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Busting Addiction and Its Myths Episode 7 Season 3

Let's start this essay with a simple, not-so-obvious truth: if you want to change things, the first place to look is inside yourself. It is said that we don't see the world as it is, we see the world as we are. So, it therefore stands to reason that in order to change things, we are the ones who need to change, and what needs to change is how we think.

There is a little story that illustrates the main point I wish to make today.

A father and his young son – the boy is 8 years old – are in dad's woodworking shop, and to give the boy something to do for a while, the father gives the boy a fairly complicated puzzle that consists of a map of the world. The boy comes back a little while later with the puzzle all solved perfectly and astounds the father. "How'd you do that so fast, my boy"? the father asks. The boy answers: "Well, dad, there was a picture of a man on the other side, and when I put the man back together, the world fell into place".

Wise young man.

So, what “things” do we want to change, exactly? How about this: we want our addict loved one to stop using and get straight and live a normal life, correct?

What if I told you that that will never ever happen as a result of any efforts on your part? Why is that? Let's start here:

A family member or loved one of an addict or alcoholic will at some point (we hope) reach out for help because life has become unbearable at home. Let's say she ends up with a qualified Alcohol or Drug Addiction counsellor, aka as an AODA.

Some family members will consult with a psychiatrist or even their own primary care physician in the mistaken belief that the good doctor or psychiatrist has any degree of knowledge about addictive disorder when the truth is this: the odds are better than 50% that the clinicians from who they seek help have little clue as to the nature of addiction. Most will approach symptoms of addiction, if they identify them at all, as the result of a causal factor, rather than treating it as a primary disease in its own right. That is the error that will have the doctors and the family looking in the wrong place.

So instead of treating addiction, they will treat what they believe to be the cause of it: stress, abuse, depression, anxiety, and so on. It's an easy mistake to make if you are not versed in the disorder. It sounds so believable. We want to believe it because if you treat the cause you can “cure” the disease and stop the destructive behaviour. We also want to believe it because there is still the stigma and the shame that comes with having someone in the family being labelled an addict. An addict in our family? God forbid! It sounds and looks much better if our boy were suffering from stress-induced anxiety disorder or from clinical depression, (which may actually be there but run concurrent with addictive disorder, but not be the cause of it) which requires a psychiatrist's attention.

The other factor in the diagnosis and treatment of addiction and alcoholism is the fact that active abusers of drugs and alcohol are so slick in their ability to evade the truth about what they are doing, what they are thinking and how they really feel about others and about themselves.

They will minimize the amount of alcohol they drink; they will lie about what drugs they abuse and how much they use; they will not reveal that they are afraid of what people think of them and that they desperately want to be accepted, and they will not disclose the self-hate that accompanies them on the journey to the hell of their own making. They will wear the mask of normalcy as long as they possibly can until it's cast away when the effort becomes pointless.

What the mom (in this example) thinks is that she can unlock the secret as to why her boy has become an addict and how to make him stop or at least moderate his behaviour. These are absurd ideas all the way around.

First, even the best scientists do not have the causal factors identified and will freely admit that the best they can do is to identify a propensity toward addiction and alcoholism, such as genetics, family factors such as abuse and addiction among the adults in the home, social factors such as friends, availability of street drugs, and so on.

Second, getting her boy to stop drinking and/or abusing drugs is a mighty undertaking; it is impossible if the willingness is not there for the addict. It is a truism that the addict needs to hit his own bottom before he will accept help. This concept is a tricky one since there are interventions that will bring the bottom up, so to speak. The other factor to consider is that the active addict's primary mission in life is to get high and stay high, ideally without paying any price at all.

I have mentioned this before: the addict doesn't see his drugs abuse as the problem, never mind the evidence. He sees mom as the problem because she stands in the way of his drugs and/or his drinking.

He is also as slick as they come. An example is the addict's attack and defend strategy. Let's say that mom confronts her son about those late nights or the nights he doesn't make it home until noon the next day and mom has been worried sick. He'll immediately counterattack by saying something like: "Well, if you hadn't been such a bitch about everything, I'd have stayed home". See what is happening?

Mom then goes into her defensive mode, wrongly believing that she owes this kid an explanation, and now as she defends her "bad" behaviour, the kid can make his getaway. He's off the hook, at least for now, which means he is no longer being held accountable, at least for the moment. That's all that matters to him anyway. He has engineered, quite intuitively, a brilliant and devious deflection. Now he can go right back to pursuing his mission: get high and stay high.

The vast majority of people who end up in counselling or in an Al Anon meeting come in believing the myth that they are there for the addict, to help the addict, when they are really there because of the addict. They have yet to understand that there is a reason why addiction is called a family disease.

They are simply shocked to discover that there isn't one chance in a million that they can ultimately do anything at all to force an addict or alcoholic to change his ways.

There is, however, the genuine prospect of an intervention, but I caution that it takes either a professional and/or a well-trained team to pull it off. For great advice about this possibility, read the book by Jeff and Debra Jay called *Love First, A Family's Guide to Intervention*. They give us a guided tour through the convoluted mind of the addict, revealing the things that the addict does to avoid, deny, sabotage, extricate, minimize, and escape responsibility for his actions.

Turns out that love is the one thing that the addict typically cannot deny, hence the name of the book: *Love First*. It is almost impossible for an addict to deny that his family loves him. It's one of the very few things that he cannot deny. He can deny he has a problem; he can deny that his life is a shipwreck; he will deny that he is stealing his family's oxygen and sanity.

The one thing he cannot deny is that there are a handful of people on this earth who truly love him; he cannot yet conceive of the idea that he will learn to love himself, because he is likely already filled with self-hatred and shame.

We now come to a critical point in the evolution of the family member seeking help for the addict's problem. I've seen it happen myself. As a grateful member of Al Anon, I've seen the look of disappointment on the face of a lovely and well-meaning new member when the light goes on and she asks: "So you mean to tell me there's nothing I can do about his drinking and using"? The answer is on the little signs seen in virtually all Al Anon meeting rooms everywhere: *Didn't Cause It. Can't Control It. Can't Cure It.*

This comes as quite a shock, and you would think the shock value alone (if the truth is recognized for what it is) would bring a light into the darkened room and keep it on, but the myth that a family member can do anything at all about their loved one's using dies hard. If she doesn't find the help she needs, the room will grow very dark indeed.

There is plenty of denial to go around, not just by the addict. The family has its own shame to deal with, not yet understanding that there is no shame in having a disorder and trying to cope with it in a constructive way.

It's when we make the turn away from focusing on the addict to "taking care of yourself" that the healing can start. Only then. Mothers feel understandably guilty that they are turning their attention toward themselves and feel as if they are "abandoning" their son. This is a difficult time for mom.

She might grasp the intellectual truth that there is nothing in her power to change her boy, but it is a heart-breaking emotional effort to shift the focus of her efforts, nonetheless. She is faced with smashing a cherished illusion and the need to begin to accept a totally foreign idea that the answers are within her, for herself and for no one else.

We come now to the need for mom to look at her own space. There is her inner space and as a corollary, there is her outer space. Let's start with the latter.

The concept of outer space in the context of recovery, is what exists outside of ourselves and how we relate to the reality around us. One way this shows up in a healthy way is that we "see" the boundaries of others, and we clearly express that we expect others to respect ours. I like to think of this concept as swimming in your own lane. We are in the same pool, and we do not cross the lanes of others and expect others not to cross over and violate our own.

Most people in an addictive relationship, moms and wives, dads and husbands, are so used to crossing boundaries in the attempt to control the addict's using that they do not even recognize that they are doing it, and do not understand that their behaviour is fundamentally unhealthy and built on a faulty premise. That is, that nothing we try to do to change our addicts' behaviour will have any long-term effect on his using short of an intervention.

The things that exist and happen outside of us, outer space- our beloved addict and his behaviour, our family and social relationships, our jobs – are directly affected by our own internal dynamics, by what I call our inner space. The space in our heads. This is where we need to look.

One the very first things one notices about family members in addictive, unhealthy situations such as living with an addict or alcoholic is how much head noise they endure, day in and day out. The addict lives in mom's head rent-free 24/7. The best she can do to free herself is to get completely immersed in something other than her obsession; often her job offers a distraction from her anxieties, or she may decide to start drinking just to numb her feelings – this is not an uncommon way to escape reality. Becoming a workaholic or an alcoholic are both common ways to avoid what is happening in mom's outer space.

What is she to do?

One life-changing moment that I experienced when I consulted a psychiatrist friend over my reactions to my own daughter's crazy addiction to cocaine in a city 1000 miles away, in Austin Texas, is the answer to a question I asked of him at the end of the hour. I asked him: "John, how am I doing with this? What's next?"

His answer has guided me to this very day: "Bruno, you're doing OK. Your AI Anon training is showing up in that you are not flying down there to find and rescue her, and you are at least going to work and getting in your fitness and

your sleep. But you are certainly obsessed with your kid otherwise. And miserable much of the time”. I answered: “Yes, you are seeing things clearly. But now what?”

This is what has stuck with me to this day: “Bruno, do not let your daughter’s disease steal your money or your peace of mind”.

I changed my thinking from that moment on. The voice of a trusted friend and authority was what I needed to change my attitude from taking things personally to taking the right actions in order to protect my money and save my sanity.

That gave me the permission I needed to travel to Texas and confront my daughter so that I could liberate myself - or better yet have my higher power liberate me - from the effects of the disease. I said: “No more rent, no more car, no more spending money. You are on your own. Go get help, but either way, I won’t pay another dime enabling your habit. You are a big girl. Get a job. Stop pretending you're going to school and needing money for this or that”.

It turned out that she checked herself into a rehab about three weeks later. I think I had her hit her personal bottom sooner than she might have otherwise had I continued to finance her personal adventures.

So that was a beginning in taking my mind off my kid, to let my higher power take care of her, and start to take much better care of myself. I got honest with myself and started to address my own resentments, my fears, my personal assets, and shortcomings, and started to envision a joyful future for myself.

I attended Al Anon meetings, and still do. I was in a position after a few years to be of service to others who were in the same boat that I had been in.

I took up the practice of daily meditation which helped me immensely to quiet the head noise and bring calm to my inner space, so that I could have an unobstructed view of the space outside; outer space no longer represented a threat.

Best of all, I am now able to be fully present for whatever happens. I can give you my undivided attention, honouring the moments that we spend together, instead of judging or labelling you in some unfair way. I believe in my heart today that we are all God’s children and you can accept my love or not. That’s up to you.

Here is what we learned today:

1. Families new to addiction carry the illusion that the problem is with their addict and do not yet know that they, too are as sick as the addict himself.

2. They believe that they have some control over their addict's behaviour and are shocked to discover that they have zero chance of affecting the addict's drinking and using over the long term.
3. Addicts and alcoholics get away with murder because they put the blame on the unwitting family member who accepts responsibility for a sick situation caused by the presence of the disease. She wrongly thinks that she has some control over her outer space.
4. Putting the focus on the inner space of the family member so that she liberates herself from the 24/7 obsession with her addict is the first step in healing.
5. The family will begin to understand that smashing a cherished illusion and accepting a foreign idea – that the answers to their suffering are within each of them as individuals, for themselves and for no one else.
6. This awakening will shine a light on the path to healing and to a joyful life that they truly deserve.

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