



AlcoholismAnswers.net

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<http://alcoholismanswers.net/Books2.aspx>

www.alcoholismanswers.net

<http://livinglifeboomerstyle.net/>

<http://alcoholismanswers.net/Forms.aspx>

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<http://grief-recovery.com/>

Ten Myths of Codependency

1. Only women are codependent.
2. Codependents are above average performing employees.
3. Codependents care too much about others.
4. Codependency doesn't have serious consequences.
5. Anyone who helps

During the thirty-plus years I worked in addiction treatment the family and friends of alcoholics have been subjected to a wide range of information, all the way from being told they caused the alcoholic to drink to they are innocent victims of alcoholism and a few other beliefs, some of which bordered on the bizarre. Let us sort through some of the last sixty years clutter about the family role in alcoholism.



Ernest Hooker, NCAC II



If you have friends who are interested in addiction treatment and recovery please forward this newsletter to them. If you have suggestions for a topic, contact me and, if possible, I will include the information in a newsletter.

Codependency, what is it?

In this sixth newsletter I hope to simplify codependency and sort out a few facts from myth. Due to space limitations of a newsletter I am not attempting to describe all areas of codependency and will only cover a few points of interest.

others is being codependent.

6. Codependents have to learn not to help.

7. Codependents are team players.

8. Healing from codependency is a life long struggle.

9. I will have to be harsh, tough and uncaring with people if I am not codependent.

10 My relationships won't be close if I am not codependent.

FAQ

Isn't codependency caused by the addict's behavior?

If you are referring to the children in the home that is very likely. If you are referring to adults in a relationship the answer is no. This is a convenient place for them to act out attitudes and behavior they had prior to the relationship. Certain types of jobs also are attractive to codependents for similar reasons.

Psychiatrist Timmen Ceremak gives us some insight into codependency with information from the books he has authored on the subject. I will encourage anyone seriously interested in the subject to read his books, which are excellent.

- Under-learning is one of the causes of codependency.
- Immaturity is present in codependency.
- If a person stays with a partner who is an active addict or has a serious personality disorder for two years or more without taking action the person has a codependency issue.

First let us consider some possible examples of under-learning. This results from growing up without adequate role models. I often think about people who have not learned what reasonable physical boundaries are. Most of us have encountered a person who attempts to stand almost on top of you - you move back and they move towards you again. It doesn't encourage you to make them your friend and it is really annoying. This doesn't mean they are not intelligent or well educated; it just means that they did not learn about physical boundaries as a child. Typically, codependents have inadequate emotional boundaries and this seriously impairs their social life, probably more than lacking skills with physical boundaries.

I remember a social worker who had many years of experience with family problems associated with addiction. Her understanding of codependence was excellent. She said it is about learning to mind your own business. A codependent person has no way of determining the difference.

Immaturity is present when an adult has not acquired adult skills and attitudes that are needed to function in everyday life. A child needs parents who can demonstrate how to behave as an adult or they have no way to become a mature adult. Having a parent with active addiction or an untreated mental health problem often will result in an adult who doesn't know how to behave. It isn't always true that growing up in this situation results in immaturity. Sometimes, fortunately, they have another relative or a neighbor who teaches them the skills they need.

If an individual grew up in a home with untreated addiction or mental illness it may seem normal for them to be with a partner with a similar pathology. So it may not even occur to them to attempt to demand change.

After many years of working with families of alcoholics I understand

Codependents have to have a recovery program for the rest of their life don't they?

No. With the right education, support and in individual cases specialized therapy they can make the needed changes and will not need to continue their effort. I have followed up on several codependents who broke the cycle. After one to two years they no longer needed to concern themselves with codependent issues and they functioned well in their relationships.

Next issue:

What help is available for a person trying to stop drinking or in early recovery?

codependency as behavior that *supports pathology in other people*. It helps the addicted stay using without facing the consequences of their own behavior. It supports the immature in continuing in their immaturity, it penalizes and ignores the healthy, and rewards the lowest common denominator.

I remember a patient who came in for detox. He had been very ill and confined to a bed for several weeks. He was in a bed with tubes running in and tubes running out and his wife sitting by his bed. He still smelled of alcohol. She said he just won't stop drinking. I asked her how he gets the alcohol; she told me he makes me get it!

When I am confronted with attempting to explain codependency to a codependent person I often think about an example a former colleague used. This describes the dilemma of codependency *"It is hard to see the picture when you are the frame"*.

Codependency is a very common problem among sober alcoholics and after being sober a short time it is not unusual for the recovering alcoholic to undermine their own recovery by exhibiting codependent behavior. I believe a reasonable estimate would be thirty percent of those who have a chronic relapse history, or a very difficult recovery, avoid recovery work by indulging in codependent behavior. There is a lot of misunderstanding about codependency characteristics. The term has been used so much in so many different ways that it has lost some of its usefulness.

Codependents are attracted to employment in the helping professions such as physician, social worker, nurse or therapist. Their burnout rate is very high, so their rate of ending up on a disability is much higher than average. Their use of sick leave is higher than average. There is often a pattern here: they initially work more hours than other employees, they keep secrets, and they soon believe they are the only ones who really understand how things should be run. They often complain a lot and secretly feel superior. They find it difficult or impossible to be a team player. After some months (or even years) they burn out and end up taking a lot of sick leave, quit or go on a disability.

Codependents are attracted to jobs that only have vague and general

descriptions with low authority and high responsibility. Then they can only perform their job duties by covert action. This is a familiar situation for them and a repeat of their childhood condition.

Codependents, like alcoholics, have a remarkable ability to assign themselves good motives for bad behavior and then believe it themselves. However, most of the time they don't fool others. An example would be advising an alcoholic in early recovery to go slowly in working the twelve steps because it might upset them and make them relapse. Unfortunately, they really believe they are just being helpful. That is like telling a diabetic to wait until their glucose is normal before taking their medication. In over thirty years in the treatment business I have *never* had an alcoholic patient come back after a disastrous relapse and complain that they completed a fourth and fifth step too soon. Many have said if only I had followed my sponsor's advice and completed the work he or she suggested. Yet many codependents continue to see the healing process as dangerous. They don't know that they don't know.

Another area that really baffles codependents is that regardless of a lack of any evidence to prove it, they are sure they are an excellent judge of character. A man meets a woman and everyone else knows she has terrible financial problems and shops until she is in deep debt with her credit cards or, for that matter, anyone else's. He believes it bad luck or just plain untrue gossip. When she helps wreck his credit his response is "But she said".

A man has a history of being late most of the time. His friend is furious when he is late again, he'd somehow expected him to be on time this time. Regardless of his past behavior he expects him to be different this time. It appears that the person is chronically naïve.

A man's wife's has a history of alcoholic drinking for over twenty years; she has drunk in good times and bad times alike. After her last drinking bout he brings her to treatment and says "I just don't know what set her off". The nursing staff is baffled - not with her but with him that after all these years he thinks she needs something to set her off, is he an idiot? No, he is a codependent and had years of training as a child to think that way. The world is a confusing place for him and he attempts to control

the uncontrollable.

For about three decades I trained interns to work in the addiction field. All had training, education and experience at group therapy, many had several years of experience. The most common problems I had in the early months of their training were their habit of focusing their time and energy on the patient most resistant to recovery. This left the motivated patients out of the picture; soon the groups would be negative and near rebellion. By focusing on the motivated patients at least as much or more than the resistant patients, soon the positive group attitude would even be hard for the most resistant ones not to change their attitude. Getting certain interns to see their own codependency is not an easy task. Codependency keeps narrowing the person's vision down to seeing only the one very resistant patient and no one else exists to them.


Here are a few ideas that have been helpful in producing long term results for codependents.

Attend Alanon, family programs associated with addiction treatment programs, and education on codependency.

Books that have been helpful: Facing Codependence: What It Is, Where It Comes from, How It Sabotages Our Lives By *Pia Mellody*, Andrea Wells Miller, J. Keith Miller and Diagnosing and Treating Co-Dependence: A Guide for Professionals Who Work with Chemical Dependents, Their Spouses, and Children (Professional Series) By *Timmen L. Cermak*. For an interesting overview of codependency there are several books by *Anne Wilson Schaef* that describe how codependency has undermined politics, mental health therapy and business.

Although *The 7 Habits of Highly Effective People* by Stephen R. Covey does not even mention codependency I know of cases where his information has been of great benefit to codependents.

A book on therapy that can be helpful to both alcoholics and codependents is *The Feeling Good Handbook* by David D. Burns. The Grief Recovery Institute is a powerful resource, go to the helpful articles.



The central issue with codependency is a subconscious belief system that goes unchallenged. It can be described in many ways and is the result of family rules that have been taught as a child. Some of these unconscious rules work for the person and some don't. The way people experience this unconscious thought process has often been described by patients. The patient experiences this when they say I am educated about codependency and I know how I should behave to feel better but it always takes so much effort and as soon as I relax the old behavior is back, it is like a rubber band pulling me back. When that is going on it is the old unconscious thought pattern that is running the show and it won't change until that is challenged at the conscious level.