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The study of individual and psychological characteristics of codependent family members

This article deals with the problem of codependency as a condition applicable with respect to spouses, partners, children of chemically dependent people. The article presents the results of the research aimed at studying the individual-and-psychological characteristics of codependent family members and their impact on the emergence of drug and alcohol dependency. The research revealed a specific relationship between the individual-and-personal characteristics of the family members and the emergence of chemical dependency. People suffering from codependency are characterized with a low level of subjective control, a high level of anxiety, low self-esteem and a high level of family-conditioned mental stress. The view on drug addiction as an individual problem in the context of interfamilial environment has been getting more and more supporters, and, in fact, is marking the appearance of a fundamentally new approach to addiction treatment. Thus, the work with the dependent's environment, his family is becoming one of the most important factors of success in the treatment of drug and alcohol addiction.

Keywords: family, codependency, alcoholism, addiction, personality features, chemical dependence, family disease.

Like in any problem which is far from being solved, in the study of problems related to addictive behavior patterns in family relationships there are still a lot of «blind spots» and controversial issues. Modern psychology science and above all medical psychology cannot stand aloof from being engaged in the solution of such an important problem. This is driven by both the objective urgency of the problem and the subject of the specified science branch which along with other problems deals with the issues of interaction and mutual influence between an addict and members of his family.

The problems of dependencies in all their numerous forms are of great urgency for Kazakhstan's society. Last decade of the 20th century was marked by an unprecedented increase in drug addiction and alcoholism mainly among young people. According to the Republican Scientific and Practical Center for Medical and Social Problems of Drug Addiction, 2008 witnessed the growth of the number of population's primary diseases related to psychoactive drugs — 390.4 cases per 100 thousand people. This number is higher when compared with the rate in 2007. The drug addiction level in Kazakhstan and other Central Asia's states in contrast to other countries is very high. Presently the number of drug addicts in the republic accounts for about 59 thousand people. Over the last 10-15 years the number of drug addicts in Kazakhstan has increased 3.5 times, with two-thirds of them being young people under the age of 30. However, some experts believe the real number of drug addicts is 8-10 times more.

When they speak about the low effectiveness of the treatment of a patient with chemical addiction, they often complain about the fact that «a patient has returned to the same environment». In fact, the environment can contribute to a relapse of the disease, especially if it is an interfamilial environment.

When broadly defined, the term «codependency» is applicable with regards to spouses, partners, children and adult children of addicts, addicts themselves who are certainly to have grown up in the dysfunction-

al family system. A person can be considered codependent when living in a dysfunctional family with unhealthy rules facilitating codependency.

Codependency is a current state which is mainly the result of the adaptation to family dysfunction. It is an ingrained response to stress which over time becomes a way of life rather than a means of survival. It is significant that when the stress state ceases its influence, a codependent person continues to act in his surrounding environment in the same way as if the oppression threat remained [1].

One of the leading foreign psychotherapists M. Beattie says that chemical dependency is a family disease. There are theories that address chemical dependency as a symptom of family dysfunction. From this it follows that the substance abuse treatment should include not only drug and alcohol dependency treatment but also the treatment of codependency. Both a patient and other relatives living together with him need a relevant help.

As M. Beattie defines, «a codependent person is a man who has allowed the other person's behavior affect him and is completely engrossed in controlling the actions of this person (the other person can be a child, an adult, a lover, a husband, a father, a mother, a sister, a grandmother, a best friend, a normal person, who from time to time experiences the feeling of sadness)» [2].

These definitions clearly indicate that a codependent person is not free in his feelings and behavior; he seems to be deprived from the right to choose what to feel and how to act. Following the close contact with a chemically dependent person and failed attempts to control the behavior of another person, people who are close to a chemically dependent person develop into reactive personality type — a codependent person loses the ability to feel, think and act at his own choice; he also loses the ability to manage his life (he tries to control the lives of others), he only reacts to what others do, think and feel.

Some authors believe that codependency is the same disease as dependency. I do not fully share this view. Codependency is more likely to meet the criteria of pathological development of the personality. Anyway, codependency can be more deeply understood basing rather on the terms of descriptive psychology than on the terms for mental disorders. A thorough understanding of an individual is particularly necessary when we strive to provide psychological help rather than pharmacological one [3].

Addiction to alcohol and drugs and codependency equally deprive a patient and relatives living together with him from energy and health and have a hold over their thoughts and emotions. While a patient obsessively thinks about the past or future drinking (taking any drugs), the thoughts of his wife (mother) are equally compulsively focused on possible ways to control his behavior [4].

Both dependency and codependency are a long-term chronic state leading to sufferings and spiritual deformations. The codependents' deformation is expressed in the fact that instead of love they feel hatred to relatives. They lose faith in everyone except for themselves though they do not trust their healthy impulses as well; they feel jealousy, envy and despair. The life of dependents and their codependent relatives goes in social isolation (contacts with drinking companions are not considered as a full interaction) [5].

Currently existing approaches to understanding codependency are either descriptive or narrative. Despite the high social, scientific, and most importantly, practical importance of psychological studies of the family role in the emergence and development of different dependencies [6], there are still no attempts of theoretical generalization of empirical research results. As a result it hampers to create a complete psychological concept of drug addiction and other dependencies. There are hardly any generalized researches of the role of the family in the development of drug addiction. In this regard, the main goal of our work was to describe in the fullest possible manner the role of the family in the emergence and development of drug abuse.

The article presents the results of the research aimed at studying the individual-and-psychological characteristics of codependent family members and their impact on the emergence of drug and alcohol dependency. The research revealed a specific relationship between the individual-and-personal characteristics of the family members and the emergence of chemical dependency. People suffering from codependency are characterized with a low level of subjective control, a high level of anxiety, low self-esteem and a high level of family-conditioned mental stress.

To specify the stated goal, the following objectives were put forward: the review and analysis of theoretical sources on this issue, the conduction of the research aimed at studying the role of the family in the emergence of drug dependency, the analysis and generalization of the results obtained during the research.

The research was conducted on the basis of Karaganda Regional Drug Rehabilitation Center (department of rehabilitation of people with drug and alcohol addiction). The study group in our research included relatives of people suffering from drug addiction. The subjects were 30 people (18 males — 60 %, 12 females — 40 %) aged 19–50 years. The sample group was formed in a random order, i.e. gender, age, educa-

tion, and place of work were of no importance for the study. Conducted interviews and «codependency scale» technique revealed two subgroups of subjects: people suffering from codependency — 16 people (53 %) and those who have no codependency — 14 people (47 %).

The research also involved the use of the questionnaire «The level of subjective control» (LSC) for the diagnosis of internality and externality, projective technique «Nonexistent animal», color test of relationships (CTR), the method of «Family Model» allowing to identify a family environment, A. Assinger's test which allows to identify the features of communicative sphere and the questionnaire of Plutchik-Kellermann-Conté determining a type of personality's protective mechanisms.

After conducting the research in the group of subjects with codependency, we got the following results: a low indicator according to general internality scale. This corresponds to a low level of subjective control over any significant situations. Such people do not see the interrelations between their actions and significant life events. They do not consider themselves able to control this interrelation and believe that most events and actions happen by chance or are the result of other people's actions. The scale of internality in family relations also revealed a low indicator and this means that a person thinks his partners not himself be the cause of significant situations arising in the family. Results on the scale of internality in interpersonal relationships point out that a person cannot actively form his social surrounding and is inclined to consider his interpersonal relationships as a result of the partners' activity.

The self-assessment study of people with different types of subjective control showed that people with a low level of subjective control characterize themselves as selfish, dependent, indecisive, unjust, fussy, hostile, unconfident, insincere and irritative people.

The projective test «Nonexistent animal» was carried out for the diagnosis of the personality of codependents. When analyzing the data of subject sampling, we can emphasize the following: subjects suffering from codependency have low self-esteem, self-doubt, depression, indecision, a high level of anxiety, protection from the surrounding (verbal aggression).

These definitions clearly indicate that a codependent person is not free in his feelings and behavior; he seems to be deprived from the right to choose what to feel and how to act. Following the close contact with a chemically dependent person and failed attempts to control the behavior of another person, people who are close to a chemically dependent person develop into reactive personality type — a codependent person loses the ability to feel, think and act at his own choice; he also loses the ability to manage his life (he tries to control the lives of others), he only reacts to what others do, think and feel.

Basing on the results obtained during the sample study, it can be stated that patients with codependency are characterized with a low level of subjective control, low self-esteem and a higher level of anxiety. This is confirmed by such carried out methods as codependency scale, LSC, «Nonexistent animal» test, CTR which provided the basis for singling out the following individual and psychological characteristics of codependents: codependency corresponds to the low level of subjective control over any significant situations. Such people do not see the interrelations between their actions and significant for them life events. A person considers his partners not himself to be the cause of significant situations arising in the family. A person cannot form his social surrounding and is inclined to consider his interpersonal relationships as a result of the partners' activity. Codependents are reported to have a high level of anxiety, protection from others, low self-esteem, self-doubt, depression, indecision, fear and the presence of depressive reactions.

A high level of family-conditioned mental stress was observed in the group of codependent subjects that states that subjects create a situation of constant pressure on a drug addict in a variety of ways. It reaches its greatest intensity when codependents on-and-off make an addict believe in himself, arise in him some desire and aspiration, and then cease to believe in him. In families of codependents one can see excessive aggressiveness and lack of balance in relation to drug addicted family members which can manifest itself in irritability. The subjects of this subgroup are over-aggressive and at the same time they are often unbalanced and violent towards others. The dominant psychological defenses in codependent individuals are overcompensation, rationalization and denial. In contrast, the other subgroup is characterized with a low level of family anxiety, suggesting that this subgroup subjects suffer from poorly-acknowledged dissatisfaction, which shows itself in constant doubts, apprehensivenesses, fears concerning their family and family members. Subjects of this subgroup are moderately aggressive and quite successfully get on with their life, since they have enough ambition and self-confidence. Their dominant psychological defenses are repression, substitution, extrajection.

Mathematical calculations with the use of A. Student's T-test have put forward the statistical significance of differences in the above mentioned subgroups in their level of aggression and subjective control.

Summing up the above mentioned, it can be stated that there is likely to be a certain relationship between the individual and personal characteristics of the family members and the possibility of chemical dependency emergence.

When they speak about the low effectiveness of the treatment of a patient with chemical addiction, they often complain about the fact that «a patient has returned to the same environment». In fact, the environment can contribute to a relapse of the disease, especially if it is an interfamilial environment.

When broadly defined, the term «codependency» is applicable with regards to spouses, partners, children and adult children of addicts, addicts themselves who are certainly to have grown up in the dysfunctional family system. A person can be considered codependent when living in a dysfunctional family with unhealthy rules facilitating codependency.

These days the view on drug addiction as an individual problem in the context of interfamilial environment, a problem which is «immersed» in this context, has been finding more and more supporters, and, in fact, is marking the appearance of a fundamentally new approach to addiction treatment [7]. Traditional addiction medicine has made significant progress in the understanding and treatment of somatic aspects of addiction as well as mental changes arisen on intra-individual level. However, the low efficiency of the approach aimed at the very personality of an addict is the main argument confirming its limitations. Thus, the work with the inner circle of an addict and his family is becoming one of the most important success factors in addiction therapy.

The general conclusions resulting from this study are in need of specification which implies the study of psychological problems of codependency at a higher scientific level.

This problem is getting more actualized in connection with the spreading and deepening of chemical dependency as well as other kinds of addictive behaviors (sexual addiction, food addiction, internet addiction, and others.). At the same time there are almost no studies summarizing the role of families in the origin and development of alcoholism and drug addiction.

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Medical assistance should be directed to helping codependents realize motives of their behavior, balance the emotional sphere, understand the influence of emotional states on family relationships, and acquire necessary skills to comprehend yourself and others to achieve the best relations and harmony with other people, to improve the mental and physical health of a person and his family as a whole.

In conclusion, we must recognize that nowadays only a few and often poorly-related fragments of psycho-corrective and psychotherapeutic work in the field of codependency have been determined. The overall aim is to create an integrated system of psychological support of the process of codependents' rehabilitation and develop its theory and principles [8].

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А.Б. Тулебаева

Тәуелді отбасы мүшелерінің жеке-дара психологиялық ерекшеліктерін зерттеу

Мақалада ерлі-зайыптыларға, серіктестерге, химиялық тәуелділігі бар адамдардың балаларына қатысты болатын калып ретіндегі тәуелділік мәселесі қарастырылды. Тәуелділігі бар отбасы мүшелерінің жеке психологиялық ерекшеліктерді және нашақорлық және алкогольды тәуелділіктің пайда болуына әсерін зерттеуге бағытталған зерттеулер жүргізілді. Зерттеу барысында отбасы мүшелерінің жеке тұлғалық ерекшеліктері мен химиялық тәуелділіктің пайда болуының арасында байланыс бар екені анықталды. Тәуелділігі бар адамдарда субъективті басқарудың төменгі деңгейі, алаңдаушылықтың жоғары деңгейі, төменгі өзіндік бағалауы, отбасылық шарттарған жүйке-психикалық шиеленістің жоғары деңгейі көрінеді. Сөйтіп, нашақорлық пен алкогольды терапиядағы жетістіктің маңызды факторлардың бірі тәуелділігі бар адамдардың отбасымен және жақындарымен жұмыс жасау болып табылады.

Кілт сөздер: отбасы, тәуелділік, маскүнемдік, нашақорлық, химиялық тәуелділік, тұлғалық ерекшеліктер, отбасылық аурулар.

А.Б. Тулебаева

Изучение индивидуально-психологических особенностей созависимых членов семьи

В статье рассмотрена проблема созависимости как состояния, применимого в отношении супругов, партнеров, детей химически зависимых людей. Приведены результаты исследования, направленного на изучение индивидуально-психологических особенностей созависимых членов семьи и их влияния на возникновение наркотической и алкогольной зависимости. В результате исследования обнаружилась определенная взаимосвязь между индивидуально-личностными особенностями членов семьи и возникновением химической зависимости. Отмечено, что у лиц, страдающих созависимостью, низкий уровень субъективного контроля, высокий уровень тревожности, низкая самооценка, высокий уровень семейно-обусловленного нервно-психического напряжения. Подчеркнуто, что взгляд на наркоманию как проблему личности, вписанную в контекст внутрисемейной среды, в последнее время находит все больше сторонников, и, по сути, знаменует собой возникновение принципиально нового подхода к психотерапии алкоголизма и наркомании. Таким образом, одним из важнейших факторов успеха в терапии наркомании и алкоголизма становится работа с близким окружением самого зависимого, с его семьей.

Ключевые слова: семья, созависимость, алкоголизм, наркомания, личностные особенности, химическая зависимость, болезнь, семейное заболевание.

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