



The Pathfinder Certificate of Completion Seminar

WORKBOOK ~ Practical Exercises and Learning Video's

Issue # Two of 12 key issues: The Addiction Behavior

Learning Objectives

1. Identify boundaries are needed
2. Assess Behavior
3. Create a plan on how to respond

Introduction



Issues the Family Faces

Normally, we would not start a workbook session with a video. However, this video so clearly states the introduction to this topic we could not miss the opportunity to let it guide our discussions.

VIDEO ONE



ASSIGNMENT VIDEO: On www.youtube.com/

Search Title: HOW TO—Set Boundaries when a Loved One has an Addiction

Link: <https://www.youtube.com/watch?v=rqrMhtXOHRU>

Duration: 9:04 hrs.

One mother spent years of her life trying to help a son who was heavily involved in addiction and other poor choices. She felt like a failure because she couldn't save her son from his choices. Her son spent years away from the family. As he began a slow journey back to building a relationship, she set boundaries of what she would and would not allow in her home. These boundaries protected her and ensured that she would not enable his addiction. Set Boundaries: "The boundaries we set will help us meet our spiritual, emotional, and physical needs and ultimately help us feel safe and at peace" (Principle 8: "Support Guide: Help for Spouses and Family of Those in Recovery"; read more here: <https://addictionrecovery.lds.org/spo...>). Bad choices thrive in secrecy, and deceit is its lifeblood. A turning point for our loved ones occurs when they recognize the role secrecy and deceit play in enabling their bad choices. When our loved ones lie to us or deceive us and minimize their bad behavior, we lose trust in them. Open and honest communication is the beginning of rebuilding trust. **Is it true;** setting boundaries in a way that you know they will be broken is likely not realistic.

You can expect boundaries to be broken by substance users – especially when they are first put in place. They will often react to changes by pushing you and other family members to previous ways of behaving. They will probably be less motivated to change than you are. They will also hope that you will be unable to keep boundaries. If a boundary is broken you need to respond quickly, appropriately and assertively.

Practical Exercise # One: How to do it?

The first step is to recognize and acknowledge that it has happened. Then take a step back as you consider your response. It is important to take time to consider everything rather than reacting from feelings of frustration and anger.

Responses:

- I believe our agreed boundary regarding ----- has been broken
- I feel ----- about this
- We need to discuss this. (You may need to negotiate whether right now is the time to have a discussion or to set a more appropriate time.)

In making your initial statement you need to include:

1. What behavior is unreasonable (focus on behavior, not them as a person). How will you do this?

2. What your feeling is about the behavior (feeling not blaming response). Describe what you are feeling?

3. Say what you want to do now or restate the boundary. What boundaries need to be restated?

For example – "When you broke the agreement about using in front of your brother I felt let down, sad and angry. I ask again that you honor our agreement". It may be necessary then to restate and/or renegotiate the boundary.

You also then need to implement the consequence for breaking the boundary. It is important that you don't let them off the hook for the consequences. You may need to develop a 'broken record' technique – especially if they become defensive or start justifying their actions i.e. "Yes, I hear what you are saying about why this happened, but I still need you to keep to the agreed boundary!"

It is important to comment on disparages in the drug user's words and their behavior – example – "I notice that every time something like this happens you always say sorry but then you carry on as if we didn't have an agreement".

You should then request that things be put right – repay money taken, apology to an affected family member, repair damaged property etc. Be consistent.

When making the above statement it is important to remember a few things because as with any new skill it needs to be developed, practiced and refined.

Be assertive but not aggressive. Begin with the word 'I', maintain eye contact, speak from the same level – don't stand over them. Avoid pointing, jabbing your finger or raising your voice. Be prepared for them to try and put you off track, appeal to your emotions, argue, get angry etc. You may even need to have another person as a mediator or negotiator but if you do it is important that they trust the other party and the other party doesn't take sides.

You are neither all powerful nor powerless. You do have influence and you do have bargaining power. You can ask for what you want, say no to what you don't want and invite them to do the same.

If they apologize, be gracious but consider both their words and how they say it. Actions speak louder than words though.



Obstacle the Family Addresses

Keeping a Boundary

The last stage in the process is keeping the boundary.

This is done by:

- Observing if the boundary is being kept
- Acknowledging that it is being kept or if it is broken
- Responding appropriately if it is broken

When Dialogue and Negotiation Doesn't Work

This maybe means that the first boundary to ask for is that there is to be dialogue and negotiation.

If your attempts to achieve negotiation have not worked, you may then have to impose it. This can be done verbally and/or in writing e.g. 'I notice that whenever I try to discuss your drug using in the house you seem unwilling to talk about it. I tried to talk to you twice last week and you said "later Mum" but it still hasn't

happened. I cannot stop you using drugs even though I don't like it and am fearful of about what might happen. I am worried that something illegal is happening in our house but am particularly concerned that you do it even when your young brother and sister are here.

I assume now that you are unwilling to cooperate with me on this and therefore, I am not going to buy food or cook meals for you. Further, I have said that if there is one more instance of your siblings seeing you use, I will have to ask you to leave. I regret it has come to this and would prefer it if we could now have an open discussion about your drug use and the impact on the family. I love you and will continue to no matter what and I will continue to have contact with you!

You will note that this letter:

- Addresses their behavior rather than attacks them as a person
- Gives the impact of the broken boundary
- Uses 'I' statements and not 'you' statements
- Asks for the boundary to be respected
- Is honest, open, direct and assertive
- Is not aggressive
- Is balanced
- Sets out the boundary clearly as well as the consequences for breaking it
- It leaves things open for further discussion, dialogue and negotiation
- It gives the substance user responsibility for their behavior and the choice they made

Communicating this way has three benefits. You get to say what is important to you and you say it in a way that is easier for the other person to hear. It also models good communication to the other person.

Setting A Boundary

Having thought about the boundary you would like to set and being prepared to talk about it, the next thing is to set it with the substance user. The skill to utilize is negotiation. It is important to build and maintain a dialogue between the user and other family members – this will work well if negotiation skills are utilized.

Effective dialogue involves:

- Listening to each other
- Being open and honest
- Respecting the other person – not necessarily liking their behavior
- Accepting and understanding their point of view – even when you don't agree
- Use 'I' statements. Start everything you say with 'I'. I think, I believe, I feel, I would like etc.
- Take responsibility for your actions and contribution to the situation
- Not taking responsibility for other people's behavior, actions and choices
- Acknowledging both your own feelings and the other person's feelings
- Appropriately expressing your feelings e.g. 'I am really angry that you are using in front of your brothers' rather than exploding and becoming aggressive

- Recognizing the need for all to exercise their rights and responsibilities
 - Work to collaborate rather than confront
 - Stay calm and focused on the task of setting the boundary even if the user loses control
 - Modelling appropriate behavior may bring them back on track

Effective dialogue builds trust, which can lead to people taking more risks with being honest, open and taking responsibility.

Using the transactional analysis model, we are trying to work with - Adult to Adult dialogue rather than Parent to Child or Child to Child dialogues.

Developing effective negotiation skills:

- Always look for win/win outcomes
- Asking for what you want – not demanding or avoiding asking
- Acknowledge power differences between you and the drug user
- Checking their response to your request and how they feel about it
- Not making assumptions regarding their feelings, thoughts or desires
- Collaborating and being flexible. Being prepared to give some ground and compromise
- Holding onto what is really important while being willing to let go of what is not important
- Start easy and if necessary, finish strong. Use your negotiation skills and then move onto imposition if necessary
- Agreeing the terms of the boundary – when it will start, when you will review it and the consequences of the breach of the boundary. Make sure the substance user is fully involved and understands what the consequences will be
- Make a clear agreement of what has been decided



Solutions to Issues & Obstacles

Defining The Boundary

- What is the issue, circumstance, area of concern?
- What do you need to achieve?
- Examine your motive in wanting to set this boundary. Is it in response to clear thinking about an area of concern or is it an angry response to a set of circumstances?

If the person wasn't using substances would you accept the behavior? In other words, it is important not to treat people differently just because they are substance users.

Know the distinction between them as a person and their behavior. Even 'I' statements can be phrased in more positive ways on occasion. Note the difference between:

'I don't want you living at home when you're using!' *and* 'I don't want you to use drugs in our home!'

1. Is the boundary encouraging them to be responsible for their life, the choices they made, their behavior and the impact on those around them or is it just treating them like a child?
2. What are the risks of the boundary for everyone involved?

Using the 'using at home' example, the home and people within it may be safer if there is no use at home but the user may be at more risk if they then use outside the home. There is no 'right' or 'wrong' answer. Options and consequences must be considered, and each family may take different approaches. Child safety and protection should always be a serious consideration. The rights of young children need to be the most important element.

- Set clear consequences for what happens if the boundary is breached. Consequences should be negotiated together including the substance user and may be graded from mild to severe. Consequences need to be appropriate to the breach and everyone needs to be able to live with them. Any action tied up in the consequence needs to come from you – the user may not be 'made' to do something.

Example:

'Because you used at home twice last week, I am going to look for alternative living arrangements for you' – *rather than* 'Because you used drugs last week you now have to go into rehab.'

- How will you 'measure' if the boundary has been kept?
- Is there a time limit on the boundary or does it go on indefinitely?
- How often and when will you review the boundary?
- What flexibility – and it will help if there is some – will be made for changes in circumstances?
- When and where will the boundary be set and commence?
- Other family members of an appropriate age who live in the home should be party to the agreement partly to prevent 'divide and rule' circumstances. It will be no good setting a boundary where the key people involved disagree with the boundary
- Is the boundary realistic now in the current circumstances?
- Can a win/win be achieved? In other words, set the boundary in a way that you, the other family members and the drug user gain something from keeping the boundary. Boundaries set as revenge or to express your anger or to punish the drug user are doomed to failure
- When will the boundary commence? Immediately or is there a need for a commencement date?
- How will you get support from within yourself or from others to be able to set and keep the boundary? How will you deal with harmful feelings and other issues that may arise? Support groups can be very important for supporting you
- Remember we live in the real world and not a fantasy one. The choice of a boundary is likely to be a compromise rather than the ideal you might like
- Be prepared to reward the drug user for respecting and keeping the boundary. They often don't get 'pay-offs' and it will encourage them if they see that keeping the boundary is appreciated
- Prepare and rehearse the discussion on setting the boundary. Imagine their likely response. Be prepared for negative reactions. Use 'I' statements. Rehearse the conversation going the way you would like it to.
- Remember your needs are equal to not greater or less than those of others. Your needs are worth respecting and you are entitled to set and have boundaries kept.

Take your time and get it right. You can't change other people but you can change your response to them – which may in turn invite them to change.

Ref: Family Drug Support Australia PO BOX 7363 Leura NSW 2780

FAMILY WORK SHEET How to clinician's assess behavior

It is empowering to know the tools being used in the care of your loved one. This is a list of evidence-based screening tools and assessment resource materials. Search internet for these documents.

Ask the clinical team how they use best practices in the care of your loved one. When seeking follow up information about their status ask how the best practice is helping in their plan of care.

The Story

VIDEO TWO

ASSIGNMENT VIDEO: On www.youtube.com/



Search Title: The Brain and Recovery: An Update on the Neuroscience of Addiction

Published on May 4, 2018 this is long video and is optional. However, it is valuable.

The last twenty years produced an explosion of understanding about addiction (substance use disorders) and how our brains enable our most human capacities such as assigning value to pleasure and making decisions based upon that value. This lecture summarizes the most current neuroscientific research about addiction -- research that explains how the brain constructs pleasurable experiences, what happens when this process goes wrong and why this can have a dramatic impact on our ability to make proper choices. By Dr. Kevin McCauley

Link: <https://www.youtube.com/watch?v=zYphZvRHm6Y>

Duration: 1:14 hrs.

By Dr. Kevin McCauley

How does choice work?

At its heart addiction is a disorder of the brains to perceive pleasure. T ___ F ___

Addiction is a disorder of choice. T ___ F ___

Addiction is caused by stress T ___ F ___

ASAM Addiction Definition There are five different systems in the brain that break. Which of these is NOT one of them.

___ Genes

___ Reward

___ Memory

___ Stress

___ Choice

___ Your Mother

Where does the brain fail?

Fontal Cortex is decision making T ___ F ___

Interior Singular Cortex aids us in using how we see our rewards T ___ F ___

Genetics: A person with genes that expose them to addiction can be reversed T ___ F ___

MASTER FAMILY PLAN OF ACTION FOR: "FAMILY IS A SYSTEM"

Complete answers and move to "Master Family Plan of Action" found in back of workbook.

1. Our family will identify the characteristic of our loved one's behaviors and address them using the FTR model from the issues these behaviors cause.
2. Our Family will use the Clinicians Assessment of Behavior scales to determine what to expect.
3. As part of the Master Family Plan of Action we will complete the review of setting boundaries and seek professional counseling on how the family members can support setting an appropriate level of boundaries.