

Suggestions for Service Providers

Six Survival Skills for Families and Significant Others Who Are Affected by Substance Abuse

1. **Separate yourself, detach** from the problem
2. **Set limits, roles, and boundaries**
3. **Solidify your position** – know where you stand
4. **Support sobriety**
5. **Simplify your approach** by setting small goals
6. **Sustain your physical, mental, & spiritual health**

Provider Resources

Al-Anon and Alateen
<http://www.al-anon.alateen.org/>

Al-Anon/Alateen - Espanol
<http://www.al-anon.alateen.org/spanish/>

Nar-Anon
<http://nar-anon.org/index.html>

Information About Drugs
<http://www.health.org/>

Getting Help for Adults:
www.findtreatment.samhsa.gov/

Getting Help for Children:
www.family.samhsa.gov/

Information for Families & Friends
<http://alcoholism.about.com/>

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Using the Six Family Skills

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Providers of human services are well aware of the prevalence of substance abuse among the clients who are served and understandably a great deal of emphasis is placed on providing programs and interventions to help those who have a problem with the abuse of alcohol and other drugs. Although there are far more family members and significant others who are affected by substance abuse, unfortunately there are disproportionately fewer resources or programs that target the needs of families. Providers can use this six skills model with spouses, partners, children, siblings, and others who are affected by a substance abuser in the family. It is suggested that each person be provided with a 3 x 5" card summarizing the six skills and a copy of "When Substance Abuse Affects Others- What Helps?" These are available free in printed or electronic forms (see end of page two for details and an example of the skills in 3 X 5" format).

The model can be used as an educational tool to work with individual families or with family groups beginning with exploring how they are affected by substance abuse and to validate the feelings that may be occurring including anger, fear, uncertainty about what is helpful, and general confusion about what to do next. Providers can be particularly useful in helping families clarify the first skill about the difference between separating from the problem and detaching from the person. Families also are likely to need assistance in developing small goals (#5) to try new behaviors and approaches that relate to the other skills.

#1: Separate yourself, detach from the problem

This may be the most difficult for families to initially understand and it is very important to clarify that the objective is to detach from the problem, not the person. During discussions about any of the skills it is helpful to ask for examples and to also provide experiences from your practice that clarify the skills and reinforce that each one can indeed be refined with practice.

Example: The substance abuser relapses, is put in jail, the family member goes for every visitation, but does not bail the person out of jail. Here the family member has detached from the problem but not the person.

#2: Set limits, roles, and boundaries

While limits and boundaries are similar in meaning, boundaries infer a sense of confidence about where the lines are drawn. Families often take on roles and responsibilities that belong to the person who has the substance abuse problem.

Example: The mother of a 24-year-old son decides that she will no longer allow her son, who has a substance abuse problem, in her house when no one is home. This also illustrates a change in her role as she shifts back into the role of parent to an adult rather than the parent of a younger child. Indeed providers will observe that when an adult child suffers from addiction it can cause parents to revert back in time as if they are again parenting a child.

#3: Solidify your position- know where you stand

Two important points related to this skill here are first, that this takes time; there may be bumps along the way. In the #2 example above, if her son continues to enter the house, she may have to address security issues to keep him out. The second key point is that the primary objective of this skill is consistency; solidify your

position and stick to it. Providers can support their clients in remaining consistent with their positions. If the mother in the current example changes the locks on her house she is actively engaged in skill #1 as well as skill #2. In groups, other members can also support the skill as well as provide their own examples of how they have accomplished this task. Another key point to reinforce is that consistency of position is also helpful to the substance abuser; being clear on this is a good thing for both the family and the substance abuser.

#4: Support sobriety

This skill can perhaps be the most helpful of the six skills and one in which the provider can contribute immensely in two ways. First, by sharing the many ways that families can be supportive such as participating in family therapy, going to 12-step or other community groups, and using these six skills. Second, by working with families on clarifying what is helpful, which is an ongoing struggle for many families and significant others.

For example, it may not be helpful to give a substance abuser cash; this may seem obvious to some but not to others. Families may rationalize and give cash if the reason is deemed worthy. Providers can help families explore the way they process such decisions and then set goals to handle future situations differently.

#5: Simplify your approach by setting small goals

This skill follows the view that a good goal is a small goal. The provider can be a resource in helping clients develop such goals by first inviting the family member to look back over the first four steps (or # 6) then select an area or two around which to write a goal. The therapist can work with the client to make sure it is a realistic and attainable goal as well as one that the family member feels is important.

Example: A goal for a significant other to “stop enabling” is too broad and vague. The provider can help the family member develop a specific goal related to a new behavior that would be a step towards not enabling. For example, to not call in sick for the person the next time he or she asks, or to not drive the person somewhere when they can take public transportation. Both are small, realistic, attainable goals.

#6: Sustain your physical, mental, and spiritual health

Indeed much is written about the interplay of ones physical and mental health; an even more holistic view of health increasingly includes spirituality as a third component. Family members who are physically active, addressing their need for sleep, and who follow a sensible diet should be well on their way to good physical health. If any of these have fallen by the wayside then setting goals around that aspect of health will be useful. Given the devastation that substance abuse can bring to families, ones mental health can certainly be affected and it may be necessary to suggest that some clients consider medication as well as a more intensive course of therapy. Spirituality is a comfortable topic for some clients and not for others. Therefore, it is essential to explore this area carefully as some family members may need clarification of the term as well as examples of how people view spirituality in different ways. A very clear, simple, and acceptable approach to spirituality is to discuss hope with families, something that may have waned or been lost in some cases.

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Available free in electronic or printed formats:

1. When Substance Abuse Affects Others- What Helps?
2. Sheet of Six 3 X 5" Family Skills Cards
3. Provider Suggestions for Using the Six Skills Model
4. Evaluation Form

To request materials please contact:

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All materials can be freely copied and distributed.