Anger and Resentment!

I just finished reading a book entitled: It Worked For Me. The author, the legendary four-star general and former Secretary of State, Colin Powell, illustrates the “Thirteen Rules” that formed the basis of his success in his own personal, private and professional life. One of Powell’s short but sweet rules is “Get mad, then get over it.” He explains how he handles anger. He writes: “Everyone gets mad. It is a healthy emotion. You get mad with your kids, your spouse, your best friends, your opponents. My experience is that staying mad isn’t useful!”

Two thousand years ago, a Jewish Rabbi said practically the same thing when he counseled his friends in the city of Ephesus: “Don’t let the sun go down while you are still angry, for anger gives a foothold to the enemy.” The book of Genesis depicts a dialogue between a certain character named Cain and the Creator of the Universe: “Why are you so angry? Why do you look so dejected? You will be accepted if you do what is right, then watch out! The enemy is crouching at your door, eager to control you. But you must subdue it, and be its master.” Unfortunately, Cain refused this counsel and allowed his anger to fester into resentment toward his own brother, Abel, whom he slew in cold blood. Cain was consumed by his anger. No one knows how many nights he went to bed dejected and enraged and full of resentment. Someone has described resentment as the festering or metastasizing of unresolved and unprocessed anger. Resentment is the cancer of the spirit. It eats away at one’s spirituality: serenity, joy, hope and love. And as cancer untreated eventually destroys your body, anger and resentment unexpressed will destroy your spirit.

Powell puts it succinctly: “Get mad, and get over it.” Your own spiritual health is at stake. And, oh yes, your mental and physical health also!

Clyde P. Cassimy, Chaplain

Chemical Dependency Graduation

The Loma Linda University Behavioral Medicine Center’s (BMC) Chemical Dependency Program recognized graduates of the program at their semi annual graduation in April. It was a celebration attended by graduates, their families and alumni, De Bacordo Whyte, chemical dependency staff, and administration were also present in support of the graduates’ accomplishments.

One of the graduates shared her experience about what it was like to go through the program and the impact it had on her life. Family members also shared their touching stories and the changes that their family experienced during their journey. As always, Recovering Alumni Association maintained a strong presence as they supported our recovering patients and their families. If you have completed the Chemical Dependency Program from January 2012 through June 2012 we will be hosting your graduation on October 11, 2012 at the BMC Gymnasium. Look out for your invitation in the mail.

In This Issue

• Children of Alcoholics and Substance Abusers
• Addiction and the Family
• At a Glance
• From a Child’s Point of View
• Chemical Dependency Graduation
• Anger and Resentment

We want to hear from you

To inspire our readers and recognize your accomplishments, we would like to feature your story in one of our upcoming newsletters. Please send us a personal article or poem depicting your experience with addiction and/or alcoholism to:

Attn: Elaine Coyazo
LLUBMC
1710 Barton Road
Redlands, CA 92373

Please write to the address below if you wish to have your name removed from the list to receive announcements or notices introducing new services, health educational programs and events or promotions of Loma Linda University Behavioral Medicine Center. All reasonable efforts will be taken to ensure that your request is honored.

Promotional Services
c/o Access Center
245 East Redlands Blvd, Suite A
San Bernardino, CA 92408

Staying with Sobriety

Children of Alcoholics and Substance Abusers

Children frequently suffer in silence in families where alcohol or other drugs are being abused. Family life in an alcoholic / drug addicted home is characterized by chaos and unpredictability. Behaviors of the using parent can range from loving to withdrawn to “crazy”, and structure and rules may be inconsistent or even nonexistent. Many times children do not understand that their parent’s behavior and mood is determined by the amount of alcohol or drugs they have consumed and end up feeling confused, insecure and angry.

Many of these children blame themselves for their parent’s behaviors and believe it when their parents scream that they wouldn’t drink so much if the kids didn’t fight or had better grades, etc. Some children try to control the situation by getting all As or taking care of their siblings. Others withdraw trying to avoid any confrontations. Still others try to be the peacekeepers in the family or try to be the comedian to keep everyone laughing instead of being upset. Few children really realize that they don’t cause their parents to drink/use nor can they stop them from drinking/using.

Research has shown that children in alcoholic and drug addicted homes can also be affected in the following ways:

• Greater risk to become addicted themselves
• Higher levels of conflict in the home, including violence
Addiction and the Family

Addiction is often referred to as a “family disease,” because of its genetic nature, many generations of a family are often affected, and along with the act of drinking or using comes a general pattern of behaviors. These behaviors, related to trust, boundaries, and communication, are passed down from generation to generation.

As the addict or alcoholic’s life becomes increasingly centered around his or her drug of choice, so too do the family members’ lives become centered around the addict. The processes of addiction and codependency are remarkably similar, and involve becoming so outwardly focused that one avoids the feelings associated with looking inside – at one’s own past, current predicaments, future dreams – whatever it is that stunts one’s growth.

At the Behavioral Medicine Center, our Chemical Dependency team is interested in treating the patient and his or her family, so that everyone in the family has the opportunity to recover from this disease. By offering weekly family and children’s groups on the Unit, our hope is that family members will be able to voice their fears and concerns and work on their own goals for the future, both their individual goals and those connected to their relationship with the patient.

Our children’s program, for example, involves written assignments like an Anger Letter to Drugs and Alcohol, a List of Fears, a Gratitude List, and a Forgiveness Letter. It is our staff’s hope that by providing a safe place for patients and their family members to address the issues that have generally gone unspoken during active drug and alcohol use, families can begin to heal from the devastating effects of this illness.

Jennifer Fuchs, MS
Family Therapist

From a Child’s Point of View

Ethan A., the son of a recent patient, wrote the following about his experiences in a house with addiction and about treatment:

Before BMC
Before I came to the BMC it was so bad. I didn’t want to live at my house. I would mostly lock myself in my room and put my TV at the highest volume and play my PSP.

During BMC
When I was at the BMC I saw a lot of change. There was a lot of drama that I didn’t want to deal with.

After BMC
After the BMC it was awesome. There was no yelling and no more fighting. My mom would start smiling more and more.

Again
When my mom started drinking again it was like doing the same thing all over again.

When the mother of this child came in for treatment she hesitated to bring her son in for the children’s group. She, like so many others, found it hard to believe he had been affected by her addiction.

continued from page 1

Children of Alcoholics and Substance Abusers

- Much higher risk of suffering child abuse
- More stress-related health problems such as gastrointestinal disorders, headaches or asthma
- More symptoms of depression and anxiety
- Higher rate of behavior problems and negative attention seeking
- More difficulties in school and worse performance on standardized tests
- Low self-esteem

A parent’s substance abuse may also have other effects on children besides parent-child interactions. For example, if a parent makes poor money decisions under the influence or loses a job due to using/drinking the child will also suffer the economic consequences, such as losing the family car or home.

Whenever an adult with children enters drug/alcohol treatment it is extremely important to include the family in treatment whenever possible. Getting sober and changing old behaviors is a great first step in repairing issues in the family; however it is only the first step.

A portion of treatment needs to be focused on mending broken relationships with the family, including children who have been directly impacted by the addiction. The adult in treatment needs to be encouraged to take an honest look at the impact on the children and to work on improving communication with them. The children need to be given a safe environment to express themselves and to learn that they are not alone in this experience. Encouraging children to share with each other helps to reduce the feelings of isolation, shame and guilt as well as teaching them the importance of mutual support. Most children who participate in this type of treatment demonstrate improved self-esteem and improved ability to establish and maintain relationships.

Elaine Coyazo , CTRS

Sources:
National Association for Children of Alcoholics
Children and Substance Abusers and the Family
Drug Addiction Help

Staying with Sobriety     |    32    |    Staying with Sobriety