

# Substance abuse?



What now?

**Make decisions  
based on your values  
-not based  
on your emotions.**

**Substance Abuse, addiction?**

Is someone you care deeply about using some type of “mood altering” substance? Perhaps too much time wasted, classes failed, jobs lost, money blown, arguments/hangovers/blackouts and broken promises to change, slow down or quit? Now what? Do you want to know what you can do about *their* problems? Perhaps you are reading this in hopes of finding a way to:

**“Make them listen!” “Make them understand!” “Get them to stop!”**

If your intention is to *change/fix/rescue* or “*help*” another adult, you will be greatly disappointed in this material. Recovery is based on the philosophy that each person is responsible for his or her own behavior. This means that the best treatment outcome results from *internal* motivation (personal choice to change), not *external* motivation (force, coercion or manipulation).

Bottom line: **You cannot change other people, but you can role model a healthier response.**

**You have  
four basic  
choices  
for how to  
respond  
to  
someone  
else’s  
stress  
actions  
problems  
illness  
addiction**



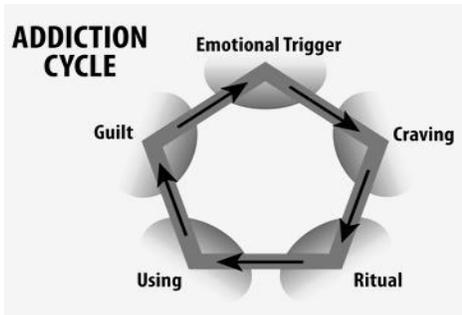
**What  
Do  
You  
Choose?**

- Anger/Complainer/Blamer**
  - Stuck in blame, anger and resentment about *them*
  - Complain, judge and nag → “*They are the problem!*”
  - Use anger & blame as a means to control, feel superior
  - Attempt to control other’s behavior, make them stop.
  
- Enabler/Codependent/Victim**
  - Either in denial that substance abuse is a problem or obsesses about controlling their substance abuse.
  - Over-responsible and guilty about other people’s emotions and actions.
  - Hyper-focus on other’s behavior, thoughts & emotions.
  - Enabling: avoiding or excusing, caretaking, cleaning up, financing, rescuing, fixing, and giving thousands of second chances while wishing another’s behavior will change.
  
- SDB/Self-Defeating Behavior**
  - Uses stress, distress and low self-esteem to excuse bad habits and unhealthy lifestyle such as:
    - Work-aholism (avoid by staying too busy)
    - Excessive spending, shopping & clutter
    - Excessive eating, drinking/smoking, pill popping.
    - Dysfunctional relationships Gossip, betrayal, tantrums.
  
- Recovery**
  - Takes responsibility and problem solves by ending denial, enabling and codependence.
  - Maintains dignity and self-respect.
  - Role models a healthy lifestyle with boundaries and assertiveness: detaches with love. (Alanon)
  - Makes decisions based on values, not emotions. (does the right things, not just the easy or comfortable things)

## What is the healthiest response to someone who is messing up his or her life with alcohol, marijuana, prescription medications or illegal street drugs?

Let's start with understanding the terminology used by doctors, hospitals and treatment centers to define exactly what "problem use" is. Did you know that the medical community does not use the word "alcoholic"? The correct terminology used today is "Substance Use Disorder".

### Normal? Substance Abuse? Addiction? When is *substance use* a "disorder"



**DSM V- Substance Use Disorder:** The information in this material is based on The Diagnostic and Statistical Manual of Mental Disorders (DSM-V revised in 2013). This manual is used by the health care system and the insurance industry to define, diagnose and treat what was formerly referred to as substance abuse and substance dependence.

**Mood altering substances:** In Michigan, marijuana use without a medical card is illegal, as is drinking under the age of 21 years old so both automatically cause potential legal and employment problems. No substance use is considered "normal" when illegal.

**Definitions:** One drink =  5 oz. of wine  12 oz. of beer (5% alcohol)  1.5 oz. liquor (80 proof).

**Moderation:** According to the *Dietary Guidelines for Americans*, "drinking in moderation is defined as having no more than 1 drink per day for women and no more than 2 drinks per day for men. This definition is referring to the amount consumed on any single day and is not intended as an average over several days."

**Binge drinking:** The National Institute on Alcohol Abuse and Alcoholism defines binge drinking "as the amount of alcohol leading to a blood alcohol content (BAC) of 0.08, which, for most adults, would be reached by consuming five drinks for men or four for women over a 2-hour period."

**Denial:** "A psychological defense mechanism in which confrontation with a personal problem or with reality is avoided by denying the existence of the problem or reality." *Don't even know I am lying.*

### To determine when the DSM V criteria for Substance Use Disorder apply to you or your loved one ✓ check all statements below that are true (occurring within a 12 month period).

1. Use causes **reduction or impairment** in the ability to fulfill major social, family, school or job duties. Example: problem attendance, reduced/impaired performance at school, work or home. *Reduction or impairment may be hard to detect when enablers "help," cover-up, fix, or deny the problems. Enablers are people who inadvertently block users from experiencing the consequences of their own behavior. Because enablers' judgement is often clouded by denial, they don't realize that the "help" reinforces the users undesirable behavior. Examples of enabling behavior: payment of failed classes, fixing any neglected responsibilities, cleaning up after the party, financing life expenses and legal fees so the user can afford to continue the use.*
2. Continuing to use despite the objections of others or evidence that use is causing problems. *(Notice how enabling impacts this issue too. What if everyone in the family or friend group normalizes being drunk/high/arrested? What if no one says anything when the class is failed or the*

*job is lost because of weed or alcohol? What if no one speaks up after the blackout caused a fight or frightened the children?)*

- 3. Increased tolerance: ability to ingest more without feeling the effects or experiencing hangovers.
- 4. Withdrawal symptoms: cravings, irritability, anxiety, mood swings, sleep disturbance, illness.
- 5. Using greater amounts than intended or using more frequently than intended.  
*Denial impacts this issue too. Missing work most every Monday is not normal. High levels and frequencies of intoxication is not normal...even when everyone including grandma is doing it!  
Use the dysfunctional family test on the next page to learn more.*
- 6. Unsuccessful efforts to control, reduce or quit using. This includes broken promises and lost trust.
- 7. Excessive amounts of time involved in obtaining, using or recovering from the substance. Example: Majority of free weekends involved in “partying,” or using nightly after work or before bed, frequent hangovers.
- 8. Use in potentially dangerous situations: use while operating machines or using sharp objects, driving under the influence, use near small children, use escalating into domestic violence.
- 9. Use results in an **inability** to fulfill a major obligation. Examples: Dropping out of school or college, job loss, financial ruin, divorce, severe health problems, restricted or lost license, criminal record, jail.
- 10. Recurrent legal problems.

**Scoring:** 2-3 checked = a **mild** substance use disorder, 4-5 symptoms = **moderate** substance use disorder 6+ symptoms = **severe** substance use disorder.

**When is Caffeine use a problem? Caffeine intoxication is defined as caffeine use resulting in 5 or more of the following symptoms. Check all that apply.**

- Muscle twitching
- Restlessness
- Flushed face
- Stomach upset
- Nervousness
- Excitement
- Increased urination
- Heart pounding
- Can't sit still
- Insomnia
- Rambling speech or thoughts.

\*12 oz soft drinks' caffeine range s from 33.9 mg (Coke) to 55.2mg (Diet Mountain Dew).

\*8 oz serving of brewed coffee ranges from 95 to 200 mg.

### **Normal family? Dysfunctional family?**

People with substance use disorder not only cause damage to their own bodies, they also create chaos and drama in their families and communities. If you were raised around drinking/smoking/pill popping people, you may think that an adult getting drink/high is completely normal; Parents driving with open beer, holidays resulting in drunken outbursts and family feuds, relatives getting drunk or high while children run around unsupervised. Sound familiar?

On a grander scale, some employers, organizations and even entire communities create a substance abuse culture by promoting, sponsoring and marketing alcohol focused events and activities... even in conditions when intoxication causes a health risk or the potential of danger such as family events where small children are present and locations where driving a car is required. Let's see how you and your family rate on a “healthy family scale”.

## How Healthy is Your Family?

Check the box for each factor currently practiced in your family.

- 1. Adults remain clean and sober to create a safe, healthy and smoke free environment.
- 2. Adults take responsibility for providing for the physical, financial and emotional needs of their growing children.
- 3. The adults' role model healthy eating habits, consistent sleep schedules and organized time management skills.
- 4. The family regularly makes time to talk, relax, enjoy each other and recreate.
- 5. Family members express anger without intimidation, yelling, verbal abuse, or threats of violence of any kind.
- 6. Healthy families consistently use discipline for the purpose of:
  - \* Learning age appropriate rules and social interaction.
  - \* Overseeing safety. (Adults supervise closely to prohibit underage substance abuse and crime.)
  - \* Validating consistent, logical consequences.
  - \* Enforcing intelligent decision-making, self-discipline and responsibility.
- 7. Family members share information in an age appropriate manner.
- 8. Parents demonstrate a spirit of cooperation as a team.
- 9. Family members treat each other with dignity and respect.
- 10. Adults mentor youth into becoming capable, responsible and independent people.

**Scoring:** Each unchecked box represents areas for improvement.

## So what do I do if someone I care about has a problem with drugs/alcohol?

Search for resources available in the Twelve Step Recovery Programs such as Alcoholics Anonymous and Alanon. In the State of Michigan, driving with a blood alcohol content (BAC) above .08 is illegal. Learn how to “check yourself before you wreck yourself” using one of the blood alcohol calculator websites. These websites help approximate blood alcohol levels using weight, sex, the type of drink and the number of drinks consumed over a specific time period. <https://www.healthstatus.com/calculate/blood-alcohol-bac-calculator> -

### 1. Refuse to participate in denial. (D.E.N.I.A.L. - Don't Even Notice I Am Lying).

- ☞ **Do not hide the problem.** When use causes problems, the “party” is over.
- ☞ **Speak the truth whenever someone is too drunk, stoned or hung over to honor a commitment.** Example: When a substance-abusing student flunks a class, don't pass it off as “typical student behavior.” Do not glamorize a “hangover.” Reality check: hangovers are alcohol poisoning or accidental overdose. Do not excuse substance use disorders because of stress, depression or other medical problems. Yes, someone may have depression and addiction. Someone can have attention deficit disorder and use too much cannabis. Dual diagnosis still means both are problems. Don't kid yourself. I have even heard parents (who happen to be physicians) say that their “*heroin using son or daughter does not have a drug problem, just needs counseling for depression.*”
- ☞ **Do not nag.** Do be specific about naming the problem, then focus on problem-solving. Follow through with consequences, not lectures.

## 2. Refuse to enable the substance use disorder.

Enable : “Any action by another person or an institution that intentionally or unintentionally has the effect of facilitating the continuation of an individual’s addictive process.”

University of Pennsylvania Health System.

☞ **Just as aggressive people need passive people to tolerate their inappropriate behavior, every substance use disorder needs an enabler.** Enabling consists of:

- ✓ Avoiding the problem. Denying the problem. Excusing the problem.
- ✓ Minimizing the consequences of the substance disorder in an attempt to “help.”
- ✓ Assuming physical, financial, legal or emotional responsibility for the actions of the substance abuser.

### Quotes from real life examples of enabling:

- ✓ *“I like him better after he has had a few drinks. He is nicer to us. He plays with the kids. He passes out on the couch without causing any trouble at all.”*
- ✓ *“All the kids wanted to party after the prom-so I thought if the keg was in my backyard, I could watch over the drinking better. They were underage, so I had to buy the keg.”*
- ✓ *“I have to support her. I have no choice. She has no money. She can’t get a job because she can’t pass the drug test.”*
- ✓ *“I know my son has a drug problem. But if I take his car away, he’ll get mad. I’m afraid of what he will do if I make him mad.”*
- ✓ *“Yes my college age kids got MIPs, but just because I pay for their college, doesn’t mean I am enabling! All college students binge drink. There is nothing I can do to stop it. We pay for the apartment that is walking distance to the bars so they don’t drink and drive.”*
- ✓ *“We know Grandma shouldn’t drink so much with the medicine she is on, but nobody will talk to her about it because that would be disrespectful.”*
- ✓ *“He has always smoked marijuana. When the kids were little, he waited until after they were in bed before he lit up. I’m glad he waited until our son turned 16 before he let him smoke with him.”*
- ✓ *We don’t like his use but we don’t want to be mean and kick him out, he has nowhere else to go. Everyone else has already kicked him out!”*

☞ **Establish household rules regarding mood altering substances. Maintain a “no tolerance rule” of underage drinking, alcohol abuse or illegal drug use.** You have the right to say “My home is a safe haven. I do not allow smoking, alcohol abuse or illegal drugs.” This rule may apply to your spouse, your adult child, your unemployed brother, your elderly parent, your son/daughter-in-law—whoever is asking to visit or live with you. Follow through with consistent role modeling, rules and consequences.

☞ **Let addicts/abusers experience the financial consequences of their lifestyles.** Do not fund substance abuse or addiction in any way. Paying their bills allows them to spend more money on alcohol or drugs.

- ✓ **Do not provide bail money, pay legal fees or pay down debt.**
- ✓ **Do not step in to “help” with your resources.**
- ✓ **Do not lend money or co-sign loans.**

☞ **Let substance abusers stay where they pass out.** (But do check for danger first: lit cigarette, blocked airway, accidental overdose, substance-induced coma, or an oncoming train). **Call 911 or transport the addict/abuser to the nearest emergency room when you suspect alcohol poisoning, drug overdose or complications from withdrawal.**



☞ **Leave the evidence (bottles, pipes, vomit, urine or other mess) exactly where the abuser left it.** If the debris from the abuse is hazardous to children, take the children and leave. When the abuser wakes, s/he will find the mess. You and the children will be safely out of reach.

☞ **Let abusers clean up their own mess.** Do not clean up their urine, vomit or spilled fluids. Do not “help” by cleaning their apartment, house, car or office. Do not wash their laundry, clean their dishes, take out their trash or sort their bills. Let the mess they created illustrate how “messed up” their addiction is. Refusing to clean up the mess is NOT unkind. This is the most positive, loving action you could possibly role model. Find the courage to be strong by NOT cleaning up or covering up.



### 3. Refuse to enable driving under the influence.

☞ **Role model responsible drinking.** Know your limit regarding legal blood alcohol level by becoming familiar with the *Intoximeter's Drink Wheel* and state laws.

☞ **Do not allow a minor with a substance abuse history to obtain a driver's license.** Insist that maintaining an alcohol and drug free lifestyle is a prerequisite to becoming a licensed driver.

☞ **Confiscate the license of a minor at the first indication of underage drinking or drug use.** Require abstinence from alcohol and drugs for several months prior to returning driving privileges. Continue to monitor with drug screens when necessary.



☞ **Contact the police when the driver insists on driving under the influence, refuses to relinquish keys or becomes unmanageable.**

☞ **Refuse to allow children to ride as passengers with drivers who have open intoxicants, illegal substances in their possession or are driving under the influence of mood altering substances.** Instruct minors to call a trusted adult or 911 if anyone attempts to transport them with open intoxicants or while under the influence.

☞ **Do not allow teenagers to chauffeur intoxicated adults/parents.** Intoxicated passengers create an unnecessary physical, legal and emotional burden for underage, inexperienced drivers.

- ☞ **Refuse to become a frequent taxi service for intoxicated friends and family.** While designated drivers are wonderful for social drinking, notice if your offer to drive is inadvertently enabling binge drinking, public intoxication, alcoholism and drug addiction.

#### 4. Information is power.

- ☞ **Contact an attorney regarding your risks and your rights.** This is particularly important when you share marital, parental, business, financial, or other legal obligations with a substance abuser.

Ask your attorney or legal advisor the following questions:

- ✓ Could I be prosecuted when minors use drugs/alcohol in my vehicle or on my property?
  - ✓ Would I be held responsible for debts incurred during his/her substance addiction/abuse?
  - ✓ Could his/her use jeopardize my credit rating, retirement, pension or life savings?
  - ✓ Could the state remove minor children because of his/her substance abuse problem?
- ☞ **Consult with an addiction specialist.** Regardless of whether or not your substance abuser seeks treatment, you need to learn your healthiest *response* to his or her addiction.
  - ☞ **Check your library or internet for literature dealing with addiction and recovery.** Become an expert on enabling, codependency and stages of addiction and recovery. Understand the “family dynamics” of addiction and recovery including the term ACOA. (Adult Children Of Alcoholics.) Alanon has chat rooms and meetings online. Check your local newspaper for Alanon 12-Step meetings.

#### 5. Break the Secrecy.

- ☞ **Seek help for minors.** Everyone with helpful information should be included in your support network. Access the school, your physician, community youth programs, athletic coaches, local church, the legal system, area hospitals and addiction counselors.
- ☞ **Inform family and friends of the problem.** Ask your local hospital for help planning an intervention if possible. If not, warn family and friends of the potential dangers ahead. Discuss how the family can work together to stop enabling. Invite them to attend an Alanon meeting. Read this chapter together or offer to teach them this material.

*“A family is as sick as it’s secrets.”*

Alanon

#### 6. Provide honest feedback and firm guidelines:

- ✓ *“I miss you. I miss our relationship. When you are using, I can’t relate to you.”*
- ✓ *“I can’t control your choices, but I choose not to live with addiction in my life. I plan to take the time I need to think through my options.”*

- ✓ *“We would love to include you in our (wedding/holiday/birthday/dinner celebration/party etc...), but we want to avoid the problems that have popped up in the past when too much alcohol ruined the day. You are welcome to join us if you plan to remain sober.”*
- ✓ *“I am attending Alanon to learn how to cope with the fact that you have an addiction. I understand I cannot change or control your decision to use. I need to learn how I can remain healthy regardless of your actions.”*
- ✓ *“You can’t babysit my children when you are smoking, drinking, or using.”*
- ✓ *“I will inform Children’s Protective Services if you are intoxicated/stoned around the kids.”*
- ✓ *“I will go with you, but I will not watch you get drunk/stoned. If you choose to use, I will leave with the car.”*
- ✓ *“Smoking marijuana before we had kids did not bother me, but now the kids are old enough to smell it. I have to decide what my values are now.”*
- ✓ *“I love your friends and family, but I am bored when I am the only sober person in the room. I have decided to leave early, before everyone gets drunk.”*
- ✓ *“I agree that our sex life could be better. I enjoy sex with you more when you are sober, showered and don’t smell like beer and cigarettes.”*

**Question:** *“I’m afraid that if I talk to him about his drinking, he will get very mad. He might hurt himself or hurt us. Talking about it might push him over the edge!”*

*C.J., age 48*

**Answer:** If he presents a danger to himself or others, he needs professional help. Call 911 for assistance in a potentially dangerous situation. Choose not to participate in emotional blackmail (threats of self-harm or violence). If you are not sure what to do, professional counseling or Alanon may help you sort out your healthiest response to a loved one’s addiction. Your fear of his anger and your fear of “pushing him over the edge” indicates that you are taking responsibility FOR his feelings and actions. Feeling responsible FOR him causes you to want to control HIS response. Instead, choose YOUR response. Get help. Get healthy.

**Question:** *“I struggle with my anger and blame. How do I let go of anger when it really is their fault.”*

*Shantaya, age 29*

**Answer.** Maybe it is their fault. For example, let’s say that you blame your father for drinking away your childhood or you blame your spouse for your child’s accident and both examples are true. Now what? You could not control what they did, but you can choose your response. Emotional health requires that you take responsibility for *working through* your thoughts and feelings. Blaming others creates an illusion of control or superiority. You may be holding on to blame to avoid facing your feelings of loss, vulnerability and helplessness. Anger is a signal that you still

have deeper emotional work ahead. Seek out professional counseling if meditating, journaling or 12 Step recovery meetings are not enough to help you work through your anger.

**Question** *“I keep getting sucked back into her numerous problems, drama and chaotic lifestyle. I’m drained and exhausted. I don’t know how to help and I don’t know how to let go.”*  
Hanna, age 35

You say you don’t know how to help so let’s look at what “help” really means.

⇒ **You may think you are “helping” your beloved by participating in her chaos, also referred to as enabling or codependence.** Enabling/codependence includes; nagging, fixing, rescuing and controlling. Enabling recycles a feelings loop of guilt, depression and anger. Enabling results in your suffering along with her. You now realize that you followed your beloved down into the pit of her chaotic lifestyle and you are exhausted.

⇒ An alternative to this loop of suffering is to **admit that you are powerless over your beloved’s problems.** Understand that your beloved’s progress, recovery, success or future is not in your hands. When you detach from the need to fix or control her life, you have energy to focus on taking responsibility for your own personal growth and well-being (your own personal recovery). Your positive role-modeling serves as a ladder up and out of that pit of chaos. Your beloved may join you in a healthy lifestyle by climbing out of her chaotic pit whenever she chooses. Each adult makes his or her own choices. Each adult is responsible for the life he or she has chosen. Understand this and you are free from your codependence. She makes choices. Her choices have consequences. Her consequences offer her an opportunity to learn and grow...if she chooses. And so do yours.



**Question** *“If I “let go” of what he did to me, he’s off the hook. Why should I give him the satisfaction of my “letting go” of the past as if his evil actions never occurred?”*

Jessie, age 40

**Answer:** You are not letting of of what he did, you are releasing the need to be a victim. Your anger does not keep him on a hook, it impales you. “Letting go” allows you to release the power that he holds over you. Marianne Williamson has a term she refers to as “Positive Denial”. She says:

***“You do not deny what happened; you deny its power over you.”***

You had no choice about “what he did.” You do however, have a choice about how to respond to what he did. You may choose to *work through* then release your pain. Letting go of loss, grief, fear, regret, guilt...anger is a way to set yourself free. Your suffering one more moment, does not serve the world.

You have the right to choose self-acceptance, inner peace and self-love. *Letting go* of the anger is the gift you give *yourself*. Ask yourself this: If he had violated your best friend, what would you say to help her?

## **Affirmation Tool *Letting go with Love***

“Letting go” refers to the ability to focus only on what is your business, your right and within your control. Letting go means that you understand that other people’s thoughts, actions and emotions are out of your control. (No cheating at checkers!) Use the following below to affirm the “thoughts of letting go.

### **To “Let Go” Takes Love**

To “**let go**” does not mean to stop caring. It means I cannot do it for someone else.

To “**let go**” is not to cut myself off. It is the realization that I cannot control another.

To “**let go**” is to admit powerlessness, which means the outcome is not in my hands.

To “**let go**” is not to try to change or blame another. It is to make the most of myself.

To “**let go**” is not to care for, but to care about.

To “**let go**” is not to fix, but to be supportive.

To “**let go**” is not to judge, but to allow another to be a human being.

To “**let go**” is not to be in the middle arranging all the outcomes, but to allow others to effect their own destinies.

To “**let go**” is not to be protective. It is to permit another to face reality.

To “**let go**” is not to deny, but to accept.

To “**let go**” is not to nag, scold or argue, but instead to discover my own shortcomings and to correct them.

To “**let go**” is not to adjust everything to my desires, but to take each day as it comes and to cherish myself in it.

To “**let go**” is not to criticize and regulate anybody, but to try to become what I dream I can be.

To “**let go**” is not to regret the past, but to grow and live to the future.

To “**let go**” is to fear less and to love more.

*Author Unknown*

“Detaching with love”, “Tough Love” and “Letting Go with Love” are terms commonly used in the Alanon community and parenting literature. Allowing others to learn from their mistakes and

providing space for a learning curve are strategies practiced in successful educational, supervision, and management training.

**You will know you have worked through your fears when your actions change.** Worry, fear and stagnation will fade as positive changes take root. Working through emotions often results in what is commonly referred to as a “light bulb moment”. Sudden insight replaces confusion, worry and fear.

The deepest most painful worry is that which is reserved for parents. Whether one’s “child” is 21, 35 or even 50 years of age, parents may worry about their children to the point of heartache, despair or even physical illness.

***How do you heal the worry and fear related to your adult children making huge mistakes or living a life headed toward self-destruction?***

“Shirley’s Story” illustrates exactly how parents may *let go* of worry by choosing to detach from problems they do not own. Remember, you choose your response to every situation. Here is how Shirley made a better choice.

**Shirley’s Story**

Shirley originally chose this workbook to learn how to cope with her adult daughter’s chaotic lifestyle. Her underlying motivation however was to *fix her daughter’s life*. After practicing the strategies in Week #7, Shirley understood she needed to change *her own* response.

“I finally figured out that I need to *let go* of my daughter’s problems instead of trying to fix them for her,” she shared. “This morning my daughter walked across our adjoining backyards like she does every morning. She sat at my kitchen table. While I poured the coffee, she poured the troubles. She told me what an ass her husband was. He lost another job. The rent money went to cigarettes and beer again. Her car died. She piled a verbal mountain of chaos and bad decisions right there on *my* kitchen table. With every word my daughter spoke, the mountain grew higher and steeper.” Shirley used her hands to gesture a growing pile of burdens on the kitchen table as she recalled the events of the past morning. “I realized then that everyday is the same. My heart thumps when I hear the kitchen door swing open. I feel sick and helpless. I always do the only thing I know how to do. I grab my checkbook, offer up my car or volunteer to babysit. But this morning I realized I have been putting all of *my* energy into figuring out some way that *I* could climb *her* mountain of problems. No more.”

**“I made a different choice. My daughter is 38 years old. This time when she built “Problem Mountain”, I just listened. I never once interrupted her with advice. I did not ‘should’ on her at all. Her mountain is not mine to climb. Instead of fixing her life, I just remembered to breathe. I sat peacefully. For the very first time, I felt no anxiety at all. I pushed my chair away from the table. I said to her, ‘I know you’ll figure this out honey. I believe in you. Excuse me for a few minutes. I just remembered that I have to do my meditations and affirmations this morning.’”**

There comes a day when parents no longer put Band-aids on their children's boo-boos. Shirley transformed her worry into wisdom by realizing parents teach their adult children to heal their own wounds by allowing them the time and space to seek their own life solutions.

### Shirley's Lessons: Let go and grow

**Replace worry with healthy role modeling.** A parent's most powerful teaching strategy is to lead by example. Provide a stable role model for both a healthy lifestyle and healthy relationships.

- 1. Parents must *prepare* children for adulthood, not *protect* them from growing up.** Maturity evolves by working through problems, learning from mistakes and overcoming obstacles.
- 2. *Worrying* about people undermines their confidence.** *Worrying* sends a message of perceived incompetence or inferiority.
- 3. Adults do not need people who worry about them-*they need people who believe in them.***
- 4. People who "help" others by solving problems *for* them, rob them of opportunities to learn, grow and mature.**

*"No longer lend your strength to that which you wish to be free from.  
Fill your lives with love and bravery and you shall lead a life uncommon."  
"Life Uncommon" by Jewel Kilcher, Spirit, 1998.*

*Letting go* requires replacing parental worry and fear with inspirational support.

*Letting go* requires role modeling rather than rescuing, fixing or controlling.

*Letting go* requires replacing past parental guilt with healthy role-modeling now.

*Letting go* is the natural result of *working through* worry and fear.\*

You will know that you have "let go" when you have replaced worry and fear with FACT:

- ❖ Faith *in your ability to choose your response.*
- ❖ Acceptance *of what you cannot control.*
- ❖ Confidence *in your ability to cope with whatever happens.*
- ❖ Trust *in the process and flow of life.*

Resources for those who love people who struggle with addictions:

[Melodee Beattie Language of letting go.](#)

[Melodee Beattie Copendent No More](#) How to Stop Controlling Others and Start Caring for Yourself

[Claudia Black: My Dad Loves Me. My Dad Has A Disease.](#)