

JUST THE FACTS

CODEPENDENCY

AN EDUCATIONAL FACT SHEET FROM
THE FLORIDA ALCOHOL & DRUG ABUSE ASSOCIATION

TREATING THE FAMILY

Traditionally, the focus in treatment for those with substance abuse problems has been on the substance abuser, not on the family members surrounding him. Treatment professionals did not realize that the substance abuser had a profound effect on family members and others who often developed problems and unhealthy behavior patterns of their own as a reaction to the substance abuser. Not until alcoholism became recognized as a disease did treatment begin to address the problems of the whole family and its individual members, not just those of the substance abuser.

Codependency's origins can be traced to assessments of how non-alcoholic family members were affected by a family member's alcoholism. The term codependency later came to include exposure to life in any dysfunctional family, not just an alcoholic family. A dysfunctional family is defined as a family that functions in abnormal and unhealthy ways. Dysfunctional families include those having other substance abuse problems such as cocaine addiction or unhealthy behavior patterns such as incest or spouse abuse.

In dysfunctional families it is natural for family members to care for and be affected by the member who has a substance abuse or serious behavior problem. As this member's problems become more serious and unresolved, the family members become more affected and react intensely. This is a reactionary process in which the family members/involved people see the substance abuser or unhealthy member destroying himself. As a result, they become compulsively "dependent" on similar destructive behavior patterns of their own, such as work addiction, eating disorders, or unhealthy relationships with one person or many people.

CHARACTERISTICS OF CODEPENDENCY

Groups who are at high risk for codependency are spouses of substance abusers, people who are recovering from substance abuse themselves, adult children of alcoholics, work addicted people and their families, and professionals who work with addicted persons. As a result of being raised in a dysfunctional family or having constant exposure to one, individuals in these high risk groups exhibit many codependent characteristics.

LOW SELF ESTEEM AND EXTERNAL REFERENCING

Codependents can be addicted to relationships in the same way alcoholics use alcohol--to get a "fix" or "high". They feel they have no meaning or self-worth in and of themselves, and are worth while only in relation to someone else. Codependents may respond only to external

cues, not to internal feelings or perceptions.

CLINGING RELATIONSHIPS

Each person in a codependent relationship often cannot survive without the other. Neither person functions independently. The codependent spouse (often involved with a substance abuser) finds security in this type of relationship even though it is unhealthy.

LACK OF BOUNDARIES

Codependents may not recognize themselves as separate people with separate emotions and ideas. They are so externally oriented that they "take on" other people's emotions, such as anger, as their own and do not recognize that this is happening. Codependents do not know where they "end" and others "begin."

IMPRESSION MANAGEMENT

Codependents may believe they can control others impressions of them. They constantly strive to present themselves as "good" people and always worry what others think of them.

MISTRUST OF PERCEPTIONS

Codependents dismiss their impressions of situations unless these impressions have been externally validated by someone else. Even if the codependent has very clear perceptions and ideas, another person's perception is trusted instead of their own.

CARETAKING

Codependents have low self-esteem and are externally oriented. As a result, they often become caretakers of others (such as substance abusers) and neglect themselves. The person being cared for is not allowed to take care of himself or meet the needs of the codependent.

ADDICTIONS

Codependents can often develop chemical dependencies themselves or become addicted to such things as food, power, or work. These nonchemical addictions provide the same type of "fix" as the one received by a substance abuser. These dependencies are destructive and need to be recognized and treated also.

FEELINGS

Codependents become so preoccupied in fulfilling the expectations of others that they lose touch with their own feelings. They allow themselves to experience only acceptable feelings, such as compassion, and to ignore negative feelings such as anger. In a chemically-dependent/dysfunctional family, feelings often become "frozen" or totally ignored because the reality of the situation becomes too painful.

STAGES OF RECOVERY

Recovery from codependence can be achieved through a successful combination of professional treatment and self care. In seeking professional treatment, codependents must be careful to choose a therapist who recognizes that the codependent is in need of therapy for his own codependent problems, not only in relation to other family members who may have substance abuse or behavior problems. There are four essential stages a codependent experiences in recovery. These closely parallel the recovery stages of a substance abuser.

- **Denial Stage.** The codependent denies that a substance abuse or serious behavioral problem exists in the family. Consequently, the codependent denies that he is experiencing any individual problems.
- **Acceptance Stage.** The codependent begins to acknowledge his own unhealthy behavior patterns and take responsibility for them. He accepts the fact that he is "codependent" and that his life has become unmanageable.
- **Core Issues Stage.** The codependent accepts that he is unable to control the behavior of others and that successful relationships allow each person in the relationship to be independent.
- **Reintegration Stage.** Codependents learn to believe that they are worthwhile in themselves and that being worthy is not something that must be "earned" through particular behavior patterns or relationships with others.

SELF CARE

In addition to seeking professional treatment and working through the recovery stages with a trained therapist, codependents can take additional self-care steps to aid their recovery:

- **Detachment.** Codependents can learn to separate themselves from unhealthy relationships with others in order to work on their own recovery.
- **Removing the Victim Image.** Codependents acknowledge that they are not victims and have the power to create positive change.
- **Independence.** The codependent learns to trust himself and realize that he can care for himself without help from others.
- **Living Your Own Life.** Codependents begin to focus on themselves and their own goals instead of focusing exclusively on others.
- **Accepting Reality.** The codependent acknowledges and accepts the problems in his life in order to begin solving them.



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- **Experiencing Feelings.** In dysfunctional families, codependents learn to deny feelings in order to survive. Recovery involves getting in touch with emotions and accepting them, both negative and positive.
- **Setting Goals.** As codependents shift their focus from others to their own lives, they realize that they can accomplish goals and create self- fulfillment.
- **Working a Twelve-Step Program.** Created by Alcoholics Anonymous, twelve-step programs are designed and adapted to help anyone recovering from their own dependencies or those of others through the structure and support of a self-help group.

CODEPENDENCE WITHIN OUR CULTURE

Our culture encourages codependent behaviors by reinforcing values which are unhealthy for individuals. Unhealthy values include:

- **Materialism.** Our culture focuses on external factors such as money and possessions, and relates them to a person's worth. Individuals come to believe they are worthy because of what they have, rather than because of the type of person they are. Consequently, when a codependent person experiences problems, he may seek an external solution (such as a chemical substance or destructive behavior) to solve his internal problems.
- **Perfection.** Perfection is sought in all areas of our society such as work, academic performance, beauty, and most importantly, through relationships. This sets the codependent up for failure because people are imperfect and cannot excel to perfection in these areas. Consequently, codependents have difficulty accepting themselves, their achievements, and their relationships because they are "imperfect."
- **Separation of Feeling from Rational Thought.** Individuals in our society are encouraged to "think" and not "feel," as if these processes are separate and distinct and feelings don't count. Denial of feelings is extremely harmful to codependents because they lose touch with themselves and become incapable of self-fulfillment.

INTERNAL FOCUS IS CRITICAL

To recover and become healthy, the codependent person must shift from an external focus (on other people, relationships, work, food, or power) to an internal focus (on his own feelings, needs, goals, and desires). The codependent learns that healthy behavior and self-fulfillment can be achieved by knowing, accepting, and trusting in himself as an independent person, and not by becoming dependent on something or someone else.



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