



LEARNING MODULE I

Seminar # 1

The Family is a System

Learning Objectives:

1. What is the issue.
2. How can the issue impact the family?
3. What are the options.

What is the issue?

What we are seeking to learn is that a family is defined through several different criteria, it is a system, and it seeks balance within the relationship between the family members. So how well a family and its family members interact, is important to the family system. The interaction creates the family dynamic. And from this we have a family unit.

As the family is a dynamic of relationships between its different members, each member of the family brings to the family dynamic their own individual expression of self, or gifts and their talents of how they define and apply their love.

Because individual family members have separate ways of using who they are in the family dynamic, we find different levels of ***functionality*** in their contributions, meaning they might be good at bookkeeping as a functionality, and this might be their contribution when the family is discussing how to budget and pay for treatments of their loved one. They are functional in this area (budgeting) and it is their gift or talent which they are contributing.

Because the person has functionality in a certain area, does not necessarily mean they have the ***potentiality*** to contribute that function into the family dynamic or conversations. Given the example of the family member with bookkeeping skill, they may not be inclined to contribute because they feel helping the loved one with money and payments is the same as enabling their loved one to continue in the misuse of substances. Therefore, they are functional, but their potentiality is likely going to be limited. So, their potentiality is lowered because they are holding back. In this case they are functional to contribute but their potentiality to offer it to the family is low.

In this case the family member has high functionality but low potentiality to contribute. The reverse can also be true. This does not make them a good or bad person, it is simply a matter of understanding that we are all different, even though we are all in the same family.

Knowing this about the family member in advance can help the family to better understand each other and work together towards a family solution when addressing a family issue. Acceptance that we are all different even when in the same family is critical towards achieving family balance.

What is a family? That is the issue we are examining and focused on understanding. To understand ourselves we need to understand the context of where we live, how we are influenced, how we interact and whose opinions do we value.

There is no single definition of family. Because cultures and beliefs change over time, definitions of family also change. To follow is a list of today's definitions:

1. **Traditional Families**, including heterosexual couples (two parents and minor children all living under the same roof), single parents, and families including blood relatives, adoptive families, foster relationships, grandparents raising grandchildren, and stepfamilies.
2. **Extended families**, which include grandparents, uncles, aunts, cousins, and other relatives.
3. **Elected Families**, which are self-identified and are joined by choice and not by the usual ties:
 - blood
 - marriage
 - and law

For many people, the elected family is more important than the biological family. Examples would include:

- Emancipated youth who choose to live among peers
- Godparents and other nonbiologically related people who have an emotional tie (i.e., fictive kin)
- Gay and lesbian couples or groups (and minor children all living under the same roof) The idea of family implies an enduring involvement on an emotional level.

Family members may disperse around the world, but still be connected emotionally and able to contribute to the dynamics of their family's functioning.

For practical purposes a family can, be defined according to the individual's closest emotional connections. In family therapy, clients are asked to identify who they think should be included in therapy as family members. A counselor or therapist cannot determine which individuals make up another person's family. When commencing therapy, the counselor or therapist would typically ask the client, "Who is important to you? What do you consider your family to be?"

It is critical to identify people who are important in the person's life. Anyone who is instrumental in providing support, maintaining the household, providing financial resources, and with whom there is a strong and enduring emotional bond may be considered family for the purposes of therapy (*see, for example, Pequegnat et al. 2001*).

The family of one's workplace may be an example. As treatment progresses, the idea of family sometimes may be reconfigured, and the notion may change again during continuing care. Brooks and Rice (1997, p. 57) adopt Sargent's (1983) definition of family as a "group of people with common ties of affection and responsibility who live in proximity to one another."

We can expand that definition, though, by pointing out four characteristics of families central to needs of family therapy:

1. Families possess non-combativity, which means that the family is greater than—and different from—the sum of its individual members. If one person is a jerk, the rest of the family may be good.
2. The behavior of individual member is interrelated through the process of acquaintances, which means if one family member changes his or her behavior, the others will likely also change therefore, which in turn causes the member who changed initially to change. This also demonstrates that it is difficult to know what comes first: substance abuse or behavior types that are called "enabling."
3. Each family has a pattern of communication traits, interaction which can be verbal or nonverbal, overt, or subtle means of expressing emotion, conflict, affection, etc.
4. Families strive to achieve balance, which portrays family systems as self-regulating with a primary need to maintain this balance. In short, the family helps each other, as a natural process.

How can an issue impact the family?

All family's seek balance. The family understands (knowingly or not) their goal is to help each other in life and in so doing, to keep the family as a system "in-balance". When one family members' behavior becomes disruptive to the family unit, it causes imbalance in their roles, relationships, and communication. This impacts everyone and it does so in different ways for each member of the family. So we will need to understand what is the functionality of each member in the family, their ability to function in dealing with the impact of substance use disorders issues.

As the family responds to this undesired behavior, it compensates by adjusting. A general rule: The greater the behavior, the greater the required adjustments.

An example of this type of family dynamic would be taking a family of four, (two parents two children). Suddenly one child starts to present substance misuse behavior.

This draws the attention from both parents to that one child, absorbing their time and resources. The second child is left on their own while years of attention, stress and worrying become the family norm.

From a development standpoint, the second child has been emotionally and in many ways physical abandon. The family system is out of its order and it will likely take family therapy sessions to bring the family members back into alignment.

In family therapy, the unit of treatment is the family members, and/or the individuals within the context of how the family is defined. The person abusing substances is regarded as a subunit within the family unit. This person's symptoms now have repercussions throughout their entire family system. What they do, and how they behave is a matter of interest for everyone in the family. It is now a part of the family dynamic.

When the family members are in family counseling, the therapist facilitates discussions and problem-solving sessions, often with the entire family group or subsets thereof, but sometimes with a single participant, who are or may not be the person with the substance use disorder. The first area of focus is what is causing the imbalance and how does it impact the family.

It is only from this vantage point the family members can be clearer in how to move forward and make corrections to the imbalance.

What are the options?

It is in the ability of each family member to function at their best, *functionality* of each person, and their potential to contribute to the family dynamic *potentiality*, where we will find options of how to make improvements. So, family therapy involves strengthening the individual family members ability to function and potential to contribute, within the family dynamic.

There is a theory worthy of consideration, functionality. This means to what level is a family member prepared to deal with the impact of what has been delivered.

It starts as each family member has their own issues, but because there are many family members, each (independently) needs to determine how they will respond to a single issue. The family system consolidates these responses to achieve some combined outcome.

Example: each member has their own way of addressing their loved one's incarceration, but the family system allows their combined responses to achieve some single outcome, i.e., "we will all help him navigate the legal system". Even though they come at it from different perspectives, the result is a single combined outcome. They all showed up at the drug court hearings in his support.

The question is how well the family is EQUIPED to work together in a **FUNCTIONAL** manner? For many families they are not equipped functionally, although they seem to care about each other, and the family members seem to be functional in their own lives; as a family system is when functionality can become the issue.

Therefore, we have listed the Family System as a Key Issue for study by the family members. What happens when they interact and contribute as family members to the family dynamic. This becomes the environment for a successful and sustainable recovery in their loved one's overall recovery plan, or not. That is correct, a dysfunctional family can ruin the chances of a person in recovery to sustain abstinence or sobriety.

Q: Does your family have the ability and skills to respond effectively?

The other theory is potentiality, whereby one issue impacts the family members, and they all respond differently because they all have a different capacity to respond, thus creating several possible outcomes.

In this case, the legal system is intervening in their loved one's life and each family member choose their own way to respond, creating many outcomes. i.e., one member chooses to ignore it, even though they had the potential to help. Another member shows up to drug court in support of him, a third member criticizes him and provides negative input. It is the same issue, with different outcomes. This can present in the positive, also.

The question is how well the family is EQUIPED to use their **POTENTIALALITY** in support of the family unit? Do they have the capacity of coping skills and ability to use their functionality to the benefit of the family, if yes, are *they willing* to use them?

There is no right or wrong. However, the family needs to focus on how to navigate the journey, not why each obstacle (issue) that comes up must be addressed.

Therefore, the focus for the family is on "What has to be done, and How". Not why this issue happening. The blame game gets everyone, no where.

The Impact of Denial, Enabling, Codependency

Nearly everyone who is in contact with a person mis-using substance is impacted in some way. It is rare that the effects of an addiction are limited solely to this one who is abusing substances.

Frequently, the people who spend the most time around the addict are friends, family, and co-workers – therefore, these are the people who are likely to be most impacted by drug addiction or alcoholism. Our lives start to circle around theirs. And their life is circling around the drug of choice.

Family members, especially non-addicted spouses, are forced to pick up the slack for the substance abuser, making excuses for his or her behavior, and potentially endure sexual, physical, and emotional abuse.

In many cases, extended family members and close friends must help financially and in other ways to account for the ignored responsibilities by the substance abuser.

The children suffer in school and are more likely to be involved with drugs and alcohol as adults. Coworkers are not always as close to the addict, but they may also be affected by having to increase their workloads to make up for diminished job performance. Nearly every person in contact with an addict is impacted in some way.

When a family member is suffering from a substance use disorder, it can affect the entire family in countless ways. One of the most common is through a dynamic where family members are divided on the reality of the addict in their family. In other words, those that see the addiction for what it is and *those that refuse to see that reality*.

1. **Denial** is a common defense for family members that do not want to face the reality of the substance use disorder that is overwhelming their loved one. It is also common to find that other family members clearly see the problem of substance abuse, its costs, and there is a need for stronger intervention. The intervention is with the family member who is in denial.

The reality is that one or more family members understand that helping this family member will require some difficult emotional decisions. They understand how hard it is to do what is right. It is rarely an easy thing to move towards. Telling someone they are in denial is rarely initially met with acceptance.

The aware family members often see things as they are rather than how they were or would like them to be. Their decisions are based on what will help heal this family member and consequently, the family. This comes with an understanding that even beyond recovery; things will be forever changed from the time before their diagnosis. So, denial is not going to work.

The “aware” family members may be the families only way towards seeing this as a family dilemma. The fact that change is required is one of the greatest sticking points for the family members to address.

The other family member who is in denial are overwhelmed by emotions when they see the perceived magnitude of the addiction and sense of helplessness that this reality poses. They long to see things as they were before this took hold and will avoid seeing the signs in the early stages as well as make excuses for the extreme behaviors that come from the later stage in addiction. It is only going to get worse, until something changes for the addicted family member.

A family member who is in denial can take many forms including enabling and justifying. Both behaviors come in many forms and will further harm this person as well as the family that is divided on what is their new reality. See Seminar # 10 Enabling vs Consequences. There are Ten Types of Enabling.

2. **Enabling**, is when the family members *enable their loved one towards negative behavior*. This can take many forms. For example, it is a good thing to help a family member in need under most circumstances but doing so in certain circumstances where an addict is involved can make matters worse.

This enabling can be as simple as covering for them when they miss work to providing financial support when they are involved in a DUI. In any situation where family members take care of the problems created by their loved one's behavior, an enabling dynamic is present.

A family member's justification is often a "*denial tactic*" that comes to the forefront when the family member that sees things from a clearer perspective "**seeks to question the unwise intervention of the other family member who is in denial**". The family member in denial will make excuses for the behavior of this family member such as their being under a great deal of stress or going through a difficult stage of life. The reality is that we all have these periods in our life, and by enabling them, they are only exacerbated from this behavior.

3. **Codependence** can also be at the heart of the behavior of a family member in denial regarding their treatment of this family member. Although this is a complex dynamic the family member becomes reliant on this person's substance abuse. A simple explanation is that a family member comes to believe that they must support this family member even though their behavior is incredibly destructive.

The family member who is misusing substances uses their powers of persuasion to manipulate the emotions of each family member in denial by convincing them that they are "sick" and will perish without their help.

The codependent family member believes them and their fear that this family member will be harmed in some way guides this family members actions.

The codependent family member then becomes an accomplice in the addict's behavior and will lend them money or support them in their behaviors. As the cycle repeats itself, the codependent family member begins to derive satisfaction from "helping" the family member, which leads to even more destructive behavior.

All the dynamics of taking sides can manifest between parents when a child is a substance abuser, and between adult brothers and sisters where another adult sibling is the substance abuser.

This last scenario can pit the husband or wife of the person against their adult siblings from either side of the family. The only way to ultimately get the substance abuser family members the help they need is to have both sides see the reality of the addiction so that they can form a united front. This requires professional guidance and counseling.

REPEAT: Both sides of the family (those in denial and enabling with those who are not) need to get on the same page if they want to form a united front to address substance abuse in their family system.

When these scenarios manifest themselves, it is unlikely that the divided family members in question can resolve the issue of how to help. The assistance of a “***drug and alcohol counselor***” or ***family therapist*** can often provide the guidance to the aware family member as to how to cope with the family members who are in denial and stay the course.

The emotional wellness of the family living with a substance abuser is deep and takes time to reach the bottom to sort out the reality. The goal is to go through this journey without wasting time in arguments. The divided family must come to see a common reality sooner rather than later to provide the necessary support for the addict. This is the surest path to getting them into recovery and getting the whole family on the road to healing.

The Above Material REF: SAMHSA TIP # 39

Conclusion

In conclusion we now understand that one of the differences between family members is their functionality and potentiality, that the family seeks to achieve balance and that “how we define family” may be different than what we first believed.

But just having this awareness is not the end to our learning. Now we will use the *Family Solution Finder, Seminar Workbook Learning Module II* to apply this learning to our own lives through completing the practical exercises.

Then we will use the “The Family Solution Finder, 3-D’s Coping Skills Workbook Learning Module III. By apply this learning and the Family Practical Life Exercises of F.T.R to Determine a solution to the issue, Develop a decision, Design a Family Plan of Action. And then seek professional assistance in the family plan of action, using “The Family Solution Finder, Local Resource Connections Workbook Module IV. This is a solution finding learning system. You now have a starting point, for learning more about your family. We start here, because everything starts with the family and returns to the family. So, let’s take the time in the beginning to understand the family. From there we will build empowerment through knowledge.