

# **WELCOME TO THE Addiction Services**

Education Series

**Helping Others**  
session 5

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# Helping Others

- Protection
- Connection
- Honesty



# How Do We Know Someone is Using?

## The Stuff we may find:

- **Marijuana:** dried green plant, smell
- **Hash:** brown / black lumps
- **Heroin and Cocaine:** flaps of folded paper, lumps (crack), white or brownish powder, plastic baggies or pieces of garbage bag (spit ball) or tin foil
- **General:** pipes (glass, metal, water); burnt tin foil, burnt knife ends, lighters, torches, matches, needles, tie off bands, cigarette papers, mirrors, razor blades, rolled up bills, incense, mouth washes and sprays, anti-red eye drops, roach clips, glass or plastic tubes

# Physical Symptoms

- **Marijuana:** red eyes, smell
- **Cocaine:** change in sleep patterns, depression, paranoia, pressured speech, euphoria, extroversion, weight loss, dilated pupils, picking
- **Heroin:** nodding, detached, flu-like symptoms, pinpoint pupils, scratching, sniffing, small sores, jitters
- **Alcohol:** staggering, smell

# Behaviour

- Everything and everybody slowly become less important as drugs become more central to the person's life.
- More time behind locked doors
- School / job ability goes down
- Anger, mood swings, irritability
- Change in introversion, extraversion
- New friends with pager numbers
- Increasingly poor hygiene
- Lying becomes normal, defensiveness
- Need \$

# If we discover our child or partner is using substances:

# Step 1

**Our first task is to deal with our own feelings:**

\*Anger \*Shock \*Guilt \* Shame \* Embarrassment

Give ourselves the time we need to calm our feelings, and to gather resources. **Remember:**

- We are not responsible for others. We are responsible to others.
- We are responsible to take helpful action.
- We cannot change someone else.

**There are two separate and distinct problems:**

- 1) Our child's / husband's / wife's problem with drugs.
- 2) Our problem with the relationship and communication about this "taboo" topic.

We can take charge of ourselves, our feelings and communication.

# PARADOX

When we let go of *trying* to heal someone else, healing can occur.

# Common Pitfalls of Confronting Loved Ones

- **We cannot win a contest of facts or values by convincing the other of our “rightness”.** We can, however, maintain our position by agreeing to disagree.
- **Avoid getting drawn into an argument.** It will not be helpful to vent our anger or to use blaming or belittling.
- **Be aware that it’s counterproductive to load on the guilt.** (“how could you do this to me”; “you’re going to give me a heart attack”.)
- **Avoid the trap of “nagging”** - that is, repeatedly complaining about the problem without being willing to follow through with the consequences.
- **Do not get into a pattern of bailing out the person who is using.** (For example, covering debts or making excuses for their absences at work or at school).

# Suggestions That May Help

*The most important message we can convey is "I love you and I want your behaviour to change".*

- Only deal with immediate safety issues with intoxicated persons.
- Select a time when the person will be clean and sober. Try to find a time when there will be few interruptions. Restaurants can be a safe place.
- Prepare and possibly write down the things we want to be sure to say.
- Separate "the person" from "the behaviour".

# Suggestions That May Help

- Speak calmly and in our own words. Focus on the family's problem, and not on "your" problem.
- Express our concern not just about the drug, but also about other problems the person may be experiencing.
- Share our experience – even when we have limited leverage – repetition of this is OK.

# The “sandwich technique”

- Start with connection (appreciations and support)
- Ask for the person to listen and assure them they will have time to talk at the end
- Deal with clear issues that you have observed
- Talk about how this makes you feel
- End on a positive note
- Ask for a response and listen carefully



# Suggestions That May Help

- Avoid the “bad” label.
- Talk about the process of communication.
- The message “I believe you have what it takes to solve this problem for yourself” is useful.
- Addiction is not the whole person. In addition a person has both an “addictive voice” and a “healthy voice”.
- Connection often involves rituals around food.
- Consider turning off or getting rid of the TV.

# Suggestions That May Help

- Be open to exploring our own issues (we see others flaws more easily than our own).
- Watch the messages in our tone of voice
- Our actions speak more loudly than our words.
- Get support.
- Cultivate curiosity in order to listen.
- We don't have to go to all the battles to which we are invited.
- Apologize when in error.
- Cash is a trigger for many addicts. The "no cash ever" rule is useful.
- Watch our wallet.

# Suggestions That May Help

- Predicted progressive consequences are more useful than unanticipated large consequences.
- Work on our relationships with our children's friends.
- Brief contact (that supports connection) with the healthy voice is legitimate.
- Know when to switch from discussing concern about amount of drug use, to (physical and mental) health issues related to drug use (harm reduction).

# Four Stages of Help

- 1) For non users
  - broad Education about many health issues (sex, drugs, etc)
  - encourage abilities, strong sense of self
  
- 2) For social and instrumental users
  - explore what leverage you have
  - set limits
  - engage in discussion about many life issues
  - explore child's understanding of situation
  - explore needs of child
  
- 3) For compulsive users
  - maintain attachment
  - harm reduction
  - focus on health issues
  
- 4) For compulsive users who are disconnected
  - repetitive attachments gestures with “hope” statements but no request for change

# Spending Quality Time

- If possible go somewhere remote with our child
- The longer the time the better
- Do not have television, ipods, getto blasters, etc
- Dependency on us is not a problem in this situation
- One parent, in this situation is better than two
- Plan on fun (read, relax, fish, games)
- Work on connection, not change
- Plan on how to keep connection after experience is over

# Assertion

There are three types of communication:

**Passive:** Takes the "down" position

- prevents our needs from being discussed
- makes it difficult to establish clear boundaries

**Aggressive:** Takes the "up" position

- prevents honest communication
- invites passive aggression
- prevents needs from being met

**Assertive:** Takes the "equal" position

- "win - win"
- promotes honesty
- helps everyone to meet needs

# Assertive Communication

Focus on our own experience and use "I" messages, not "you" messages.

## **State the Behaviour:**

When you drink and drive.

## **Express the feeling:**

I feel afraid you will hurt yourself or someone else.

## **Express the goal:**

Someone needs to be the designated driver.

## **Graduated consequences:**

These can range from keep the keys to leave the relationship.  
Its best if consequences are discussed and mutually acceptable.

## **Discuss process:**

How was this for you?

# The 4 "C's"

- We did not cause the substance abuse problem.
- We cannot control the drinking or drug use.
- We cannot change the addict / alcoholic.
- We can learn to communicate more effectively.

# Some helpful reading

- Hold onto your kids. Gordon Neufeld and Gabor Maté.
- How to deal with your acting out teenager. Robert and Jean Bayard.
- Parents, teens and boundaries. Jane Bluestein.