



Making the Case for Family Recovery in Addiction Treatment

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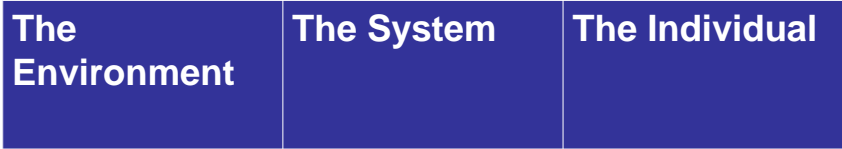
The Addictions Institute

The Addictions Institute is founded on the established research and treatment theories of Dr. Stephanie Brown, Director. The Institute integrates family systems and developmental perspectives to understand childhood and adult difficulties related to addiction and recovery.

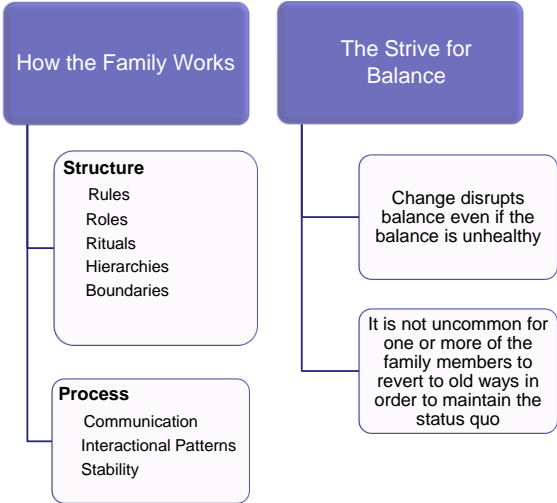
Making the Case for Family Treatment

Addiction treatment is incomplete if the family system is not addressed.

Domains of Experience



The System



The Individual

ATTACHMENT

Where is the primary attachment? Is the individual focused on his or her attachment to recovery or sacrificing individual attachment to recovery in order to maintain an unhealthy status quo in the system?

Addiction Defined for the Individual

“The process of becoming attached to a substance or behavior that interferes with forward, healthy growth and stops all kinds of normal development.”

Foundation

- Stephanie Brown PhD, "A Place Called Self" ©2004 Hazelden

Individual Development

Erik H Erikson
Psychosocial Developmental Tasks

Developmental Level	Basic Task	Basic Virtues
Adolescence	Identity Formation	Devotion and Fidelity
Young Adult	Intimacy	Affiliation and Love
Middle Age	Generativity	Production and Care
Older Adult	Ego-integrity	Renunciation and Wisdom

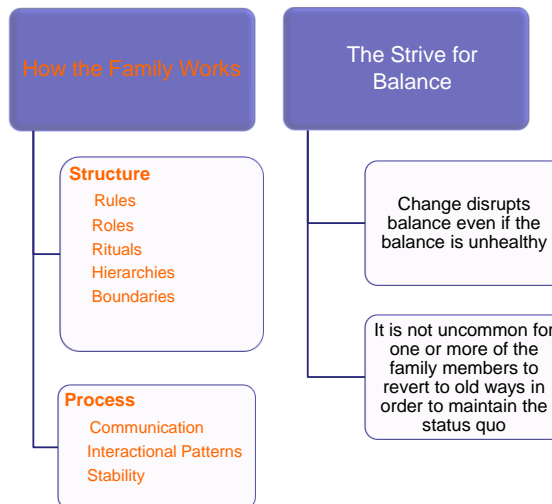
Individual Development Disrupted by an Attachment Disorder/Addiction

Developmental Level	Basic Task	Outcome of Incomplete Development
Adolescence	Identity Formation	Role Confusion
Young Adult	Intimacy	Isolation
Middle Age	Generativity	Stagnation
Older Adult	Ego-integrity	Despair

The Addicted Family

The addiction (i.e. disorder of attachment and loss of control in an individual within the family) becomes the central organizing principle for the family, controlling and dictating the family's core beliefs, behavior and development.

The System



How parents sacrifice the self and what they say in order to organize around and protect the addiction

- Parents become afraid to maintain rules (i.e. curfew, intolerance of drugs or alcohol) for fear that these rules will be broken and then the reality of the situation will have to be faced. Instead, parents absorb/internalize more and more worry and fear as their children spin out of control with a lack of boundaries
- Parents stop socializing with parents of similarly aged children
- Parents increase conflict in their marriage, often arguing about the addicted child
- “All kids experiment- my child isn’t any different”
- “I drank (smoked pot, had sex, etc) as a teenager and I turned out fine”
- Parents alternately hyperfocus on or neglect other children in the home

How spouses sacrifice the self and what they say in order to organize around and protect the addiction

- The partner (often both partners together) creates a narrative that explains away the addiction
 - i.e. “He is just a party person and likes to have fun.” “if the kids were easier, she wouldn’t drink at night”
- Spouse develops his or her own pathologies (i.e. depression, anxiety, alternate addictive behaviors) rather than confront the reality of the addiction to self or other’s
- Isolation
- The spouse –especially in the role of the other parent- trains other family members (sometimes even friends) to accommodate to the addictive behavior (this is how families end up “walking on eggshells”)

How the children sacrifice the self in order to organize around and protect the addiction

Erik H Erikson
Psychosocial Developmental Tasks

Developmental Level	Basic Task	Basic Virtues	Outcome of Incomplete Development
Infant	Basic Trust	Drive and Hope	Basic Mistrust
Toddler	Autonomy	Self Control and Willpower	Shame and Doubt
Preschooler	Initiative	Direction and Purpose	Guilt
School-ager	Industry	Method and Competence	Inferiority
Adolescent	Identity	Affiliation and Love	Role Confusion

The Family Recovery Project

Stephanie Brown & Virginia Lewis

Answered the question- "What happens to the family, the individual and the system when the alcoholic stops drinking (addicts stops _____)?"

52 couples and families with lengths of abstinence 79 days-18 years.

Family Recovery Project 9 Key Assumptions and Paradoxes

- 1) Abstinence is not recovery
- 2) Recovery is a developmental process, not a singular event and not a prescribed outcome

A couple with 8 years of recovery (Family Recovery Project Interview):

“The kinds of changes we were making at 5 years simply weren’t possible at 6 months, nor did they have the same meaning. Change is the result of the accumulated strengths of the new foundation. The positive energy of recovery gave us different attitudes, which changes the way we related to each other.”

- 3) Recovery is an interaction and an interactive process, meaning that there is no predetermined end or goal to achieve
- 4) This interaction creates a constant, what some might even call a chronic, tension within the family: the tension between the focus on the individuals and the focus on the family as a whole
 - Families need to tolerate ongoing ambiguity as part of this tension= high anxiety
- 5) AA, Al-Anon, and other 12-Step Programs are valuable sources of help for people who are facing addiction
- 6) Therapists can also be valuable sources of help for people who are facing addiction

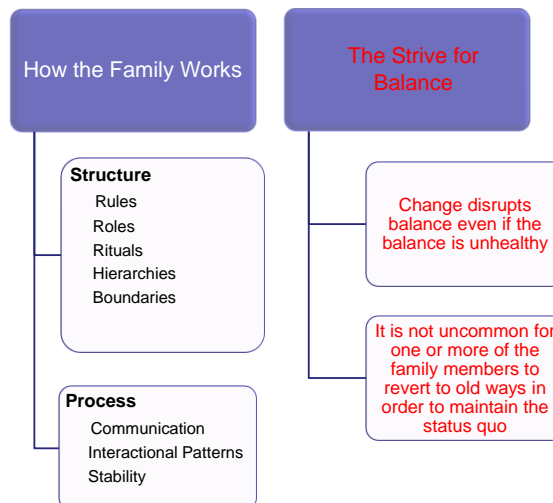
7) The model of recovery is transformational

- The individual(s) acceptance of loss of control
- Reaching outside of the family for help

8) The developmental model of addiction and recovery is organized by core beliefs about control

8) Recovery takes time

The System



The Stages of Addiction and Recovery

Drinking	Transition	Early Recovery	Ongoing Recovery
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Drinking/Active Addiction

The family is working hard to both deny and explain the substance abuse at the same time. They must deny that there is a problem and at the same time explain the behavior

The family focus is defensive and protective of the family secrets. Families take this to the end or the "bottom" because they fear that the truth will blow up the family and the family members have not yet differentiated themselves from the system

- regardless of how pathological the system is, the end feel like an end to the self.



Core beliefs in the family during the drinking/using stage

There is no addiction

There is no loss of control over substance use/addictive behavior



Transition

The family is beginning to recognize the reality of addiction and loss of control.

Either the system or one or more of the members of it may begin to challenge the denial of the drinking/using stage as there is a move towards "hitting bottom."



Focus during transition

The End of Drinking

Focus at the end of drinking is defensive. The goal is to contain the system as it is and to maintain the denial

The Beginning of Abstinence

The focus is still defensive but with a focus on staying dry.

The system must be allowed to collapse while everyone does their best to stabilize the environment and keep everyone's focus on the self



Reliance on outside support is very important here

Surrender to a loss of control and to support outside of the self



There is surprise and disappointment when abstinence does not signal an end to the chaos and disruption caused by addiction



Early Recovery

This is a time of a great deal of action and high emotion.

New recovery behaviors are being integrated and internalized as attachment to recovery begins to take more acute shape.

The focus continues to be on the individual rather than the family system.



Vulnerabilities during early recovery

Children

The children can feel abandoned in early recovery as the parents focus on themselves

Unequal commitment to recovery between partners and or family members



There is surprise and disappointment when abstinence does not signal an end to the chaos and disruption caused by addiction



Ongoing Recovery

Individual attachment to recovery and individual recovery is internalized and the focus can come back to the family.

This lays the foundation to rebuild family relationships in a new and healthy way

Families may also begin to re-engage in their broader community in new and different ways with recovery as their home base and consistent touchstone



Family Clusters

Type 1 Everyone is in recovery

Family members are speaking the same language. All members have acknowledged and surrendered to the loss of control that active addiction brought to their lives and have utilized resources outside of themselves that has led to understanding and change in all three domains



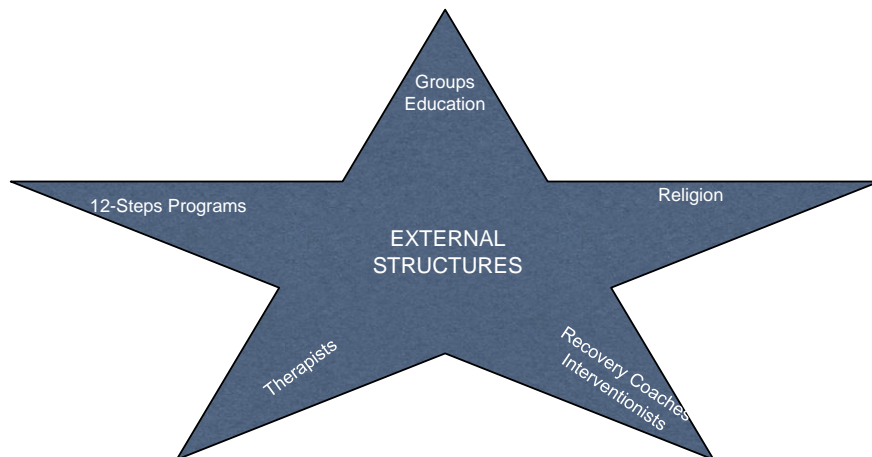
Type 2 Split or Mixed

There is a struggle when one wants something from another in the family that he or she cannot or will not give. There is tension and mistrust as the family struggles to find closeness while operating from different realities.
Family members are not speaking the same language

Type 3 Dry

The domains have not changed

Putting It Into Practice



Making the Case for Family Treatment

Addiction treatment is incomplete if the family system is not addressed.