Integrating the Whole System and Family into Relapse Prevention

Join into the Family

Listen to the personal narrative…be very curious…interested…

Find the Individual (IEN) and Relational (REN) emotional need of each member.

Look for congruence: “so, what you need from “Jim” is respect?”

Define, subjectively these needs in each person's language. “if I were a fly on the wall watching you be respected…what would I see”.

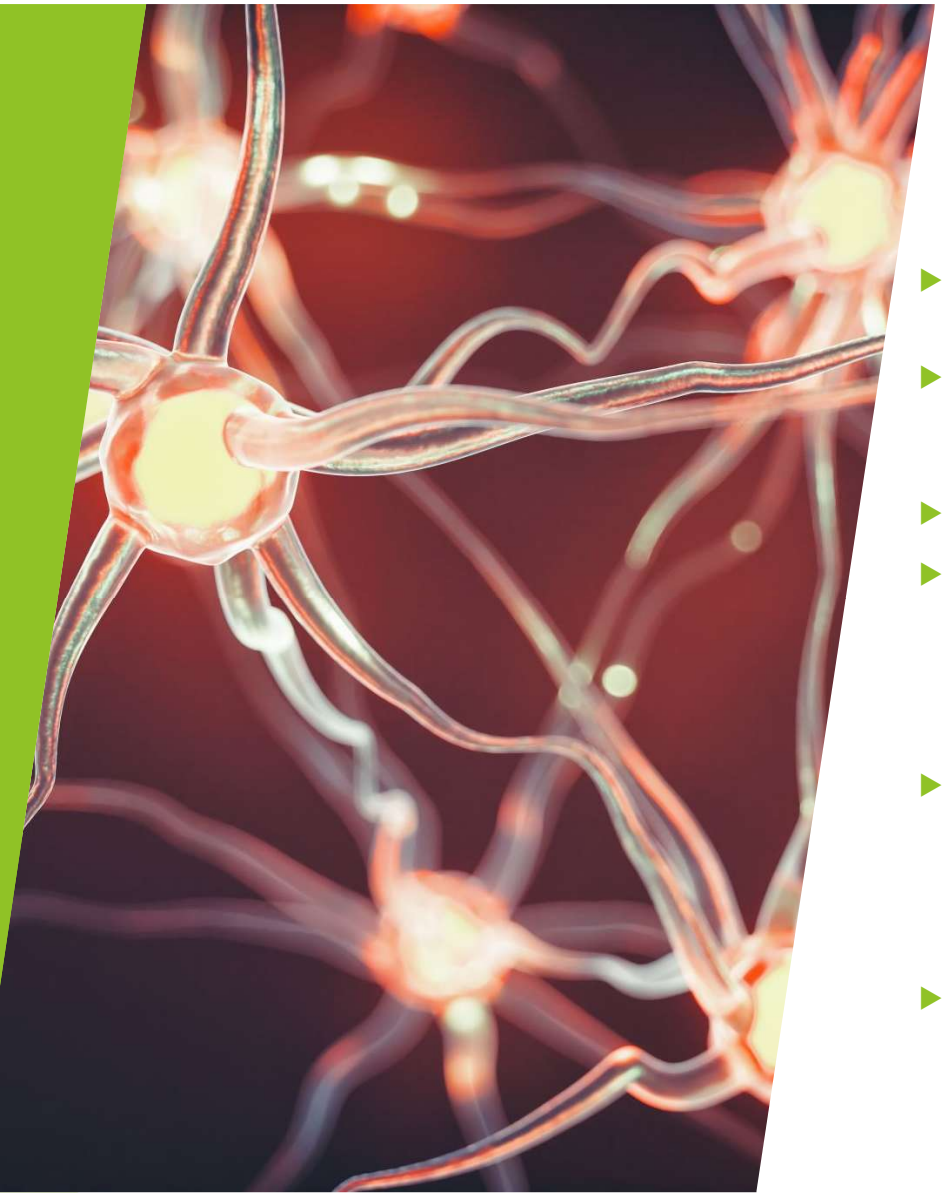
Normalize each persons need. Give it value in front of the family.

Educate the Family of IEN and REN

- Amalgamation of DNA and life experience.
- “hole in the heart” Blindfolded, very sensitive spot, raw spot (EFT) etc…
- We all “push” hard to feel what we want to feel.
- I have never met a client that truly knew what they wanted to feel…you will get “happy” “peace” and other blanket statements.
- Its very exciting for everyone to learn what they want and how to get it.

How to meet the Need

- Teach them how the behavior must be good: before, during, and after.
- Use the words effective and ineffective.
- Use more and less.
- After identifying a few ineffective behaviors ask them if they have ever worked…then ask them if they ever will work…



Emotional Regulation

- The reason we/clients make bad decisions is the loss of thinking power.
- Assisting clients into thinking instead of reacting is huge part of staying sober.
- Teach body feelings, EFT.
- Explain the science of emotional regulation: Sympathetic, Para sympathetic, vagal nerve, blood flow to the prefrontal cortex, amygdala, fight or flight, etc.
- Not all this will sink in, but it is the theme we are trying to change. The family and clients are mired in failure and shame. Some “I am worth something” can go far.
- Trying to teach them helps to de-pathologize and give value.

The Four Context/Silos of life

Social = 25% Spiritual = 25% Love = 25% Work = 25%

How We Get Lost

Expecting one context to fulfill us /to make us happy.

No authentic connections…Need cannot be met with our mask on.

Covering our emotional needs with drugs or other distractions.

The shame and guilt form bad decisions. Relapse almost always happens here.

Staying out of the “crazy zone”. Minimizing the relapse

- Insulate our emotional selves
- Authentic Lifestyle = be you!
- Have something to look forward to.
- Having a family that meets each others emotional needs and the client meets theirs. Bigger than them…creating a responsibility…a purpose.

Teach responsibility for them and their family.

- Boundaries: enmeshment verses cut off. Bowen, Minuchin.
- Having something to give your family and yourself. The IEN REN relationship
- Keep a pointing-them-at-what-is-working theme. All the insight at failures will not be as powerful as learning how to meet one's IEN.
- Bigger than them.

Questions

Group time

Individual Emotional Needs IEN
Relational Emotional Needs REN

- IEN: Important, Valuable, Relative, Wanted, Competent, Like I matter, Admired, Etc.

- REN: Respect, Loyalty, Reliability, Connection, Attention, Etc.

Flow Chart

- What is the IEN _____What is there REN_____ 100% Logical
- Subjective Definition: Influential
- How can we meet this need in all 4-context? 75%
- Social Work Love Spiritual
- 60%

  Loosing Self
- 30%
-
- 15%
- Crazy Zone
- 0%

Case Study

- **Case Vignette 1: Alcohol Use Disorder and Marital Conflict**
- Mark is a 42-year-old married male with a history of alcohol use disorder. He has maintained sobriety for six months following inpatient treatment. Mark reports that ongoing conflict with his spouse often triggers feelings of shame, anger, and isolation, increasing his cravings to drink. During treatment, it became apparent that communication patterns within the marriage contributed to emotional escalation and decreased support.

Case Study

- Samantha is a 16-year-old female referred for treatment following repeated marijuana use and declining academic performance. Samantha's parents reported difficulty establishing consistent expectations and consequences within the home. Family members frequently disagreed regarding discipline, resulting in mixed messages and increased family conflict.

Case Study

- James is a 29-year-old male recovering from opioid use disorder. He has maintained sobriety for ten months but reports increased stress when interacting with extended family members who continue to misuse substances. James described feeling pressure to attend family gatherings where substance use is common and expressed difficulty maintaining boundaries.

Case Study

- Lisa is a 51-year-old female with co-occurring depression and alcohol use disorder. She serves as the primary caregiver for her aging mother while also supporting her adult son. Lisa reported feeling overwhelmed by caregiving responsibilities and acknowledged that stress often increased her urges to drink.

Case Study

- The Rodriguez family enters therapy after the father completes residential treatment for alcohol dependence. Although he has maintained sobriety for six months, family conflict has increased. His wife remains hypervigilant and struggles to trust him. Their oldest daughter continues to monitor his behavior, while their youngest son avoids family discussions. Family members discover that while the substance use has stopped, many unhealthy roles and patterns remain unchanged. Treatment focuses on rebuilding trust, improving communication, and creating healthier boundaries.

Last Thing

Why can a “little thing” set someone back so far?

Insulation: keep that need so high ☺

Thank you!!!

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