication practices in the early stages of recovery, family members will find it more difficult to address the inevitable recovery challenges they will face in the future.

Individual therapy, 12-Step or other recovery support meetings, professional association programs such as the Oregon Attorney Assistance Program, and the extensive alcohol and addiction literature available are among the vital resources that family members in the early recovery process should look to for much needed information and support. These resources will aid the family in:

- Learning about and accepting alcoholism and addiction as a disease;
- Understanding the impact of alcoholism and addiction on the family system;
- Learning to accept responsibility for one’s own actions and feelings;
- Developing a support network of others with similar experiences;
- Learning coping skills to address life issues without alcohol or drugs; and
- Learning to ask for help.

During the typical one- to two-year period of early recovery, family members must each seek the personal knowledge, healthy behaviors, and support system that will sustain them in the future stages of recovery.

Middle Recovery

During early recovery, committed family members focus their energies on their own personal growth, hopefully learning that they do not have the power to change others; it is only their own thoughts, feelings, and behaviors they can control. They learn that recovery for the family begins with recovery for the family members. Capitalizing on these and other awarenesses, the primary tasks of the middle stages of recovery are:

- Developing the ability to openly discuss past hurts and grievances;
- Developing a willingness and ability to share concerns and fears about recovery;
- Learning to recognize and respectfully communicate individual needs;
- Developing sensitivity to the impact of one’s actions on others;
- Learning to respect the recovery needs of other family members;
- Developing a positive vision of a life in recovery; and
- Continuing to develop resources that support willing family members.

The overarching goal of middle recovery is for family members to progressively integrate healthy change into each of their lives, building a foundation for change within the entire family system. There will, of course, continue to be periodic individual and family tensions and disruptions, some related to recovery and some not. Using the new tools and skills acquired, families in recovery will be able to meet and manage life’s challenges without reverting to old unhealthy behaviors and unproductive emotional responses.

Ongoing Recovery

Following the middle stage of recovery, the family will likely have established a reasonably stable environment in which ongoing recovery is the norm. Family members individually and collectively will by now hopefully view themselves as genuinely in recovery. They are creating a new legacy of sobriety and family recovery that includes new relationships, new patterns
of communication, and new skills allowing for open discussion about hurts from the past and hopes for the future. The tasks of ongoing recovery include:

- Understanding and respecting the power of addiction;
- Recognizing individual and family recovery as a lifelong process;
- Appreciating the need to focus on one’s own recovery, rather than that of others;
- Having the courage and willingness to let go of resentments; and
- Maintaining a consistent commitment to physical and emotional self-care.

When families commit to recovery and fully engage in the ongoing process, they are richly rewarded with an enhanced health and vitality that allows them to experience a new beginning and ultimately the successful restoration of their family.

Additional Notes About Recovery

One of the greatest challenges for families in recovery is to avoid the temptation to blame all problems on the addicted family member; the inclination is to believe that once he or she is sober, these problems will suddenly vanish. Rarely is this the case. Removing the addictive substance alone will not magically correct the dysfunctional behavior patterns of either the addict or the family. Recovery requires the commitment and involvement of each of those within the family willing to participate.

The principles of recovery apply regardless of the participation of the addict. If the substance-abusing family member refuses to abstain from using, the other family members can nevertheless move forward in their individual recovery efforts. Therapy, support groups (e.g., Al-Anon), and relevant literature are available resources and need to be accessed. To the extent possible, family members should establish explicit boundaries and rules making clear what behaviors will and will not be tolerated from the non-recovering addict. These actions should be taken not as retaliation, but instead as the family’s legitimate concern for the health and well-being of its members.
## Substance Abuse Part II – Additional Resources

Numerous resources are available to assist individuals and families in meeting the challenges of alcoholism and addiction.

### Books:

### Web sites:
- 12 Step Programs: [www.12step.com](http://www.12step.com)
- Al-Anon/Alateen: [www.al-anon.alateen.org](http://www.al-anon.alateen.org)
- Alcoholics Anonymous: [www.aa.org](http://www.aa.org)
- Marijuana Anonymous: [www.marijuana-anonymous.org](http://www.marijuana-anonymous.org)
- Nar-Anon: [www.nar-anon.org](http://www.nar-anon.org)
- Narcotics Anonymous: [www.na.org](http://www.na.org)
- National Association for Children of Alcoholics (NACoA): [www.nacoa.net](http://www.nacoa.net)
- Rational Recovery: [www.rational.org](http://www.rational.org)
- Women for Sobriety: [www.womenforsobriety.org](http://www.womenforsobriety.org)