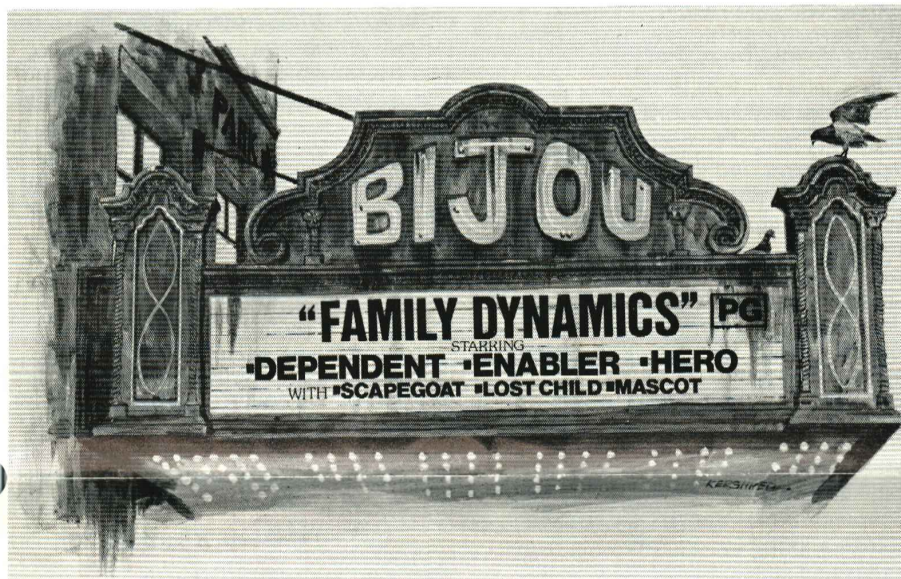


• EPIDEMIC... •

No. 3

Straight talk about kids, drugs and families from Straight, Inc.



Family Roles

About the Games We Play ...

When one member of a family is chemically dependent - whether on drugs or alcohol; an adult or a child - the other members of the family assume roles, usually subconsciously. These roles seem to enable the family to protect itself and the individual members from the downward spiral that the chemical dependency causes. Unfortunately, these roles actually cause the family additional harm because they put off the confrontation that is the first step in the recovery of the chemically dependent member. The five basic roles are not static - a small family may have more than one role for each person; a large family may have more than one person playing a single role. Which role is played by which person is more related to his

or her position in the family than to personality factors.

The Enabler

Every chemically dependent person (CD) has people around him who enable - help - him to continue his chemical use. Parents, friends, teachers, employers will all on occasion hide his mistakes, alibi or lie for him, pinch-hit - all forms of enabling. But there is always a chief Enabler, usually the person emotionally closest to the CD. In the case of an adult, this is usually the spouse. In the case of a teenager, this is usually a parent, most often the mother. The Enabler acts out of a sincere sense of love and loyalty; also shame, to protect the family's self respect, and fear. Enabling, like che-

mical dependency, begins slowly. The Enabler makes excuses for the CD and smooths over embarrassing incidents with friends. As the dependency grows, so does the enabling. As the CD becomes less reliable, the Enabler assumes his responsibilities or gives them to another member of the family. Under the guise of protecting and caring for the child, the Enabler starts controlling his comings and goings, and makes decisions for him that he should be making for himself. The Enabler covers for, excuses and even defends the CD's actions in the face of criticism. They try to shield the child, and the family, from the painful consequences of the CD's behavior.

The Enabler is constantly under stress from being on the alert. The stress affects the Enabler's appearance and health with the familiar physical symptoms of a stress-related situation - digestive problems, ulcers, high blood pressure, depression, etc. Poor eating habits, too much smoking, too little exercise - even too much alcohol, tranquilizers or other drugs - further undermine the Enabler's health. The Enabler's chief emotion is anger, which is kept bottled up inside. And fear - for the child, for the family, for the satisfying family life that is rapidly disappearing. The Enabler is caught in the same downward spiral as the CD - unknowingly.

"The Enabler is caught in the same downward spiral . . . unknowingly"

The Hero

The Hero is usually the oldest child in the family; or, if the oldest child is the CD, the next oldest child. The Hero is helpful within the family and successful outside at school or work. He or

(cont. on pg. 2)

Family Roles (cont. from pg. 1)

she provides the family with those moments of pride and hope that furnish a sense of worth for the family. Although the Hero seems to have it "all together", it is really just a facade behind which he or she feels miserable. The Hero is really trying to help the family by making up for its weaknesses, by saying to the world "this family is okay". After all, a family that has a child that does well in school, pitches on the softball team and writes for the school newspaper *has* to be okay, right? His achievements may help the home situation for a few days at a time, but it doesn't last. Feeling puzzled, but not knowing what else to do, the Hero goes on being a Hero - good, considerate, successful.

The Hero's actions are really eating away at him - because no matter how

"... it is really just a facade ..."

good or successful he is, it is never enough. He feels inadequate and guilty. And he feels anger - at having to work so hard, at having a family that needs so much from him. He may be lonely within his facade of popularity and achievement - never forming deep friendships because of the constant need to reach goals. The Hero goes through life always feeling that, no matter how good he is, he must be a little better before he can take satisfaction in his achievements. The Hero plays his hero roles forever unless the CD and other family members are helped in their struggle to survive.

The Scapegoat

The Scapegoat is usually the next youngest child. At first he or she may try to be like the Hero, being good and doing well. But he can't compete, if only because the Hero is older and more mature and will always seem better and brighter. So the Scapegoat withdraws from the family; physically - a small child may hide under the bed, an older one will run away, and emotionally, seeking outsiders (peers) to satisfy his need to belong. Starved for attention, the Scapegoat will release his bottled-up emotions by getting into trouble, because even a punishment is better than nothing at all. The mischief will escalate as the child grows - from playing with other mischievous children, poor school work, running away, drug and alcohol use, shoplifting, etc. The Scapegoat

has found his niche in the opposite role as the Hero, at a great personal cost.

The Scapegoat will act sullen, uncooperative, rebellious and belligerent - all to hide his anger. Anger at the CD for his alcohol or drug use,

"In his heart the Scapegoat doesn't want to be a bad kid ..."

anger at the Enabler for his or her constant attention to the CD, anger at the Hero for achieving goals the Scapegoat can never hope to compete against, anger at the world for "falling for the Hero's act". But beneath this anger is hurt - he or she feels rejected and lonely. And guilty because although the Scapegoat may break all the rules family and society has set down, he has not totally rejected them. In his heart the Scapegoat doesn't want to be a bad kid - he is being carried along by his role that brings him the attention he so badly wants.

The Lost Child

The Lost Child adapts to the family situation by "getting lost". He or she can't compete with the Hero and the Scapegoat, and doesn't try. He becomes a loner, looking after his own needs and staying out of the way. He finds more comfort in his own company than in the midst of the family chaos. The family welcomes his choice for the child who makes no demands is a source of great relief. But in the family where communication is already poor, the Lost Child is the most out of touch. And because he is often out of sight, his needs are also out of mind. Although not intentional, the Lost Child is often neglected and doesn't receive the attention, praise, reassurance and affec-

"Unless helped, the Lost Child will become a Lost Adult ..."

tion so necessary in childhood. The Lost Child can't live in his private world forever, and when he ventures out into school and peer group, he finds he has had little experience in living. He can't express his own feelings or accept expressions from others, he can't cooperate or handle disputes when cooperation breaks down, he doesn't share or can't de-

fend his ownership when bullied. He finds it hard to make friends because he has never experienced warm, human closeness. While the Scapegoat feels hurt and angry, the Lost Child accepts his exclusion as all he deserves and feels lonely and worthless. He represses these feelings, which may emerge physically in the form of accidents, bed-wetting, over-eating. Unless helped, the Lost Child will become a Lost Adult - without the ability to communicate or form close relationships. Possessions may take on inordinate importance in his life - the new car, stereo, exotic vacations. And he will go on playing the same role, suffering his private pain in silence.

The Mascot

The Mascot is most often the youngest child in the family. As the "baby", he or she is protected from the reality of the family situation more than any other member. (This may also occur with an older child with a special handicap or illness, or with the only daughter in the middle of sons, for example.) The Mascot is not told about brother's drug use, or sister's abortion or the fact that Mom and Dad do not sleep together anymore. But of

"... no one ever knows the real person behind the clown mask"

couse he knows something is wrong - even a small child has eyes to see worried expressions and ears to hear adult arguments. The child is confused - he knows something is wrong but everyone he trusts tells him things are just fine. Are they really Fine? Is he going crazy?

The Mascot learns while still very young that showing-off can bring rewards - release of pent-up energy and positive attention from the family he loves. And the family is more than willing to forget its troubles for the moment and laugh at the clowning Mascot. The Mascot's behavior achieves its purposes; he's in control of the family for as long as he can hold the floor and feels more secure - he gets attention of some kind. The behavior can also be expressed in annoying habits and erratic behavior, so the attention can be negative as well as positive. The Mascot may act cute or show-off or squirm and inter-

(cont. on pg. 3)

(cont. from pg. 2)

rupt and do annoying things. In either case, the Mascot is kept immature and this limitation can affect his total development. Many Mascots are diagnosed as hyperkinetic and placed on drugs. The Mascot's main emotion is fear, but he hides it so well that no one ever knows the real person behind the clown mask. The Mascot is lonely even while being the center of attention.

"In treatment centers we encounter a lot of what we call 'chemically maintained families.' Dad will be dependent on alcohol, Mom on tranquilizers, the Scapegoat on street drugs, the Lost Child on sugar and the Mascot on Ritalen (for hyperactivity). Only the Hero escapes, and perhaps even he is sustained by the adrenalin from his own successes."

You can see why intervention and treatment of the whole family is necessary. It is not just the chemically dependent teenager who is in need of help - the whole family must be helped if they are to survive as a fami-

ly and as individuals in later life. That's why at Straight the whole family is required and encouraged to participate. We have found that it is the

"... at Straight the whole family is required and encouraged to participate."

only way out from behind the masks the various members have been forced into wearing.

'Sharon Wegscheider, *Another Chance, Hope & Health for the Alcoholic Family*, Palo Alto, CA, Science and Behavior Books, Inc., 1981.

We would like to acknowledge the above book as a prime source for much of the information in this article and recommend it for those parents seeking more information.



CHEMICAL DEPENDENCY

A Game the Whole Family Can Play!

Do not pass Go!, do not collect \$200, is a phrase familiar to many American families. Its from **Monopoly** by Parker Brothers.

"Oh my God, not again!" is a phrase increasingly familiar to American families. It's from a game called **Drug Use**, by American teenagers.

In **Monopoly**, the players choose a token to represent them as they strive for success on a game board. In **Drug Use**, players choose a role to protect them as they strive for sanity in their family.

Monopoly is fun and its harmless competition evokes togetherness, laughter and warmth. **Drug Use** is misery and its deadly role playing evokes fear, guilt, anger, depression and loneliness.

Monopoly tokens are selected by choice for recreation. **Drug Use** roles are selected by necessity for survival.

In **Monopoly** there are winners. In **Drug Use**, every player loses.

At Straight, we work with the entire family as well as the drug using young person. We do that because it works. The deadly game of **Drug Use** must end if the family is to survive, and for it to end, *all* must quit the game.

The benefits of recovery are enormous. People become real, authentic. Children become children again. Fathers become Dads. Mothers become Moms. Families become families. To look back and see the masks and costumes of the Chemical Dependent, the Enabler, the Hero, the Scapegoat and the Lost Child all piled in the past; to look forward and see each family member becoming all they can truly become - too look at today through the eyes of reality, to know the game has ended and finally all have won. That's what Straight is all about.

Getting Straight (from pg. 4)
determined he had to get himself out.

June: The two weeks before Easter were pure hell - I knew I was close to breaking down and didn't know what to do. Then at Easter, when all of the family was gathered together, Steve didn't come home all night again and I couldn't hold it together anymore. I created a family scene, which was the first time that the rest of our family knew that anything was wrong.

Peter: I knew June was near the breaking point and was desperately afraid of losing my wife. When my brother suggested a psychologist he knew, we went. At this point, I was more concerned about June than about Steve. I knew I would need a healthy, secure June at my side if we were ever able to help Steve.

June: Under the guise of testing Steve for his previous medical problem, he underwent a drug screening test. Even when the test came back positive, Steve denied his alcohol use - said it was the only time he'd been drinking. Even at this point, I was still ready to deny the problem.

Peter: I had stopped denying at this point - I accepted Steve's drinking as the problem, but my main concern was still June. We attended a Straight Open Meeting at the psychologist's suggestion and I knew immediately that we had finally found help.

June: The Open Meeting really opened my eyes. When all the other kids and parents got up to speak, I realized that what we had been going through for so long was not unique to our family, that help was available and that, at last, we were not alone. We enrolled Steve in the program within days.

Steve is currently in 4th Phase (for the second time) and although things are not perfect, he is again the loving and responsible son and brother that Peter, June and Mark once knew.

June: I feel great, I try very hard not to enable anymore, although I realize now that I was raised as an enabler, and it takes a great effort to stop. Having foster children (from the Straight program) stay at our home gave me additional strength - the Straight program literally saved my family.

Peter: I feel positive, good, happy, hopeful and relieved. I'm more in touch with my feelings and look forward to coming home now. Both June and I feel guilty about some of the abuse Mark took during Steve's troubles and we're working hard to make it up to him.

Mark: I'm very proud of Steve. I have a brother again.

Getting Straight:



One family's story

We'd like you to meet the Randalls: Peter, A Protestant minister; June, a middle school math teacher; Mark, their 19 year old son; and Steve, their 16 year old son. Steve was 14 when he began doing drugs (mainly alcohol) and entered the Straight program at 16. This is a true story, although their names have been changed to protect the family's identity.

June: Steve's problem and subsequent drug use crept up on us slowly. While still young, Steve had some serious medical problems that affected his appearance as well as his school attendance. When, beginning in the 4th grade, his school work began to decline, we blamed it on his medical problems. The other children made fun of Steve's partial paralysis (only temporary) and he became a very upset little boy. As concerned parents, we sought out professionals to help us deal with the problem. But nobody was able to really help us. By the time Steve was in the 8th grade, things had really gone downhill. Steve had very few close friends, and spent most of his time with Mark and Mark's older friends. Steve and I had always had a very close relationship, but all of a sudden he began to turn on me, with sudden bursts of anger and vulgar language. I became desperate, stopped going out of the house, began to overeat in an attempt to buy his love and generally felt like I was falling apart. I felt hurt and angry about

being used by my son, and also started worrying that he might try suicide.

Peter: I come from a very stoic background, where people dealt with their problems silently and didn't talk about them. I placed the blame for our problems on June, because I saw how she was enabling Steve (although I didn't know it was enabling at the time). I directed my anger at June for the frustrating situation I found my family in.

June: I was constantly seeking advice and basically was told to enable Steve even more. I was told he was "going through a phase". I began to feel like a failure as both a wife and mother. I would attend church on Sunday, sitting there smiling like a dutiful minister's wife while inside I was desperate and crying. I would make excuses for Steve when members of our congregation asked where he was - I couldn't tell them that he had been out all night and I didn't know where he was.

Mark: I suspected that Steve was in trouble with drugs - mainly alcohol - but never confronted him or told my parents of my suspicions. I began to stay away from the family just to avoid the arguments and "scenes" that were becoming the norm.

Peter: I was your classic passive adult - my way of dealing with the problem was to avoid it. I began working longer hours and staying away from my home. When I was home, I

went to bed earlier and earlier, using sleep to escape. When I couldn't avoid it, I would yell and scream at my son and came very close to physically fighting with him one time. I'm still amazed that I could have acted like that.

June: Things kept on getting worse and worse. Steve would stay out all night and come home only for food and clean clothes. He began stealing from Peter and I, and even Mark, but we never suspected that the missing money was being taken by Steve. I began putting extra expectations on Mark to make up for Steve's failings, even though Mark was always a good kid, helpful and successful at school and work.

Mark: I resented being made to do Steve's chores when he wasn't around to do them - and sometimes I wouldn't. And I was mad at Mom and Dad for being manipulated by Steve - for falling for his "act".

June: Steve came home one night overdosed on alcohol, locked himself in the bathroom with the dry heaves. Still, Peter and I didn't think that drugs were the problem.

Peter: I told June to leave him alone when Steve came home sick. He had got himself into this mess and I was

(cont. on pg. 3)

Straight, Inc. Cincinnati
6074 Branch Hill-Guinea Pike
P.O. Box 7394
Milford, Ohio 45150
(513) 575-2673

Straight, Inc. St. Petersburg
3001 Gandy Blvd.
P.O. Box 1577
Pinellas Park, Florida 34290-1577
(813) 577-6011

Straight, Inc. Atlanta
2221 Austell Road
P.O. Box 848
Marietta, Georgia 30061
(404) 434-8679

Straight, Inc. Washington, D.C. Area
5515 Backlick Road
P.O. Box 792
Springfield, Virginia 22150
(703) 642-1980

Subscription & Information Coupon

EPIDEMIC is published monthly by Straight Inc. as a community service and depends on the support of families and friends of Straight. Your \$10 donation will be applied to a one year subscription and will also enable us to reach other parents and families.

- ☐ Enclosed is my \$10 donation.
- ☐ Please send me information on Straight, Inc.
- ☐ Please add the following name to your EPIDEMIC mailing list.

Straight, Inc.
National Development
& Training Center
 3001 Gandy Blvd.
 P.O. Box 21686
 St. Petersburg, Florida 33742-1686
 (813) 576-8929

Bulk Rate
 Non-Profit Org.
 PAID
 St. Petersburg, FL
 Permit #184