

When Love Bites –
The Awkward Dance of Codependency

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Love can truly be a many splendored thing that helps heal people's wounds, gives meaning to their lives and provides strong support through good and not so good times. Healthy love can build a solid foundation upon which healthy lives can be launched and healthy partnerships of all kinds sustained. Love can be an armor coat of protection amid a less than caring world.

Sometimes, however, love bites. Rather than support, it divides and conquers. Instead of salving, it irritates existing wounds and deepens them. Instead of a foundation for health, it can become a trampoline ride to hell and back. What is supposed to offer strength and protection can morph into a rubber bucket with a gaping hole. There are many instances where love bites. None is more confusing than the complex conundrum of codependency.

The disease of codependency is undeniably widespread. It affects parent to adult child and adult child to parent interactions, as well as people in personal and business partnerships. It affects friends as well as lovers and all those who fall in between. In every single case, codependency causes problems. In this sense, it is a wide ranging epidemic that is wildly out of control. The purpose of this article is to help those engaged in the dance of codependency to realize that and choreograph a more graceful set of steps.

Much like a dance, each person in the codependent connection follows a consistent, repetitive and choreographed plan. Each plays off the other with one person taking the lead. In every instance, the music that accompanies the dance is off key and discordant, which is what makes it a melody that jars one's senses. In every situation of codependency, one individual is behaving in a child/teen fashion of dysfunctionality and the other is unwittingly and unintentionally enabling that to continue without consequence.

The Controversial Disease

Emotionally based illnesses have always been a most controversial disease group. They have never fit neatly into our western medical model built upon clear biological cause and effect connections. It is only in the past twenty five years that we have begun to understand the complex neuropsychobiosocial causes and develop more efficient treatment methods.

Fueling the controversy is that emotional disorders fly in the face of common sense. Those so afflicted are given such simpleminded advice much to their irritation and annoyance:

- You are panicking over flying in a plane, driving on I95, leaving your safe space? Don't worry, you'll be fine. Stop being so silly.
- You are addicted to_____. It is causing you problems. Ok. Stop doing that. It's not healthy.
- You are starving yourself, binging and purging. Overeating? Ok That's not healthy. Please stop doing that.
- You are hitting your wife? That's not nice. Stop. No more. Ever.

In these examples, the person offering this obvious advice neither understands nor acknowledges the disease concept. If the person with the problem could stop worrying, drugging or whatever they would. That they don't and can't is what demonstrates that it is a disease process not within their control.

Just as cancer, TB, strep and a heart attack are diseases beyond ones control, so are panic, depression, addiction, etc. That people can eventually learn to override and heal from their disease of the mind does not mean it wasn't a disease. Curing physical diseases – the goal of the medical model – does not negate that the person had a disease. The mind and the body need to be seen through the same lens, as they are equally susceptible to diseases.

Nor are people weak because of their mindly problems. By definition all people are susceptible to mental and physical diseases. It is not about weakness, but about a communal vulnerability in which all share. It is the price of admission into the world, not an anomaly of a select few.

People tend to believe what can be seen. Biological diseases are visible or X-Rays, blood tests, MRI's, etc. make them so. A broken leg has a cast, crutches and a clear healing process. A broken mind isn't visible, castable or predictable. Such is the nature of this invisible, but no less intrusive and debilitating disease.

Finally, where in all this sits will power? Can an emotional illness be a diseases if some people can overcome them on their own, without formal treatment, psychotherapy or twelve step programs? What of those who just throw away their cigarette packs, never buy another twelve pack, stop overeating and

develop six pack abs, etc. The answer is they accepted their disease, took control of their behavior and healed on their own. This is no different than spontaneous remissions via healthier living in all kinds of biological diseases. Most of the time mental and physical diseases require outside intervention, but sometimes none is required. That the latter can be the case does not negate that a person with a disease has been healed.

Even if you don't buy into the disease model of emotional problems, know up front that codependent contributions always make things worse. Even if you are unable to see codependency as part of the disease process, accept that such behaviors are unhelpful and unhealthy for all parties concerned.

Here are some examples of codependent interactions:

- A seventeen year old girl is abusing drugs and alcohol. She has totaled two vehicles, failed last semester and sometimes doesn't come home all night. Instead of consequences, she gets help in the form of a generous allowance, many creature comforts and the denial of her parents blaming everyone but her. They say, "all kids are like this today, it's just a stage," "The teachers today just don't care" and "Some people just have to learn the hard way." Father tries to impose consequences, but mother, the main enabler, regularly "rescues" her only daughter. This causes much conflict between mom and dad.
- A 25 year old man has panic and anxiety and is in treatment with a therapist paid for by his parents. Father, the main enabler, (though mom runs a close second) is available for hours to reassure, calm, distract and otherwise "help" his son. In addition, father will drive his son everywhere and even try to schedule the equivalent of "play dates" with his son's friends to "help" him. Son calls dad crying on a regular basis and dad is heartbroken. He is depressed and overwhelmed by guilt that his adult son can't function.
- A forty year old man has been married for fourteen years. Over these years his devoted wife has caught him having affairs, having phone sex for money, visiting porn sites regularly and hiring call girls whenever she goes out of town. She always catches him and he always apologizes and says he will never do it again. He always does. She says, "I know he doesn't mean it and what can I say – I love him!"
- A thirty six year old woman and mother of an eight year old girl is always sick with a head, stomach or other ache. Though she runs to doctors regularly, she hardly goes anywhere else. Her husband of ten years assumes just about all the roles. He works and takes care of his daughter's needs, shops, cooks, cleans and has no time for himself. He

believes his agreement says, "In sickness and in health.." and he intends to honor it, no matter what.

- A forty two year old female professional is addicted to pain pills. She has been in rehab four times and has relapsed each time within a few weeks of release. She can no longer work and depends upon her parents for financial and emotional support. Her husband left her and cares for their twin boys after the second failed rehab. Her parents say, " We have to help our daughter. We are all she has left."

In these vignettes you can begin to see the codependents dance which can turn into the codependents ball. The only person who has behaved appropriately is the husband in the last illustration. All of the other players are enabling their loved ones problem. They have not yet come to understand, that sometimes, sadly, love bites.

In all codependent scenes there are at least two people dancing. Sometimes it moves more like a hora than a waltz with a group of "rescuers" all circling the identified dependent. In fact, that is a good way to put it. Every codependent dance has a dependent person who needs to grow up and an independent person (s) who needs to step away and disengage, but instead chooses to try to rescue. Until the rescuer stops the dance continues unabated.

When Learned Helplessness Meets Overprotection

The dependent person in the codependent position is programmed to fail. They have learned that helplessness is its own reward. Some would argue neurology gone wild, while others would cite secondary gains of the person in the codependent position. Still others would say that the unfinished business of their youth keeps getting played out over and over instead of resolved. Perhaps it is a combo platter of these and more. Though the cause needs to be identified and resolved, it is the dance that needs to be understood and discontinued. Intriguingly, sometimes when the music stops and the dance concludes, the person in the dependent position is finally motivated to understand and overcome the origins of their dependency. That paves their way toward becoming more independent. Simply said, when the dance stops, the dependent is slowly forced to grow up or experience the consequences of their inappropriate behavior on their own. The last three words say it all!

For every enabled and disabled soul there is an enabler paving the way. Without the latter, the former would either get it or not. Maybe it's just the difference between a panhandler and a corner newspaper seller, but the difference is huge. The person who sells newspapers is trying to take care of him/her self. The former are depending upon handouts from enablers.

While these ideas are easily understood, people prone toward overprotection do not get them on a rather repetitive basis. They can't bear to see loved ones hurt and will try, no matter what the price, to prevent that. The price, unfortunately is large. The overprotectors fail to protect themselves and simultaneously hurt their dependent codependent. It is a lose, lose situation that reinforces learned helplessness, rather than extinguishing it.

Note that both the enabler and disabler have many tools at their disposal. The former is a master at manipulation, while the latter buys into that over and over again like a target in a skill game. The enabled loses control to gain control while the enabler tries to gain control, only to lose it over and over again. When each can finally accept their powerlessness, a bridge over troubled waters can finally be built.

Meet The Identified Dependent (ID)

In theory, no one wants to be an adult in the ID position. It is an insult to one's pride and sense of self. There is no dignity in dependency. Rather, it places a chronologically adult person in an infantilized position. It recreates their youth. It is a universally disliked position from which people try to escape as quickly as possible.

Why then, we ask, would someone seek to be in that position on a repetitive basis? Why would anyone want to be weak, needy and helpless? The simple answer is that it is not a conscious choice. It comes about as an interplay of complex individual and family dynamics. It is a key component of the disease process. Here is a summary of forces that can cause a person to be in the dependent position:

- A disease, such as addiction, panic or eating disorder over which an adult is powerless to overcome which creates serious dependencies.
- Trauma and adverse conditions of one's youth that caused a hole in the self (see my "Hole In The Self" articles on www.williampenzerphd.com) that gets temporarily filled by the secondary gains of dependency.
- Serious emotional problems such as bipolar disorder and other complex and debilitating syndromes.
- Being raised in an indulgent, overprotective and enabling environment in which loved ones who are codependent try to spare the identified dependent hurt, pain, problems or consequences.
- The toxic influence of masochistic self- destruction.

- A blockage in the ID's system that interferes with learning from their experiences and allows them to stay stuck in denial on an ongoing basis.

Meet The Codependent (CD)

CD's are very nice people. In fact, one might say they are too nice ! Their love is real, strongly felt and genuine. They are selfless in their devotion to their family, in general, and their ID in particular. For them, family is everything and they see their role as protector of the family fate. In so doing, they stand at the family gate, blocking their loved one from ever really leaving home. Though their ID may no longer live at home, there is a long invisible rope that ties the ID to the CD and vice versa. In this model, the ID's personal growth is stunted by the CD's protection, overindulgence and enablements. Instead of learning to modify their behaviors because of the adverse consequences, the ID learns there aren't any. In fact, the secondary gains reinforce negative behaviors over and over.

Clearly, in trying to protect the ID, the CD does the very opposite. S/he exposes the ID to ever more serious consequences as the dance unfolds. As both the ID and CD's lives become more and more unmanageable, the pace of the dance intensifies and all involved wear down. Is it any wonder that the first thing CD's are taught is to detach with love? This allows the rope to fall and the dance to finally stop.

CD's often extend too much of themselves to non family as well. Their kind, caring, giving hearts can push them to be too helpful to too many, leaving them exposed, exhausted, enmeshed and vulnerable to getting hurt over and over.

When The ID Loses His/Her ID

Clearly overprotection and enablement cause the ID to lose his or her identity as an independent adult. Lost in a haze of addiction, anxiety or whatever interferes with their growth, the ID searches to find a self upon which they can feel and function well. Inconsistency is the most consistent part of the scene. They can be up, down and sideways all in the same day – sometimes the same hour. They have jobs, don't have jobs and have jobs again for a while. The same is true with relationships, money and most other areas.

The ID has trouble being responsible to him/herself while the CD is constantly positioning to prop up the ID via help, excuses, bail outs, money and other tools of the enabling trade. In this mess, the ID, at best enjoys a fleeting and ever changing sense of self which does not promote healthy self-care taking behavior. As the ID hits bottom s/he has no ID. S/he is left with a confused, jumbled sense of who they are and more clearly who they are not. They do not feel like adults and hurt deep inside from a gnawing sense of inadequacy combined with helplessness and hopelessness. Intriguingly, as a result of this awkward dysfunctional dance of codependency, the CD is left with these very same feelings. Their lives become increasingly unmanageable and all parties live in a nightmare from which they can neither awake nor escape.

What Secondary Gains?

We keep asking ourselves what keeps the ID stuck in that child-based, infantilized, dependent position. It seems such a negative space to be. In fact, it is just that. The ID is dealing with masochism and people's paradoxical tendency to hurt themselves for all kinds of hidden and disturbed reasons that relate to the hole in their self. In its ultimate form, masochism ends their life. It is possible, even likely, that those in the ID position are engaging in a slow form of suicide and self-mutilation by their self-defeating behaviors.

There are, however, other reinforcing mechanisms for the ID. Though the consequences of their thoughts, feelings and behaviors are hurtful, they bring about secondary gains. These include:

- An illusory feeling of getting lots of extra attention from CD's.
- An illusory feeling of being safe and protected, just like one felt as a young child.
- An illusory competitive edge on siblings, who are seen as being loved more by mom and dad.
- An illusory avoidance of and resistance to getting older, having serious responsibilities, dying.
- An illusory avoidance of succeeding, thereby avoiding the risk of failure.

In each instance, the word illusory is used to address the unreality of the secondary gain. In reality, the ID gets negative attention, is at great risk and in much pain, isn't really one upping siblings, is getting older and wasting time and is failing over and over while courting death and self destruction. It is important for us to understand that all of these dynamics are unconscious and play out in the darkness of diseased emotional space. No ID wakes up and says "I'm going to screw up today to get me all those secondary gains". ID's operate pretty much on automatic pilot, as do CD's. The dance of codependency is largely reflexive. It is the emotional equivalent of a knee jerk reaction, causing all parties to behave pretty jerkily!

From The Front Lines of the War On Codependency

The countless support groups around the world bely the codependency epidemic. The stories told are scary and fraught with danger. People they love have lived on the streets, abused chemicals, stuttered through anxious scenes, sank to the depths of depression, shown terrible judgment and put themselves in harms way over and over.

The CD's have driven their rescue trucks with the loyalty and devotion of a paramedic. Each situation was "handled". Each problem solved or lessened. Each boundary was allowed to be broken over and over again. The proverbial last chance became another last dance of "one more chances." Just one more. Those who attend these meetings are eager to figure out a different dance to save their loved one. Lesson one is they can't. Their loved one has to save themselves – or not as the case may be. Support groups grant permission to the participants to be powerless. Ironically both the ID and CD share that position. In this sense the opposite of enabling is empowering. When the CD steps out of the way it can help the ID to step forward for themselves.

As the people in a support group talk together, they realize that they are a family of strangers united in their dysfunctional ways. They understand each other all too well. Therein lies the problem. There is no denying that codependency and enabling are key components to this most complex disease. On its most simplistic level, the behaviors that fall under these headings spawn many problems. They infantilize adults and keep them acting much below their chronological or intellectual age. They promote insecurities, perpetuate low self-confidence and esteem and foster many hurtful emotional problems including anxiety and panic, phobias, obsessive-compulsive behavior, addictions, eating disorders, etc.

Mostly, these repetitive behaviors interfere with healthy, independent growth by stifling the inner forces needed for separation and individuality. Codependence fosters dependence, poor choices and youthful ways that adults deal with life's challenges. In many instances, these challenges are not dealt with at all or, at best, only partially dealt with. It is actually the family members who complete the codependency dance as they are often left to wrestle with these challenges. The CD's unwittingly help create the very monster that now consumes them and their loved one. Codependents are codefendants. Emotional problems are crimes against the self. The person who suffers is the perpetrator, while the codependents are their accomplices.

On the Nature of Dependency

When you think about being dependent, you quickly realize that it is the basis of life. All people start in a totally dependent state called infancy. The newborn, left to its own devices, would quickly die of thirst and starvation. As infants grow, they develop skills and abilities. They are slowly able to assume more responsibility for themselves. But, it is a painfully slow process that fosters codependence of all kinds for 16+ years, 192+ months and more than 5840+ days. Then the adult child and his/her parents are supposed to say a prayer and let go. Sometimes it works and sometimes it doesn't.

Codependently prone families don't let go so easily. They become addicted to the parent to child position. They want to help, protect, and provide for their adult children in all kinds of ways. They are afraid to let go completely. The same is true for the adult children of codependent parents. They too are addicted to the child to parent position and are afraid to let go completely. So begins this painful dance of the adult child behaving like a child and the codependent family members behaving like they did the day the kid was born. Believe me when I say that the diapers of adult children can be much messier than those of a newborn ! And they both stink.

Realize that while codependency replicates the parent to child position, codependency is by no means limited to parents. Adult siblings, aunts and uncles, cousins, partners and even non family members can fall easily into that trap. For those prone to be in the codependent position, rescue is their middle name.

It's A Brain Thing

I believe the potential for being in a codependent relationship starts in people's brains. There, complex messages passed along from gene pool to gene pool are encoded. Brains are programmed with all kinds of potentials. In this sense, all emotional problems (i.e. anxiety, depression, addictions, etc.) have their roots firmly planted in the rich and fertile soils of this most wondrous organ that guides our way. That DNA distributions seem based upon a random, roulette wheel like process, helps explain the differences across family members.

We have come to learn that neurotransmitters such as serotonin, dopamine, etc. bring much to the mental illness equation. SSRI meds have made a very significant difference in the treatment of emotional illnesses. Our brains are genetically programmed to contribute to emotional disorders. That is where these diseases begin. The structures of the brain that are involved and the chemistry are slowly being identified. From this will come relief and resolution. The next twenty five years offer unimagined potentials for finally addressing emotional illness in a much more definitive way. For now we must settle for a slower, more ambiguous, but still powerful path to healing these problems.

It's An Experiential Thing, Too

That these roots, planted in our brain's soil can sprout into beanstalks of distress is based, I believe, upon our experiences. We are, for better and for worse, a product of our brain's potentials and our personal encounters. Our genes and our scenes determine the kind of human " bean" we become. The age old question of nature vs. nurture or heredity vs. environmental can be answered by eliminating the versus. These two interactive influences determine who we become and how we think, feel and behave.

In the context of codependency, we have an adult in the parent position and an adult in the child position, each programmed to play out those roles by their respective genes and scenes. Though their motives may be deep, dark and complicated or deep, light and simpleminded, the outcome is always the same. It becomes a cartoon-like chase, a clownish dance, a confusing case in which there are no winners and there is no end in sight. As it spirals out of control, intervention is sought. Finally, there is an opportunity, an opening if you will, to break free from these destructive patterns. Therapy, counseling, coaching and group support have the power to stop this graceless dance once and for all.

On the Nature of Pathology

The problems I encounter among adults in my office – anxiety, panic, phobias, OCD, addiction, eating disorders, relationship conflicts all share a common framework. They typically represent a loss of free will and choice. They push a person away from rational, intelligent, self-protective processing toward a hurtful, limiting and destructive path. These problems push people into regressive, childlike positions that dominate and intrude upon their adult landscape that becomes filled with missed opportunities and miscues.

It is this scene that draws in the person prone to completing the codependent connection. CD's jump in their rescue truck, sound the alarm, turn on the blinking blue light and try to fix things and make it all right. In the process they unwittingly feed and fuel the problem, solve nothing and keep their loved one cemented to a child position in which she/he is infantilized and unprotected. It is here where love bites. It is right here where significant changes need to be made to free loved ones from the choke hold on their development. In so doing, you give them their best shot at escaping from their pathology, so they can continue to grow as adults. You also build yourself a back door through which you can escape from the responsibility of "taking care" and "attending to" the needs of adults who need to be responsible for themselves – finally.

For the rest of this article I will focus on addiction. Know that my words apply to any other emotional problem or as well.

A Family Disease

People in support groups are taught that addiction and codependence are diseases of family origin. They are also taught the four C's.

- Didn't Cause it
- Can't Control it
- Can't Cure it
- Can Contribute to it in the future.

In my opinion, one of those is not true. My contrarian view says, if it is a family disease to which one can contribute to in the future, then one sure as heck contributed to it in the past. Though we can parse the word "cause" and turn it into a semantic battle, the genes and scenes the family provided played a strong role in its development and present state.

Your challenge is to not continue to do that. Rather than going off on a guilt trip of grand proportion, taking some responsibility can pave the way for making critical changes to your interactions and dealings with your adult family members. Guilt is a rather useless emotion, other than to prevent people from doing harmful things to themselves or others. ID's could use some more guilty, while CD's deserve a lot less. Owning your contributions in a responsible fashion, however, can give you the direction, strength and will to modify your existing ways to which you have become addicted. The bottom line is whether you believe you caused the problem or didn't is not important. Critical is your commitment to move out of your codependent state.

The general formula is that the family continues to assume responsibility for the adult's many problems, slips, confessionals, unfulfilled promises and failures, while they assume little to no responsibility at all, except to perpetuate their hurtful scenes. It is as if there is an invisible rope between family and addict that creates an unending tug-a-war. Like a Chinese finger puzzle, as the family pulls to protect, control and cure, the adult pulls in the opposite direction. The more the family tries, the worse things get. In this posture bad stuff happens. The adult sinks ever further into their disease. The codependent family members find their lives ever more encroached upon and all parties find their lives more and more and more unmanageable. A sense of futility merges with hopelessness and despair leading to grievous sense of desperation. Desperate people make lousy dance partners.

Along Comes Therapy

Like an umbrella in a furious rainstorm, therapy interrupts this highly dysfunctional system and adds a protective layer. It is like a time out for the rope and those who have been tugging furiously at either end. It is a time to learn, think, talk and modify previously existing patterns. It is also a wakeup call, akin to diabetes, high blood pressure or open heart surgery. While it would be nice if people could wake up sooner in the process, the majority need to hit bottom before they get it.

In therapy, the adult tries to learn that s/he is powerless over the addiction and work their program for recovery. Relapse rates reflect how difficult these lessons are to embrace. Yet, there are many "white chip wizards" around, who get it the first time around, give up their drug(s) of choice and get hooked on meetings and health instead. Hopefully, the addict eventually gets it and eventually reclaims his/her life. It is an opportunity to add substance to one's life instead of making life all about a harmful substance.

Those who don't escape from the burden of addiction typically live unhappy and unfulfilling lives and/or die prematurely. Addiction does not produce pretty pictures and never will. It is NEVER a Kodak moment! The strange thing is that the very same drug addicted person would respond differently to a different type of allergy. If the addict ate lobster and had an allergic reaction – swelling, huge welts and hives on their face and other body parts, pain, etc., they'd probably never eat lobster again. Maybe they would try one more time, but if the results were the same, they would go cold turkey (I mean lobster). In fact, their fear of a repeat would probably quickly generalize to all shellfish.

Yet, that very same person can have multiple adverse consequences in an allergic-like reaction to their drug(s) of choice (physical, familial, financial, legal, social) and continue to return to that “lobster” of a drug, time after time. That it makes so little sense, makes us wonder if drugs (unlike shellfish) become part of the brain's chemistry of an addict in ways that create these illogical, but overpowering cravings. Here, right here, is where the disease is rooted. The fact that recovering addicts can finally override these cravings, shows it is possible to dismantle those chemical and psychological urges via therapy, 12 step support, self discipline and strength of will. When the denial bubble is finally burst, amazing things can happen in the direction of personal growth and disease recovery.

Time to Cut the Cord Already

While the addict is working his/her program, the family is being encouraged to work theirs. In a process similar to separating Siamese twins, the CD's are slowly, but surely, encouraged to disconnect from the rope that binds them to the ID. They are given permission to finally “cut the cord” (better late than never). This is a critically important step in busting the codependence with each side of the rope taking a step toward independence. The family effectively says, “ Grow up or not, it is your choice. We cannot help you anymore. We can only impede your growth. Good luck and God speed.” You may not use these words, but that is the intent. Cutting the cord stops the tug-a-war. There is no more rope on which to pull. Once the family members let go, it is likely the addict will as well. The floor is where that rope belongs. Without it, there is no dance.

Intriguingly, just as the addict gets hooked on drugs, the family gets hooked on rescuing the addict. It is really the same addictive process. In a chicken and egg way it is hard to determine which came first, but the two addictive processes form the basis for the dysfunctional patterns and family disease that occurs. Just as the addict can relapse, so can the family. This is why support meetings are so important. They continuously remind the CD's to stay out of their rescue truck. These vehicles sit, like ghosts, in their emotional garage and the addict, as master mechanic knows just how to start the ignition. Those in the CD position, need to stay away from the wheel-FOREVER!

What Exactly is Enabling ?

How do you distinguish between enabling and doing something helpful for someone you love, I think it very much depends on the someone you love. Healthy adult relationships and family interactions are able to meet the following criteria:

- Favors are reciprocated.
- Efforts support appropriate behaviors .
- No recriminations or repetitive apologies.
- No adverse consequences for all involved.
- There is no pain in giving.
- The giving comes to an end.
- The person being given to learns.
- The recipient ultimately takes charge of his/her life.

Enablement, on the other hand, does not meet any of the above. It is emotional, practical or financial bail out over and over. Often it is all of these and more. It is mostly about the family member and little about yourself. It is about your family member's narcissism, long after that needed to be reined in. As healthy adults, we retain some narcissism, but not at an infantile level. The addict functions as an infant, screaming for drugs in the middle of the night, just as s/he once screamed for milk.

As the following clearly shows, your goal is to facilitate abling and adult choice and responsibility. When you enable, you unwittingly feed the hungry, insatiable child that lives within all addicts. This is the very intersection where love bites both the addict and the family members.

ENABLING vs. ABLING: It is Your Choice

We would all like a formula to clearly distinguish codependency and enablements from caring, loving, or just doing a favor for our family member. No such calculus exists. Our goal is to consistently facilitate abling. Each person and situation needs to be evaluated separately. Here are some practical criteria with which to assess specific issues:

- Is my loved one trying to satisfy a want (i.e., I want \$100.00, my car, to come home...) or a need (i.e., dental appointment, transportation to work...)? You will not provide the former. You will consider the latter depending on the following criteria:
- Can she/he do it for him/herself? If yes, you will pass. If no, you will consider.
- Would you do this for cousin Al or your best friend, Sue ? You care about them, but you are not willing to jump through hoops for them. It is time to stop jumping through hoops for your ID, because it doesn't work. It is an endless series of hoops.
- Your loved one vacillates between infancy, childhood, adolescence and adulthood. From where is she/he coming this time? Will your behavior help move them toward becoming a more complete adult and more independent or push them back toward childhood and further dependencies?
- Will what you choose to do contribute to your feeling proud or feeling like you are doing same old, same old. Your recovery is as important as the recovery of your loved one. You want to err on the side of protecting you, since you can't protect the ID.
- Will your choice antagonize your partner or encourage his/her support? You will strive for the latter, but ultimately you will need to work your program as you see fit.

To refuse your loved one is not being selfish. Often it is being realistic and appropriate. You help greatly by not helping at all, give by withholding, love by detaching instead of loving by controlling. You accept that you are powerless over your loved one's addiction. You accept that your loved one is powerless over his/her addiction as well. Finally, you are both on a level field. You can now begin to take care of yourselves.

Taking Care of Who?

CD's do not do well taking care of themselves. In fact, the encouragement to "start taking care of you", can be a little confusing and a bit daunting. Your first response may be, "I already do that." Your second, "Do I do that?" Your third "How do I do that?" You may begin to realize that you are so busy "taking care" of your family that you are only partially taking care of you.

What needs to be examined, in some fashion, is where you have left you out of the equation of your life. Generally speaking it is usually the little things that count most. Expensive clothes, lavish vacations, fancy cars feel nice briefly, but don't provide the kind of nourishment that really takes care of you.

Think of some of your more pleasant, peaceful and relaxing experiences in the last five years. You will find that what typically comes up are things like:

- A bubble bath
- Reading a fun book
- Watching an entertaining TV show
- A conversation with your partner or a friend
- A nice lunch on the water and a view of the beach (try Aruba Café in Ft. Lauderdale)
- A night of board games with friends
- A walk or run in the park, etc.

The important question is how often you allow yourself to engage in that which gives you feelings consistent with taking care of you. Most CD's don't do that often enough. Your challenge is to see if you can make more time for what you like and will provide positive feelings. As you detach from whoever stands on the other side of the rope, you should have more time and energy to embrace yourself. Interestingly, doing that is the opposite of enabling. It is empowering for you and for those you love. Healthy love doesn't bite at all- it brings out the best in everyone. Some simple exercises in the appendix of this article might help you assess your self-loving behaviors and improve them, if need be.

Finally Dropping the Rope

Those at the other end of the rope suffer much pain. For them, adverse consequences are their middle names. Their lives and growth have been stunted and their ability to consistently be productive, fulfilled and comfortable have been marred. All aspects of their lives have been affected. Relationships have suffered in many ways. What I call shame and blame accounts have been filled, while pride bank deposits have, at best, been inconsistent and, at worst, non existent.

You can only hope and pray that they will find their way. You need to continuously remind yourself that you can be more a hindrance than a help. You need to work your program in whatever way you can. You need to respond to your loved ones in ways that enhance their adulthood, help them to be more able and less disabled. You need to give up enabling to achieve these goals for them and, as importantly, for us.

Undeniably, the twelve steps have helped countless numbers of addicts and their codependent family members. Not everyone can work these steps, profound as they might be. I sincerely hope you can. They are very important for breaking the family disease and for confronting your individual issues. They are equally applicable to all emotional problem areas, although predominantly used for addiction. The brilliance underlying these steps, crafted in the prehistoric times of not understanding mindly matters, is that they hold the potential to help every person struggling with the pain of emotional affliction and the vulnerability of our human existence.

As an adjunct to them, I offer the twelve commandments for codependents. I hope they help you to address the issues, let go of the rope and resolve these complicated problems once and for all.

The Twelve Commandments of Codependence

1. Thou shalt not infantilize any adult family member
2. Thou shalt take care of thyself at all times
3. Thou shalt draw lines in the sand, beyond which you will not go on a help and rescue mission.
4. Thou shalt reserve the right to redraw those lines, which is why they are drawn in the sand.
5. Thou shalt not try to protect, control or cure your adult family member and not overprotect them in any way.
6. Thou shalt separate your feelings from your loved ones so that your comfort and functioning is not totally dependent upon theirs
7. Thou shalt not be an enabler of any addictions by supporting, sponsoring, funding or otherwise helping the addict attain their wants or offset the consequences of their indulgences.
8. Thou shalt take time to think, assess and alter reflexive rescue patterns.
9. Thou shalt not let thy love for an adult family member distort thy otherwise good judgment, as would apply to a friend, neighbor or other reciprocal relationship
10. Thou shalt attend some type of support meeting from which to draw feedback, strength and courage.
11. Thou shalt be open to learning, modifying and addressing thy addictions to ideas and beliefs that hurt, rather than help those you love. In that way, thy commitment is not to allow love to bite anyone, anymore.
12. Thou shalt let go and let go or just let go.

Some Final Thoughts

Though it is rampant in substance addiction, there are many other non drug scenarios where adult-adult codependency and inappropriate situations exist. These occur between adult children and parents, life partners and often in friendships. Just look at the relationship in terms of whether it operates according to the adult-adult or parent to child dynamics. Whenever an adult behaves like a child/teen and other adults rescue, bail out, protect, manage, control or otherwise intervene/interfere it is likely that codependency is an ongoing problem, contributing significantly to the ongoing problem.

I say likely because there is also the “caringness” factor with which we need to deal. Those we love or care strongly about certainly qualify for our support, help, understanding and “extra mile”. This is just where we get confused and tend to trip over our own emotional feet. Help your loved one commensurate to their helping themselves. Help them where others you love are involved like grandchildren, their spouses, siblings and the like. Pull them out of a burning

building if they are unable to do that for themselves, but, make your rescue contingent on them getting help to not light any more matches.

Here we encounter some really tough calls. Do I let my 18 year old daughter live on the streets if she relapses post rehab? Do I let my spouse come home after yet another pit stop at a crack house when she now promises to go into rehab? Do I take back my sex/gambling/drug addicted loved one if they appear to be ready to stop? Do I help my loved one get a lawyer to avoid jail time? Do I stay married or finally divorce? Do I pay for a halfway house or bring him/her back to our house? Do I pay my loved one's bills because they can't work due to panic, depression, etc?

Who can say? So many details are missing. Too many issues seem blurred when those we love struggle, teetering on the edge of a high ledge in the dark. Try to use the criteria previously described as you grope through these ill defined territories. Try not to be manipulated, as she/he holds the other side of the rope, can be quite shrewd and cunning.

More important than a single decision is a general philosophy. Err on the side of caution and protection of life where you must, but impose a philosophical discipline for your own well being and that of your loved one. Rescue life, but don't foster and facilitate dependence and child/teen based indulgence. No one formula will fit all families and circumstances. Hopefully, you get the gist of all that has been said regarding bringing an end to codependent patterns. You need to gracefully and lovingly disconnect, detach, withhold and allow your adult loved one the dignity of embracing his/her adult responsibilities in whatever way she/he chooses. Whether you can do it better for them is not nearly as important as they doing it their way for themselves. In these words lie both the challenge and the solution.

Intriguingly, all relationships qualify generally as "codependent". An employer, partner and parent of an adult depend upon the employee, partner and adult child and vice versa. In partnerships, people bring different strengths. They depend upon each other in different ways. Together they are stronger than the sum of their individual parts.

So how do you distinguish between healthy and unhealthy codependence? The answer lies in the balance of the balance. Healthy means reciprocal and age appropriate. Healthy means providing support, rather than rescuing. Healthy is knitting a sweater for him/her to use or not, rather than telling another adult to take a sweater. Healthy is about maintaining reasonable and realistic boundaries.

In fact, it is probably conceptually clearer to speak of interdependence rather than codependence. The former implies a healthy adult to adult relationship, while the latter term is most associated with less than balanced, healthy or appropriate interactions.

Your quest and challenge is to move from codependence to interdependence in all of your relationships. This frees you from the burden of over managing another person's life, while allowing the ID the dignity of personal power and self-management. The cure, if there is one, perhaps healing is a better word, is in helping restore an ID's sense of self to an age appropriate level. There is much dignity in being a child when one is one and no dignity at all in an ID behaving like a helpless, out of control, self-defeating child, when s/he is an adult. When the awkward dance of codependence finally concludes, healthy adults embrace each other and move forward. Love no longer bites. For the moment, the dance is graceful and mutually rewarding. Your world is finally at peace. Let's pray that it stays that way.