

A Parent's Roller Coaster Ride into Recovery, Part 2

BY ANONYMOUS

This story is continued from the last edition of the State Bar Journal.

Finally, the time came for Brian to leave the treatment center. The day we picked him up, my wife and I met with Brian and his counselor for a discharge conference. I have a vivid memory of two points from that meeting that have remained very important in my own ongoing journey with recovery in the months and years since. First, the counselor said that recovery is not a microwave process. In other words, Brian was not completely and permanently healed or cured by 90 days in treatment. Recovery for the addict is an ongoing, lifelong process with ups and downs, and it depends on how hard and honestly the addict works on his recovery program. The same is true of my recovery as a family member.

Second, the counselor presented a recovery contract between Brian and us. It required him to do many recovery-related things including attending an intensive outpatient treatment program ("IOP"), and prescribed a certain process to follow in the event of a relapse. My wife and I also had obligations. The contract imposed consequences for violations, and we agreed in writing to enforce those consequences. This was my first experience in setting boundaries—a very important tool for family members in dealing with addicts. In this context, a boundary is not something that I draw around the addict to restrict him or punish him. Instead, a boundary is one I draw around myself for my own self-care, so that I do not become a doormat or an enabler. It can sometimes be difficult for us family members to discern where, when, and how to set and enforce boundaries. But the boundaries in the treatment center's contract came from professional experts in recovery so we trusted them.

I had mixed emotions about Brian's homecoming. He is my son, so the natural inclina-

tion is to want him near, to have him back home. But on the other hand, I was apprehensive and uncertain. Our relationship before he went away was filled with conflict and chaos, and I did not know if or how that would change. And I had the natural fear that he might relapse.

In addition to enrolling Brian in an IOP program and otherwise following the contract, my wife and I had one practical immediate goal for Brian—to graduate from high school (keeping in mind, of course, the "What good is a well-educated dead person" admonition). He finished just enough work to graduate, although we were all sweating it a bit up to the last few days. This illustrates an important point for recovery of family members: often we have to adjust our expectations of the addict downward to be realistic. For so long I had dreamed of Brian going to college. He had so much potential. But I knew I had to accept the facts as they were—he had lost a lot to addiction and was just beginning the recovery journey, and the most that could be expected at that particular time was for him simply to graduate. While his peers were getting high grades and getting accepted into college, Brian had barely scraped by with passing grades on the minimal number of courses. But to us, at that time, that was progress and it was enough. We knew we had to grieve the lost dreams but move on and stay focused on supporting Brian in his most important priority—his continuing recovery from addiction.

Brian's outstanding criminal charge was dismissed after his discharge from the treatment center. The judge dismissed the charge based on his completion of the treatment program.

We found an excellent IOP program for Brian in the area. We attended Saturday morning family group sessions. Life at home with Brian was a bit calmer than before. Al-Anon and other education had helped me understand Brian better and to work on the things I had done that had contributed to our inflamed relationship before treatment. Brian



was more respectful and expressed gratitude for the opportunity for recovery. I continued to go to Al-Anon and made gradual progress in working the program. But sometimes I still lapsed into the old behaviors, impulsively checking behind Brian, playing detective—Was he really going to his AA meetings? Did he really have an AA sponsor as required by his contract and IOP program? In other words, I still had not completely let go of his recovery and that hampered my own serenity.

I was also in the midst of preparing to move my law practice to the new firm. It was going well, but it took a lot of extra energy and focus on top of my normal workload and the stress of Brian's return.

Brian and I did some fun things together during that time. Most memorably, Brian, his brother, and I went to Atlanta to see our favorite baseball team play a series against the Braves. It was Father's Day weekend and we had a great time. I felt so grateful just for the moment.

Then Brian relapsed. He began using again, and admitted that he just wasn't into recovery and didn't want to go to IOP any longer. The IOP terminated him from the program, and Brian's failure to seek recovery steps after relapse constituted a serious violation of the contract. Under the contract, Brian was required to leave our home.

This was a huge test for my wife and me.

Would we follow through and enforce it? We were filled with apprehension and fear. But we trusted the boundaries and consequences set out in the contract by the professionals who had long experience with addiction. We listened to what we had heard from others' experience in Al-Anon, and we did not want to further enable Brian's addictive behaviors. The family program leader's quote—about how the addict will not get into recovery until the pain of using is worse than the pain of not using—now echoed in my mind. We followed through and told Brian that he had to leave. He had chosen not to continue with recovery, and it was crucial that we allow him to live with the consequences of that decision. It was not easy for us; in fact it was excruciating. Many fears ran through my head and heart—Where would he go? How would he get food? How bad would his drug use become? Would he be safe? I knew I had no control over that and had to let it go and put it in the hands of a power much greater than me. It was a critical moment in my own recovery. One of the biggest lessons I had heard in Al-Anon was the importance of examining our true motives for what we do. At first blush, it seems natural and compassionate for us to want to rescue our children and protect them from harm. But the problem with an addict is that rescuing him from the adverse consequences of his actions will only further enable his use and addictive behaviors. If, despite that fact, we still choose to rescue and protect, then our choice to do so often comes largely out of self-centered motives, i.e. to protect ourselves from experiencing our own pain that would come from seeing bad things happen to our beloved child. This is often called self-centered fear. Even though we may think we are acting for the safety of the child when we rescue him, it is important that we do some thorough, honest self-examination to see if self-centered motives are also at play.

I will never forget the day Brian left. I was outside in the yard when he came out with a backpack and got in a car with someone and they drove off. It seemed so surreal. My son, who I had loved with all my heart since the day he was born, of whom I had a million beautiful past memories and many more recent painful ones, was now homeless, or at least he was "out there" beyond our sight and control. After he drove away I went into the house and found Brian's little brother sobbing. I broke down sobbing with him. The weight of the moment finally came down on me. But

I remained convinced that we had done the right thing.

Brian was gone for about a month. It was very hard not knowing where or how he was. Per the IOP counselor's recommendation, we did not initiate contact. But we heard from Brian occasionally, which was a relief when it happened, just to know he was alive and safe. We mostly detached from him and the situation. To this day I don't know where he went or what he did or how he got by, other than we learned that he had another arrest during that time.

Whatever happened to Brian while he was out there, apparently it didn't agree with him because after a month he begged my wife to let him come home. He said he did not want to go back to IOP and that he wanted to try to make it on his own, without any recovery program. We knew he would not succeed. My wife told him that he could come back. She admitted that she was just not emotionally ready to endure any more of the fear and uncertainty of Brian being out there.

This occurred in the middle of a very stressful time for me. I had just moved to a new firm, and I was in the midst of handling a demanding *pro bono* matter that was heating up. Although I did not like the idea of letting Brian come back into our home while he openly disavowed recovery efforts, I respected that my wife just couldn't get there emotionally at that time. There were times when the roles were reversed and I was the one who was not yet emotionally ready to do the right thing and my wife had been patient with me. The counselor encouraged us to always try to be together on these big decisions. Thus, I went along with it. But we committed to each other that we would not allow this to go on indefinitely. We would see how it played out and try our best to take the appropriate actions when we were both ready.

For the next year Brian lived in our home. My relationship with him during that time was somewhat better than before. I tried to focus on taking care of myself and not directing anger and judgment at Brian. My Al-Anon work contributed greatly to this changed attitude. Brian attended community college. But he was using drugs and hanging out with the old friends. Over time he gradually got worse and his school performance suffered as well. He also had two more drug-related arrests. One of those was truly a milestone moment in our recovery journey. My wife and I were asleep one night when Brian

called and said he was being arrested and wanted us to help. My wife answered the phone, and after listening, flatly told him no, we weren't going to come rescue him, he was on his own. The second arrest occurred a few months later. Apparently he got the message the last time around, because he didn't even tell us about it. We found out about it as attorney solicitation letters poured into our mailbox. We never did get involved in either of those charges. We left it up to Brian to face the court system on his own. One day I actually bumped into him in the parking lot across from the courthouse, and he said he was headed to court on one of his charges. I didn't inquire any further, I just left it to him.

At some point my wife and I finally decided to put an end to Brian's stay with us. It was not easy. We gave him a target date when he would have to leave. We told him we would give him a nominal amount of money to get started in an apartment, but beyond that he would be on his own and would have to get a job and support himself. His initiative and overall condition had declined so badly by that point that we were quite confident he would not be able to make it on his own under those conditions. We offered him one alternative: go back to inpatient treatment.

As the target date got closer, Brian eventually decided to go to inpatient treatment. He said he was sick and tired and did not want to live that way anymore. He admitted that during his first inpatient rehab and IOP, he wasn't ready to give up the drug life, that he didn't yet want recovery and was just going through the motions in those programs. Even though Brian's outcomes from those programs did not seem positive, he has since told us that he was exposed to recovery principles there that sunk in and came back to him later in recovery. This highlights one very important point for family members' recovery: We should not place too much emphasis on the outcome at any particular moment because recovery is a process and we never know if what seems to be a bad event or outcome might actually be the very thing that eventually leads to recovery. In any event, this time around Brian seemed more genuine in his desire for recovery. From some things Brian has told us since, the two criminal charges he was forced to handle on his own might have been the final straw in his surrender.

The treatment center had a wonderful feel to it—a peaceful setting, and staff with a reputation for being committed, caring, and very

professional. We left with a renewed sense of hope that Brian might find his way to recovery there. We visited him after he had been there about a week, and he seemed genuinely committed to trying to make it. His whole demeanor seemed more genuine and intent, although he was clearly struggling emotionally and mentally after having detoxed.

A couple of days later we received a call from a nurse at the facility who told us that Brian appeared to be suffering from psychosis and that we needed to come take him to the psych ward at the local hospital for diagnosis and treatment. The nurse made it clear that they were not discharging Brian from the treatment center and they expected him back soon. We took Brian to the hospital where he was admitted and diagnosed with psychosis. His symptoms were that he heard voices. It apparently was a drug-induced psychosis. Needless to say, after all Brian and we had been through to that point, it was quite a blow to get this news. We were filled with shock and sadness to see our son check into a ward behind locked doors with other psych patients, and with such a serious diagnosis and unknown future implications. At the hospital, Brian got stabilized and began appropriate medications. After a few days he returned to treatment.

Although we had hoped that the psychosis might be a temporary condition, that turned out not to be so. Brian and the treatment center's psychiatrist engaged in a continuous process of adjustment over the ensuing months and years to find the right mix of medication to treat the psychosis. I am grateful to say that Brian's psychosis has been managed over the past ten-plus years such that it does not interfere with him having a normal and productive life.

After returning to the treatment center, Brian stepped back into the groove of recovery work, and although he had a lot of trauma to overcome, he did well. During the family week we were asked to write a letter to the disease of addiction—a memorable experience for me. As I read back over that letter today, I see at least two important points: First, I had made a lot of progress in that first year and a half thanks to Al-Anon, the family education programs we had attended, and cold, hard experience. Second, the humbling realization that I was still intensely swept up in the family disease and had a lot of recovery work yet ahead of me.

On the last day of the family program, our

entire family met with the counselor who led the program. He raised the question of where Brian would live upon discharge from treatment. The staff recommended their halfway house for a continuing recovery environment. Brian said he wanted to try it on his own and asked if we would support him financially and otherwise in that. Having already anticipated this question and discussed it with my wife, I immediately responded, as firmly but lovingly as I could, that if he intended to live on his own, he would have to do so without our support. But I added that if he chose to move on to the halfway house, we would support him in that. It was yet another moment of truth for Brian and all of our family in the room. With a sigh of resignation, Brian said he would move into the halfway house. From his reaction and body language, it appeared to us that he had surrendered and that his plea to go out on his own was only half-hearted. Some months later he recalled this moment and confirmed it was his final surrender.

Brian's stay in the halfway house went well. He began to assimilate into the AA recovery community in that city. When he finished there, he made a decision on his own that turned out to be one of the best decisions of his life. He decided that, rather than return to our home or our town, he would stay in that city where he had established some recovery contacts, and move into a sober Oxford House where he would have a strong recovery environment and could begin to build a life for himself. He got a job and was feeling proud of his independence. I still had some lingering regret about my lost hopes and dreams for him, but because of Al-Anon I mostly felt acceptance of his situation just as it was and joy for Brian's sense of accomplishment on his own.

Brian eventually enrolled in community college and got an apartment with a sober friend. I stayed out of his program. I left his recovery to him, as it should be, and I focused on my own recovery.

Earlier I made the point that we should not get too discouraged by a bad outcome at a particular point in time because we don't know for sure where it might lead in the future. Brian's psychosis is a great example. Seeing Brian's symptomatic state in the hospital and hearing the diagnosis were a staggering blow to me. I shared the deep sense of sadness along with his little brother on that bench outside the hospital. But after getting some recovery time under his belt, Brian related to us that

his psychosis was a major disincentive to using drugs again, as he never wanted to endure those symptoms again. So you never know—what seems like a desperately dark event might turn out to be an important contributor to the addict's recovery.

It has now been over ten years since Brian last used drugs or alcohol. He has lived a life of continuing recovery. He completed his college education. He has a wife and children, and a productive job that he loves and allows him to support his family. Naturally, I have deep gratitude for all of that. But I am also grateful for the entire journey because it has led me to a life of greater serenity than I ever dreamed of. My experiences, and the Al-Anon program, have shown me how I can better live at peace with myself and others, and how I can, with the proper attitude, place my problems in their true perspective so that they lose the power to dominate my thoughts and my life. This quote from the Al-Anon daily reader, *Hope for Today* (p. 141), says it well:

The serenity I am offered in Al-Anon is not an escape from life. Rather, it is the power to find peacefulness within life.

Al-Anon does not promise me freedom from pain, sorrow, or difficult situations. It does, however, give me the opportunity to learn from others how to develop the necessary skills for maintaining peace of mind, even when life seems most unbearable...

Al-Anon also gives me the opportunity to live a serene life free from the burden of responsibility for others' decisions. It teaches me that I can direct my life toward personal growth and satisfaction. It increases my confidence, which comes from trusting that the Higher Power of my understanding will sustain me and guide me through life's ups and downs.

Serenity is not about the absence of pain. It's about my ability to flourish peacefully no matter what life brings my way. ■

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