

Parenting in Recovery

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We have known for a long time that growing up in an alcoholic home negatively affects the children in a multitude of ways. Clinical observations and decades of research reveal a wide array of types of damage to children from parental addiction. It is also generally assumed that parental recovery and sobriety is good for the emotional and mental health of the children. Yet, there seems to be an expectation that the children are magically transformed by the mere fact of parental sobriety.

Therapists and researchers working with families in recovery know that the children do not recover in a passive way. Early recovery has been described as a traumatic experience for the family and the children. The addicted parent often enters treatment and recovery in response to one more crisis, sometimes a catastrophic one. The crisis itself may be a devastating crisis for the other spouse and the children as well. They may be expected to deal with that crisis with very little assistance from the non-drinking parent or family members. This neglect, already set in place by circumstances of active addiction where they were left to fend for themselves, may persist into early recovery, where they are still neglected by absent parents focusing on their own individual recoveries.

Recovery in the system represents a huge shift in the balance, structure, and functioning of that system. Recovery shakes up the system. Emotional, social, financial inconsistencies and chaos, along with disrupted family routines (i.e., meal times, bed times, etc.) may be replaced with calm, stable, predictable routines in early recovery. These are good changes for the recovery of the family including the children, but generally these changes in functioning are insufficient for emotional/psychological recovery of the children.

For children who have only known the chaotic, conflicted, and unpredictable system, everything they thought they knew may have just changed. The alcoholic and the spouse are also challenged to change up their interaction patterns, to individually work toward their recovery, and often to re-negotiate and restructure the roles and responsibilities in the family. The children are very much a part of the recovering family system and should be considered in how all these changes will be taking place. They are also called upon to change how they interact, and how they enact their own roles and responsibilities. Yet many times, the parents do not even discuss all these changes with them.

Children who may have been raising themselves in the face of parental addiction, are now expected to return to being children and expected to stop being concerned about the family finances and to stop parenting the younger children (or the parents). They may be expected to embrace an early bed time instead of staying up as long as they want or to automatically prefer a sit down family meal to a Happy Meal in front of the television. These changes in family routines probably represent parental attempts to return appropriate structure to family functioning, but to the children, they are just changes, that

may take away something that they liked. Parental recovery may also involve a step up in monitoring of the children and their activities. Depending upon the developmental stages of the children, these changes, are often met with resistance. Children of addiction often see themselves as “older” than their peers, and do not believe that they need so much “parenting” in recovery.

To complicate parenting in recovery even further, many addicted people and their spouses grew up in addicted families, and are generally inadequately prepared to know how to provide appropriate parenting to their own children. Recovery does not grant you life skills. It grants you an opportunity to learn life skills. The children are there along for the ride, while the parents are learning how to conduct their lives in a healthy, responsible manner.

Newly recovering parents can assist their children in their own recoveries by taking their children into consideration each step of the way. Sometimes the non-drinking spouse enters recovery before the alcoholic. That spouse can assist the children into beginning their own individual recoveries before the alcoholic enters recovery, or regardless of whether the alcoholic ever quits drinking. The spouse often enters recovery with the advent of the crisis that initiates treatment or recovery for the addict.

Initial efforts at recovery for the family resemble breaking all the rules in the family. The old rules, “don’t talk”, “don’t trust”, and “don’t feel”, are replaced with “talk to me about what you are thinking and feeling.” Instead of making excuses for the alcoholic’s behavior (or the not drinking spouse’s behavior), recovering parents listen patiently and let the child know that they have been heard. Instead of treating the child that accurately names the problem, (i.e., dad’s drinking) like a traitor, recovering parent(s) reinforce the risk-taking and encourage sharing of feelings. Instead of denial, parent(s) affirm the child’s perceptions and feelings. Parents admit mistakes.

Recovering parents teach their children about addiction, according to each child’s level of understanding. Parents prepare their children for the changes that will be occurring in recovery, letting them know that everyone is unsure about how all these changes will be taking place. Yet, parents reassure children that they will be taken care of in recovery and that the changes in the family will help them take care of the kids.

In addicted families, feelings are repressed. In recovery, children, who have not learned how to label, own, and express feelings, may be acting out those feelings. They may be fighting among themselves. They may become rebellious. Recovering parents are called upon to put their unresolved guilt aside long enough to deal with each incident in the most appropriate manner. Parents who try to problem-solve these issues from a position of guilt may have difficulty in holding children accountable for their own behavior, and for setting and maintaining appropriate boundaries and limits. Many parents who have grown up in dysfunctional families have no clue as to what constitutes reasonable responses to these and a multitude of other possible child rearing scenarios. Many recovering people and their spouses are unacquainted with responses that are in middle between polar extremes. Recovering parents may tend to go from absence of supervision

and limits to extreme rigidity and strictness. This only confuses the children and sets the family up for more conflict. Recovering parents are called upon to learn new parenting skills and to try new techniques with their children that may seem strange to them.

Pre-adolescent and adolescent children may start drinking or using drugs. Recovering parents may be resistant to discussing their children's use of chemicals from fear of appearing hypocritical, because they think chemical use in adolescent is "normal", or because they don't want to discuss their own addiction. For parents who grew up in addicted families, adolescent substance abuse may be considered "normal" in that family culture. In healthy families, it is not. One of the biggest contributing factors in the probability of someone becoming addicted to alcohol or other drugs is age at first use. This factor, along with genetic pre-disposition, observational learning, and other individual and family dynamics create an extremely increased vulnerability for the children of addiction to become addicted themselves. Healthy families have the expectation that the children will not be engaging in substance abuse.

Both parents should be prepared to deal with the trust issue. Just as the non-addicted spouse will continue to distrust that the alcoholic will stay clean and sober, or IS clean and sober, the children will also have distrust, perhaps about the drinking, perhaps about the return of old behavior of both parents. Children should not be punished for revealing this distrust. Parents can tell the children the steps that they are taking to maintain their gains in recovery, and can give their children permission to tell them, when the children perceive any return to old behavior. Parents, of course, are responsible for monitoring their own recovery, and for maintaining trustworthy behavior. Trust is regained the same way that it is lost—a little at a time. Children, just like the non-alcoholic parent, observe trustworthy behavior over time and trust returns in increments.

All of these issues have to be dealt with in ways appropriate to each child's needs. Parents who are not familiar with children's developmental stages would be well advised to read up on the subject and to work on parenting issues in couples' counseling in continuing care or in outpatient counseling. Treatment plan goals can target replacement of old dysfunctional parenting behaviors with development of new healthy parenting skills.

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