



## Addiction – more about relationships than willpower

Addiction is the inability to stop the compulsive repetition of a behaviour (for example, gambling or taking narcotics) despite its negative effects on one's life. Today, we understand that even healthy, every day activities (such as eating and sex) can be turned into addictions.

Decades ago, addiction was characterised simply as a biological dependence upon a substance. Today, we understand it more as stemming from difficulties in *being with ourselves* and *being with others*. As one expert puts it, "[a]ddiction is fundamentally a disease of isolation"<sup>1</sup>.

Pia Melody observed that people with addictions tend to have underlying issues in common, regardless of the particular addiction. In her book, *Facing Codependence*<sup>2</sup>, she explains that addictions are merely symptoms of an underlying problem she calls 'codependence'. Essentially, codependence comes down to shortcomings in our developmental experience as children which leave us less able than others to healthily identify and meet our needs. While someone with an ideal developmental experience is able to express their interpersonal needs and set about having them met in a balanced, healthy way, the codependent person is less equipped to do so. Fearing others or their possible responses, the codependent person may instead seek comfort in the more predictable relief of a substance (eg alcohol) or process (eg sex addiction)<sup>3</sup>.

Generally speaking, people with optimal developmental experiences have a sense of confidence that their interpersonal needs can and ultimately will be met. The gaps in a codependent person's childhood development set him or her up for flawed and failed relationships. People with codependent

tendencies may feel literally driven to find “something ‘out there’ that can be substituted for what is missing ‘in here’”<sup>4</sup>. Experts such as Flores agree that unless and until these underlying issues are dealt with, the mere removal of a symptomatic addiction will only see it replaced by another, then yet another<sup>5</sup>. He concludes that the addict enters therapy not for treatment of the addiction – as he or she assumes – but rather for treatment to address gaps in their developmental and interpersonal experiences<sup>6</sup>.

Neuroscience tells us that relationships sculpt the brain<sup>7</sup>, and as a relational disease, addiction responds best to relational treatment. This is why twelve-step programmes and therapy can be so important in recovery: healing only comes in relationship with other human beings.

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<sup>1</sup> Roth, J.D. (2004). *Group Psychotherapy and Recovery from Addiction*. Binghamton, NY: Haworth Press, Inc., p. 5

<sup>2</sup> Melody, P., Miller, A.W. and Miller, JK. (2001). *Facing Codependence: What It Is, Where It Comes from, How It Sabotages Our Lives*. San Francisco, CA: HarperCollins.

<sup>3</sup> Flores, P.J. (2007). *Group Psychotherapy with Addicted Populations – An Integration of Twelve-Step and Psychodynamic Theory*, 3rd (ed.). Binghamton, NY: Haworth Press, Inc., p. 23

<sup>4</sup> Flores, *op cit*, p. 46

<sup>5</sup> Flores, *op cit*, p. 45

<sup>6</sup> Flores, *op cit*, pp. 354-355

<sup>7</sup> Flores, *op cit*, p. 6