

THE ARTERBURN WELLNESS SERIES

UNDERSTANDING AND LOVING A PERSON WITH

ALCOHOL OR
DRUG ADDICTION

*Biblical and Practical Wisdom
to Build Empathy, Preserve Boundaries,
and Show Compassion*

**STEPHEN ARTERBURN M.Ed.
AND DAVID STOOP Ph.D.**

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transforming lives together

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CHAPTER ONE

You Are Not Alone

It was a story I'd heard many times over the years, but it felt like it could have been my own story.

When Ron and Jenny had called, they were desperate for an appointment. When they sat down in my office, they poured out their pain and concerns. Trouble had hit their family, and they didn't know what to do about it. No one else in their circle of friends seemed to know what to do either. They had always believed that drug addiction was something that was only supposed to show up in families with major problems—not in their family.

Ron had gone back to school to be a therapist, but he hadn't taken the one course on addiction and alcoholism yet. I remembered that when I was in my doctoral program preparing to be a psychologist, there weren't *any* courses offered on either alcoholism or drug addiction.

When one of Ron and Jenny's daughters started withdrawing from the family, they attributed it to her possibly having ADHD or some adolescent issue or disorder, but they never thought it could be an addiction. I often meet with people who are convinced the problem with their child or spouse is really depression

or bipolar disorder. Maybe he's gotten caught up in the wrong crowd or recently experienced a traumatic event. Anything but an addiction.

Everyone begins the healing process by facing the truth. But often, when we are confronted with the fact that someone is addicted, we still want to focus on things besides the addiction—like how her use of substances was just a way to “self-medicate.” Parents may feel that if they can solve the obvious problem of why their child needs to self-medicate, her addiction will just go away.

So Ron and Jenny were there to seek help in finding the cause of the problem as they saw it: a change in their daughter's attitude toward the family. She was seldom home, and when she was, she stayed in her room with the door closed. She had also stopped talking to everyone in the family, including her brothers. Her attitude toward school had changed as well: her grades were falling, and eventually, she'd started cutting classes. The typical school system often can't help because it's already overloaded with its own problems—problems we as parents also often blame for our kids' issues at school. On top of all that, Ron and Jenny were concerned about the kinds of friends their daughter was starting to hang around with. But when they tried to deal with any of these issues, their daughter became angry and defensive. Ron and Jenny's own heated response led to everyone getting more and more frustrated.

They didn't know until later that one of their daughter's “friends” had introduced her to heroin on her sixteenth birthday. From that point on, for six years, they said it felt like the family was living in hell. School soon stopped being an issue because their daughter had simply dropped out. She came home only to

sleep—meals were not on the agenda anymore. Holidays and celebratory events were times of extreme tension. She would disappear completely at times, only to show up again when she needed something.

Ron and Jenny had just described to me what are, unfortunately, common experiences for parents of a kid addicted to drugs. My own family's story is similar to that of Ron and Jenny's. One member of my family entered thirteen different treatment programs over his years of addiction. He left many after a day or two, as they were ineffective programs that only tried to shame the addict further. In one, he had to wear a toilet seat around his neck at the beginning, but they didn't seem to know what to do with him after that. He did complete several programs, and twice, we went through what was called "family week." Those weeks were enlightening, but I guess we just didn't get the message that we were part of the problem, so both times, it wasn't long before he relapsed and disappeared again.

Finally, our friend Stephen Arterburn, who had walked with us through most of our struggle, recommended a program developed by Joe Pursch. Dr. Pursch is the medical doctor who successfully treated Billy Carter and Betty Ford for their alcoholism. It was a totally family-focused treatment program, and everyone in our family had to be involved.

My wife, Jan, and I were in a group with other addicts/alcoholics, and our family members were in a different group with other parents and addicts/alcoholics. I was licensed as a psychologist and was not used to being in a group—I typically *ran* groups. So it was awkward, and I remember introducing myself and then adding,

“I’m here because one of our kids has a problem.” Sitting opposite me was a twenty-year-old who I learned later was an alcoholic. He almost came off his chair as he said to me, “That’s what my dad said when he first came here. You’re going to find out you’re here because *you* have a problem!” And I eventually realized that he was correct!

Two things I experienced through that program changed everything. First, we had to attend weekly Alcoholics Anonymous (AA) speaker meetings, and it was the best education I have ever experienced regarding addiction. We attended these meetings almost thirty years ago, but some of the speakers were so helpful that I still remember the things they said. A *speaker meeting* is an AA meeting where you come in, sit down, listen as someone shares their story of addiction, and then get up and leave without saying anything yourself. I learned more from those meetings than from any continuing education course on addiction I have taken.

The second thing we had to do was attend group sessions, family counseling sessions, and Al-Anon meetings. Al-Anon meetings are for those who are living with an alcoholic or addict, while AA meetings are primarily for the acting alcoholic and NA meetings (Narcotics Anonymous) are specifically for drug addicts. In our weekly Al-Anon meetings, it was a different kind of eye-opening experience. At first, we thought the parents of the addicts and alcoholics in the meetings didn’t care about their kids, because they seemed to have lives of their own—they knew how to laugh and enjoy themselves. But as we continued to attend, we learned that they cared deeply—they had just released themselves of the responsibility to change their sons or daughters.

Over the years before this, I had twice tried to set up a miraculous healing experience for our kid. Both times, it seemed God was busy somewhere else—perhaps with your child. Eventually, I would get over my frustration with God while still praying for that miracle daily. When our miracle finally came, more than twenty-eight years ago, I had nothing to do with it—God gets all the credit and glory. It taught me the lesson about being powerless in a way I would never forget.

Walt

Walt was my wife's distant relative, whom she had known since he was just a little boy. Jan remembers when a car hit Walt, at the age of six; from then on, he walked with a major limp and had chronic pain. When he became an adult, he took over the responsibility for his pain medications. The meds would help at first, but eventually, he'd become tolerant to the dosage, and the doctor would have to either increase the strength of the pills or change the medication.

When his doctor tried to get him to stop taking the meds, he developed a network of several doctors to prescribe the pills for him. In this way, he was able to get enough of the pain meds he had become dependent on and thought he needed. No one knew he was doing this, not even the doctors.

When he died of an overdose some years ago, my family gathered his belongings, since he was living in our area and had no other relatives close by. We were not prepared for what we found when we opened one of his cupboards: bottle after bottle of pain killers—too many to count. He was a casualty of a different kind of drug

addiction and the victim of its consequences long before prescription drug addiction became the widespread problem it is today.

Addiction to prescription meds has been called “the hidden epidemic” because it can easily go unnoticed. No one knew that Walt was addicted; it was his secret. Things have changed somewhat today, as doctors and pharmacists now have methods that will alert them to suspicious use of a medication, making an addiction harder to hide. But at the same time, addicts are increasingly turning to illegal drugs to supplement their prescribed medications.

Marty

Marty was an integral part of her boss’s business. Together, they ran a smooth, successful operation. She knew her boss was a recovering alcoholic, but since it was under control, Marty didn’t even think about it—that is, until Robert relapsed. At first, she was not aware of the impending problem. She didn’t know he had started drinking some wine with his dinner. Even when he started working from home, using his cell phone to keep Marty informed, she wasn’t worried.

But when Robert stopped answering the phone, Marty knew that was different. She wondered if he had fallen or somehow injured himself. Out of concern, she went to his house to check on him. He was alive, and there was no evidence of an accident. Marty instead found eleven empty wine bottles on the kitchen counter and more in the trash can outside. She questioned him, and of course, he made light of it all. When she found out he hadn’t eaten in several days, she made him dinner.

Marty was concerned about not just her job but also Robert's health. She knew that she could manage the business for some time, but in the long run, Robert was essential to its success. So she decided that, every other day, she would either fix him dinner or bring him takeout. Then she started to worry about him driving to the store in order to replenish his stock of wine, and so she offered to go to the store to buy it for him. She shared her concerns with him, and he listened sympathetically, but nothing changed.

When a friend of Marty's found out what she was doing, she strongly suggested that Marty start coming with her to Al-Anon meetings. Because Marty's friend had started to face her own issues, she knew an enabler when she saw one. Gradually, Marty started to understand that she was helping Robert perpetuate his alcohol problem. She was doing all kinds of things for him that only freed him to continue his addiction.

Finally, she not only stopped helping Robert but also told him she was going to look for another job. She was done! It didn't take Robert long to call a recovering friend, one whom he had been avoiding, and ask him for a ride to the hospital for treatment. Marty had needed to learn that she too had a problem! She was an enabler, and she dealt with it!

Chemical Addictions

Addictions to drugs—legal prescription drugs, illegal drugs, or alcohol—are examples of what's referred to as a chemical addiction. A chemical is ingested into the body, and the body reacts. A person becomes dependent on the chemical, sometimes very quickly.

The addictive process starts as soon as the chemical enters the body. Some drugs take time for dependency to develop. Other drugs are almost instantly addictive once ingested—for example, if one hundred people were given a dose of heroin, which is highly addictive, ninety-nine of them would become addicted to heroin with just one dose. So anyone can become addicted—it is no respecter of persons!

Alcohol is different. Not everyone can become addicted to alcohol. Studies estimate that 8 to 10 percent of people who drink alcohol can become alcoholics. The majority of people can't become addicted because they cannot ingest enough alcohol to become addicted. They may get very sleepy after drinking one or two drinks or experience a blinding headache if they have more than one. Some literally get sick if they drink any alcohol. These are examples of people who cannot ingest enough alcohol to become dependent and addicted.

When alcoholism runs in the extended biological family, it's possible that random offspring will be born with the alcohol receptors already in their genes, waiting for that first drink. If they drink one drink, they will become chemically dependent on alcohol and be alcoholics. For the 8 to 10 percent who are born with these alcohol receptors, when they start drinking, they will also have a high tolerance for alcohol. They can drink a twenty-four pack of beer in a day and show no signs of having drank that much. They were the ones who others admired in college because they were able to "hold their liquor," but they are also the ones who will become alcoholics. They have to be able to ingest enough alcohol at any given period of time to become addicted.

An alcoholic is in real danger when they stop drinking. They face alcohol withdrawal, which can be life-threatening. But in the early stages of their dependency, no matter how much they drink, they seldom, if ever, get drunk. Unfortunately, this gives them and their family members a false sense of security that they won't have a problem.

Most people define the typical alcoholic as the drunkard on skid row. However, when you look at that person, you are seeing the final stages of the disease of alcoholism. Alcoholics end up on skid row after years of abuse—after they have lost their families and their jobs and have no means to support their former lifestyles.

Some people addicted to alcohol say that they can't be alcoholic because they only drink beer. That's a myth. One twelve-ounce can of beer has the same amount of alcohol as a five-ounce glass of wine or a shot and a half of hard liquor. It's the alcohol, not the conveyor of the alcohol, that counts.

There is also what is called a "problem drinker." This is someone who abuses alcohol but wouldn't be considered dependent on it. A problem drinker typically drinks to excess in order to get drunk or to numb himself to some life trauma. He doesn't meet the criteria for having an addiction in that he does not experience the same issues as someone who is addicted, aside from a nasty hangover. But living with a problem drinker is about the same as living with an active alcoholic. If you have a problem drinker in the family, your task is the same: don't argue about the problem, just get help and support for yourself.

Process Addictions

Process addictions are different but have the same negative consequences as chemical addictions. Here the person does not ingest anything, but she becomes addicted to the “high” she experiences when engaged in a particular behavior.

The *high* is a rush of hormones in the brain. They are usually pleasure hormones, at least at first: hormones such as dopamine, oxytocin, and even adrenaline. Like with chemical addictions, you can build up a tolerance to them, so a person addicted to some behavioral process needs to intensify the experience to get the same high. He continues this search for that high in spite of the negative consequences he increasingly experiences, such as overwhelming feelings of guilt, shame, or remorse, as well as the negative consequences of his actions.

Process addictions include sex addiction, food addiction, gambling addiction, video game addiction, and work or spending addictions, along with other compulsive behaviors. There are four reasons these are considered addictions:

1. The person with the addiction struggles with trying to stop or gain control over the behavior. Various types of strategies are developed, and all of them eventually fail. Her will-power is just not powerful enough.
2. The behavior causes problems in the person with the addiction's significant relationships. Other people feel frustrated and/or betrayed by the addictive behavior.
3. The person with the addiction experiences negative consequences that are directly caused by her inability to stop the

addictive behavior. In spite of becoming obese, bankrupt, or unfaithful, her behavior continues. We'll see this in the examples that follow.

4. In spite of all of this, the person with the addiction cannot stop engaging in the addictive behavior. She's tried, and she continues to try, but all to no avail!

Thomas

Thomas was the pastor of a small rural church, if any place in Southern California could be called "rural." The church hired him full time and already had a secretary who was part time in the mornings only. It was not a good situation for him, but at first, that was his secret alone.

Thomas was a sex addict. He had been watching porn since he was eleven years old, when an older brother had introduced him to *Playboy* magazine.

As Thomas continued to feed his addiction, what once was satisfying became borderline boring. So in his afternoons alone in the church office, he began to explore other sites. Eventually, he got involved in a sexual chat room and started having conversations with a woman. It didn't take long for their conversations to escalate, and she began to call him on his office phone—that way, there was no record that he had initiated the call.

The more they talked, the more they wanted to talk, and then they started talking about him coming out to meet her. When they eventually scheduled a time, Thomas couldn't buy the airline ticket, so the woman paid for it. Thomas told his wife he had been talking to a church in the Midwest and that they were flying him out for

an interview. He even told her what church it was and in what city, thinking that she would never check it out.

However, the third time he went for an “interview,” his wife became suspicious. She remembered the name of the church and looked it up on the Internet, then called the number she found, asking for her husband. They had never heard of him, and they had no interviews scheduled.

Now she was concerned. Thomas had left his computer in the church office, so his wife went to the church to check it for clues. She had no idea what he had been doing and was sickened by what she found in his history. She sat there stunned, and then she called the church’s chairman of the board and asked him to come to the office.

Together, in their disbelief, they started to develop a plan of action. He would go with her to pick Thomas up at the airport so he could do the confronting. They also figured they had to find out what he was doing on his trips first, though it was hard not to imagine what was going on. Once they knew what they were dealing with, they would flesh out the plan with the help of a local therapist.

Of course, Thomas was shocked to see the chairman of the board when his wife came to pick him up at the airport. At first, Thomas was defensive and stuck to his story that he had been meeting with a church, but the evidence was stacked against him. He finally confessed what he had been doing and agreed to follow a plan of action.

But within a week, Thomas decided he was finished. He resigned from the church, told his wife he wanted a divorce, left her and his

children, and moved to a different state to be with his chat-room love. After all, she was what could be called “porn-friendly.” That’s how powerful his process addiction was!

Andy

Andy’s story is a little different, although it starts out the same. Andy was introduced to pornography when he was thirteen. A few of his buddies knew he was looking at porn; they had introduced each other to the websites, carefully choosing who to let into their ranks. They had to be careful because they were all active in their church’s youth group. All along, Andy felt guilty about his involvement with porn, but he had convinced himself that the problem would go away once he was older and got married.

When he married, his time spent looking at porn decreased at first, but when he started leaving home on business trips, he made up for lost time. His obsession with porn was still there.

About five years into his marriage, his wife caught him, and they had a “truth session.” His wife felt betrayed—and rightly so—but they talked it through and agreed to go to counseling together. It felt like they were on the right track. They spent a year in counseling together and worked on a number of issues as well as Andy’s pornography use.

Ten years later, on a business trip, something triggered in him the “curiosity” to check out a porn site he had heard about. Before he realized it, five hours had elapsed—he had been totally lost in what he was watching. He thought it was a one-time “slip,” but soon, he found he was watching porn as frequently as he had in his teen years.

A couple of months later, his wife caught him again, and this time, the response wasn't couples counseling; it was what they should have done ten years earlier—an *Every Man's Battle* workshop. The workshop is held by one of the New Life Ministries, and it's an intensive weekend that has successfully helped men overcome their addiction to pornography. *Every Man's Battle* helped Andy learn, among other things, how to set up a network of continuous accountability with other men. Now, five years later, he and his wife have a marriage that has been restored!

Owning Mahowny

Some years ago, while I was teaching a class on addiction at Fuller Theological Seminary, we began talking about gambling. Someone suggested we watch the movie *Owning Mahowny*, which is based on the true story of Brian Malony.

In the film, set in 1982, Dan Mahowny is promoted to assistant branch manager of a Canadian bank in Toronto and given access to large accounts. He gradually starts skimming money from fake loans to finance his trips to Atlantic City casinos. Soon, he is making weekly trips, and the casino managers are treating him like a king, flying him from Toronto to Atlantic City and back in their private plane. Eventually, he embezzles more than \$10 million from the bank to pay his losses from gambling both with bookies and in casinos.

Just as the Canadian authorities are about to arrest him, he makes one last trip to Atlantic City. In a scene I'll never forget, he is shown playing blackjack in a private room. He is winning and has accumulated a massive amount of money. A casino worker

who knows his pending problem with the law back home begs him to stop while he is ahead, but Mahowny refuses to listen. He continues to gamble until he has lost it all.

When he returns home, the authorities are waiting for him. He pleads guilty to fraud and spends six years in prison. After his release, he stops gambling, marries, and has three sons. The Canadian bank pursues court action against the Atlantic City casinos and settles for an undisclosed sum. The court also requires all Atlantic City casinos to close for a whole day as part of the settlement.

People who are addicted to gambling often end up bankrupt, facing foreclosures and other financial, legal, and personal consequences. One of the most powerful reward systems is the random kind that we feed when gambling. That's what can keep you coming back for more, even though you know that in the end, you will lose. That is what makes gambling addictive, and anyone who has gambled can experience it.

Nick

Nick is a twenty-nine-year-old who lives in the basement of his parents' house. He has created a comfortable room for himself there, and he only emerges to eat, preferably when the rest of the family is asleep. He stays up most of the night playing video games, sometimes alone, and sometimes with people he only knows through the games.

Addiction to fantasy video games is a growing phenomenon. The graphics are improving, becoming more realistic. There are always new games being introduced, and the ability to connect

via headset with other players can be fascinating. Add to that the ability to take on a fictional character's identity and live life in an alternate reality, and it can become very addictive.

That's what has happened to Nick. He leaves his virtual world to work about ten hours a week. That gives him enough money for food and gas. The rest of the time he spends sleeping during the day and playing games at night. His only "friends" are the unnamed players he plays certain games with. No need for college or future goals—the biggest dream he has is to create a game someday, but he never considers how he would do that.

He's addicted, and the evidence is in his inability to connect with others in person, his lack of ambition, and his very unhealthy lifestyle. Fortunately, only one in ten who play video games end up becoming addicted.

Other Process Addictions

There are also those who spend too much, work or eat compulsively, or live out any other compulsive type of behavior that is out of their control. While process addictions may not make someone dependent on ingested chemicals, they still create physical dependence. The brain releases certain hormones when a person experiences a "high" during the activity, so a person can become addicted to the adrenaline rush he gets or the satisfied feeling that comes with the release of oxytocin in the brain.

What turns these activities into an addiction is that the person continues the behavior in spite of its negative impact. Another sign of an addiction is the anger expressed by the person when her access to her chosen addiction is threatened in some way—she may

get ready for a fight if someone even mentions that the behavior could be a problem. This may lead the person who loves the addict to back away and say to himself that maybe it isn't an addiction. Maybe his loved one is just depressed or under a lot of stress, or perhaps her self-esteem is in the pits. Many times, enablers would rather deal with those issues than confront the actual problem: the addiction itself.

While stress, depression, or low self-esteem may all be factors, the focus of any addiction treatment must always begin with the addictive behavior. Until that has been dealt with, focusing on the other problems will derail treatment. The addiction must always be the priority. Every situation we've described in this chapter is treatable. There is hope for healing. But before we look at treatment, let's put your loved one's problem in perspective.