A Family Systems Approach to Treating Trauma and Addiction

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Learning Objectives

• Identify 3 important reasons for family engagement in substance use treatment

• Define and identify 5 traumatic symptoms found within the family system that relates to the experience of addiction.

• Describe 5 ways the family system can become organized around the addiction and list family patterns and rules that occur as a result

• Describe at least 5 reasons why families and their loved ones are apprehensive to engage in family therapy

• Describe 3 different strategies to engage families in treatment and help organize them to the journey of healing and recovery
The Serenity Prayer

God, grant me the serenity
to accept the things I cannot change,
courage to change the things I can,
and wisdom to know the difference.
Today’s Family Epidemic

• According to the National Survey on Drug Use and Health (NSDUH), 21.5 million American adults (aged 12 and older) battled a substance use disorder in 2014.

• One out of every eight people who suffered from a drug use disorder in 2014, according to NSUDH, struggled with both alcohol and drug use disorders simultaneously.

• In 2015 about a quarter of a billion people used drugs.

• Of these, around 29.5 million people - or 0.6% of the global adult population - were engaged in problematic use and suffered from drug use disorders.
Family Involvement

Those who have family involvement more often seek and remain in treatment (NIDA)
Families as the Forgotten Patient

• Families often do not know what treatment is all about and are “left in the dark”

• Often the focus is on the patients behaviors as isolated rather than in context of the system.

• We as clinicians may minimize the importance of the family-projecting the notion “they don’t want to participate” or “they are not good for the patients”

• Sometimes their behaviors are judged rather than understand through a family trauma lens
A Family Reorganized

• A family system at work

• Every family has its own personality that is shaped and created by the interactions with one another

• This personality will shape how emotions are expressed, what rules, values and beliefs are expressed within the family

• The family system is what keeps the household functioning

• Any change in one part of the system affects the entire family

(brown, et al)
Four Aspects of the Family System

- **1. Structure**
  - Rules
  - Roles
  - Rituals
  - Boundaries
  - Hierarchy

- **2. Process**
  - Communication
  - Interaction

- **3. Stability**

- **4. Change**

*Unique challenges Substance use creates in the family system*
Why Do **Families** Need To Be Involved?

- Explore the Family system
- Develop and explore their strengths
- Problem Solve Their own issues
- Address their own issues surrounding the addiction
- Be a Part of the Recovery not the addiction
Why does the **clinician** need the families to be involved?

- Understand behaviors
- Identify External Resources
- Gather Collateral information
- Gather a full balanced family assessment
- Increase Compliance and decrease drop out rate
Impact Of Substance Use and Trauma on Families

“In nature there are no rewards or punishments. There are consequences”
Can Families have PTSD?

Do we as providers treat the family trauma differently than the patients?

What would PTSD look like in a family?
What behaviors might we see?
Family Systems approach to Trauma

- Trauma overwhelms the system
- How can we tell what system the family is in?
- How do we approach the family in each system
Traumatic Family Events

- Witnessing an Overdose
- Domestic violence
- Behaviors associated with substance use seeking
- Police at the home
- Daily life and death threats

All of these events begin to shape the circuitry of the family—chronic repeated stress impacts the NS
Toxic Stress, SUD and Families

• Toxic stress, the most threatening, is associated with strong and prolonged activation of the body’s stress management systems in the absence of the buffering protection of support.

• Toxic stress emerges in the face of loss—conditions of continuous family chaos; persistent emotional, physical and/or sexual abuse; chronic parental depression; persistent parental substance abuse or other manifestations of addiction; and ongoing emotional or physical neglect (Black, 2018)
“Subtle” Traumatic symptoms found in families with SUD

Trauma also occurs in more subtle forms—for example:

• living with fear on an ongoing basis, such as the fear of not knowing if or when a parent/child or spouse is coming home

For Children:

• the fear of not being able to rely on a parent attending a significant event

• the fear that comes with listening to one’s parents argue night after night
Family Traumatic Responses

• Understand what behaviors of the family are traumatic responses- “enabling” or “codependency”
• Families need help recognizing and then validating their traumatic responses
• Families need help seeing the changes made in their family system
• Families should learn regulating skills that will empower them to be able to support themselves and their loved one in recovery.

(Black, 2018)
Messages of the new changes system

- It's not Okay to talk about problems
- Don't express your feelings
- If I don't give them money they will die
- Family loyalty is that you keep our secrets
- You/I have always been a failure
- You can't trust anyone
- You ruined my life
- Other people's needs are more important than mine
- I can save them from their addiction
- My unhappiness is all your fault
- You ruined my life
How do Families organize around the Disease

• Begin to love in a shroud of fear and negativity

• Develop a misplacement and imbalance of duties within the system

• Children may also develop elaborate systems of denial to protect themselves against the reality of a parent’s addiction.

• Attachment may be impacted by inconsistencies of parenting.
The “Family Brain” and development of behaviors

• “Codependency” is when the loved one adapts to the unacceptable substance misuse behaviors in order to cope (and in some cases survive).

• New brain research suggests the “codependent” loved one has developed the fight or flight stress response neural network reactions and coping patterns (Frederiksen).
Trauma as an unbalanced Autonomic Nervous system

• The NS learns from it’s environment through experiences

• Physiological arousal affects how the NS regulates thoughts, emotions, and physiology

• When the ANS is off balance it responds with survival strategies and this creates the symptoms we see- but it is appropriate for that system!- it means the system is working!
Behaviors in sympathetic Nervous System Arousal proving what system is working
*(action oriented behaviors fight or flight)*

- Angry
- Aggressive
- Defensive
- Reactive
- Impulsive
- Hostile irrational self centered
- Sleep disturbances
- Coercive
- Bossy
- Tantrums
- Hitting
- Fidgety
- Hyperactive
- Anxiety
- Irritability
- Distractible

Rhoton 2
Understanding and not Judging “Codependency”

• Our understanding of the brain helps to explain addiction as a “family disease” because all members in the family develop unhealthy neural networks they would not have wired if it were not for substance use affecting their family.

• Families impacted with physical illness also develop similar kinds of emotional responses and behaviors.

• When we place the health, welfare and safety of others before our own needs, we can lose contact with our own needs and sense of self.

• This is what impacts our relationships and our ability to have healthy relationships with family, friends, etc.
How to Establish a Working Relationship with the Families?
Family Hesitation to engage...

- Families may feel embarrassed
- Family may have fears of change that could disrupt the current system
- They may feel judged
- And the reasons go on......
Recognize the Therapeutic Reasons Families may be hesitant to engage

- Shame/Guilt
- Fear
- Secrets
- Anger

Learned Helplessness (Trauma)
Engaging Families

- Initial contact!!
- Strong Therapeutic Alliance
- Demonstrating Respect and Dignity: if the family does not trust the treatment team, they will not engage
- Use motivational Interviewing techniques
- Validate their fears and frustrations
- Education: parent training, education on addiction ...
- Identify the FAMILIES goals.
- Use this as a clinical opportunity: no different than their loved one not wanting to go to group.
- Strategize ways to keep loved one in treatment
Create a Strong Therapeutic Alliance

- Create a mutual conversation based on family concerns
- Every family has its own unique story
- Their struggles and courage
- Their experiences and expertise as a family
- Validate
- Honor
- Respect
- Listen
- Create a mutual conversation based on the family concerns

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So the opposite of addiction is not sobriety. It is human connection.

Johann Hari

@quotsanity
Hope to Families

• Out with the old and in with the new

• New Science shows how kindness, positive reinforcement, and motivational and behavioral strategies can help families support their loved one through recovery

• Using the transformative power of relationships for positive change to remind us that although no one can change another person we can help in inspiring change

Foote et al
Healing the Family System

“Recovery is a journey, not a destination”
Assisting the family in healing

• Provide education
• Family sessions: address their questions and concerns, change how they interact within the family system, and improve communication
• Reduce the emotional burden for the family
• Help the family learn ways to support their loved one
• Encourage families work on their own recovery
• Recovery is through connection: strengthen empathy
Family Recovery Plan

• Help families see that it is OK for their loved one to accept the consequences of their own behaviors.
• Lovingly Let go: “You can’t save them from themselves”. Use empathy and stay engaged to recovery
• Encourage families to find their happiness- take the wheel back
• Create a stable and dependable foundation. “Help them onto your boat”
• Say what you mean and mean what you say- throw out unrealistic expectations as bargaining tools in the relationship
• Set boundaries: Help families regain their lives! Legally, financially and emotionally
Genogram

Examples of subsystems
Support

• Encourage families to get educated about addiction: this sets up realistic expectations and hope

• Encourage families to get involved in their own support groups and their own treatment

• Support the progress, even small steps. Its OK to be happy TODAY! Families are often afraid to enjoy the progress for fear of the old behaviors
Questions

THERE IS ALWAYS HOPE
Resources

Resources


• http://www.tandfonline.com/doi/abs/10.3109/00952997809027993

• https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1201429/

• https://www.drugabuse.gov/publications/principles-drug-addiction-treatment/frequently-asked-questions/how-can-families-friends-make-difference-in-life-

• www.livestrong.com/article/72049-substance-abuse-effects-family

• www.ncbi.nlm.nih.gov/books/NBK64265