

by Tian Dayton, Ph.D.

# Emotional Sobriety

*Adult  
Children of  
Trauma  
and Addiction*

Those of us who have lived with addiction, all too often tend to live in emotional extremes, without what Bill W., the founder of AA, referred to as “emotional sobriety and balance.” These swings in thinking, feeling and behavior have long been referred to in the rooms as “black and white thinking.” We go from zero to ten with no speed bumps in between, from imploding to exploding. We have trouble living in 4, 5 and 6.

Neuroscience explains that emotions are experienced in the body and processed by “limbic systems”. The body, in fact, does not really know the difference between physical danger, like an oncoming car or emotional danger, like a drunk and raging parent. The limbic system will react either by pumping out enough stress chemicals, like adrenaline, to give the spurt of energy needed to flee for safety or stand and fight.

But what happens when the family itself becomes the proverbial saber toothed tiger? Children cannot flee, where would they go? They cannot fight, they would lose. So they shut down, they freeze, they flee on the inside. But without somehow processing what’s going on for them, that numbed and frozen pain can live within the self system, an emotional accident waiting to happen, in what is now called a *post traumatic stress reaction*. That is what being an ACOA (Adult Child of Trauma and Addiction) is all about. Years after the stressor is removed, the ACOA lives as if it is still there. As if some emotional threat, lurks just around the corner.

*This is the dilemma of the adult child of either addiction or trauma. Unresolved pain from childhood gets recreated and acted out in adult relationships.*

Living with chronic stress can lead to deregulation in the way that the limbic system processes emotion. This limbic or emotional deregulation can manifest as *moodiness, irritability, depression, anxiety, decreased motivation, appetite or sleep problems, decreased or increased sexual responsiveness or social isolation.*

Following is a list of characteristics that can follow in the wake of emotional and psychological trauma, drawn from my book *Emotional Sobriety: From Relationship Trauma to Resilience and Balance*.

## *Hypervigilance/Anxiety/Easily Triggered*

Living with relationship trauma can over-sensitize us to stress. The limbic system gets set on *high alert*. Consequently, the person may over-respond to stress or blow out of proportion conflicts that could be managed calmly. Stimuli reminiscent of relationship trauma, such as feeling helpless or humiliated, can trigger intense reactions; e.g. unconscious childhood pain may become triggered in adult relationships.

## *Distorted Reasoning*

People make sense of situations with the developmental equipment available at any given age. The young make childlike or immature meaning, which may be laced with magical thinking or interpretations that are based on the natural egocentricity of the child who feels that the world circulates around and because of them e.g. “my parent is unhappy because I am bad.” This thought may be lived by well into adulthood.

## *Development of Rigid Psychological Defenses*

People, who are consistently being wounded emotionally and are not able to address it openly and honestly, may develop rigid psychological defenses to keep emotional pain at bay. Dissociation, denial, splitting, repression, minimization, intellectualization, and projection are some examples of these defenses.

## *Relationship Issues*

Issues that stem from the emotional trauma that surrounds addiction can become incorporated into the developing personality. If these issues are never elevated to a conscious level through talking, they may remain largely unconscious. Those split off emotions may emerge years after the fact when the person entered adult relationships where feelings of closeness and vulnerability trigger pain that went unidentified and unprocessed. Those who have experienced relationship trauma through addiction, may tend to re-create dysfunctional patterns of relating in the present, that mirror unresolved issues from the past, whether or not addiction is still present. This can occur through psychological dynamics such as projection (projecting our pain onto someone or a situation outside the self), transference (transferring old pain into new relationships), and reenactment patterns (re-creating dysfunctional patterns of relating over and over and over again).

## *Cycles of Reenactment*

The reenactment dynamic is one of the most common ways that trauma from one generation gets passed down through subsequent generations. People tend to re-create and repeat the relational patterns that are familiar, even if they do not work to get what they really want.

## *Loss of Trust and Faith*

When an individual’s personal world and the relationships within it become very unpredictable or unreliable, he or she may experience

a loss of trust and faith in relationships, an orderly world and life's ability to repair and renew itself.

### *Loss of Ability to Take in Caring and Support from Others*

The numbing response along with the emotional constriction that is part of the trauma response may lead to a loss of ability to take in caring and support from others. Additionally, as mistrust takes hold, our willingness to accept love and support may lessen (van der Kolk, 1997).

### *Tendency to Isolate*

People who have felt traumatized may have a tendency to isolate and withdraw into themselves when they are feeling vulnerable. Isolation is also a feature of depression. Unfortunately the more the person isolates; the more out of practice he or she becomes at making connections with people, which can cause further isolation. Twelve-step programs, one-to-one and group therapy help to restore connection with others.

### *Emotional Constriction*

Emotional numbing is a natural response to trauma and can last anywhere from a few hours to many years. Emotional constriction refers to a restricted range of feelings or a lack of expression of authentic emotion. The kinds of sharing that are part of therapy and 12-step programs slowly and over time counter this numbing and constriction as the person learns to safely feel and share strong feelings in the presence of others (van der Kolk, 1997).

### *Learned Helplessness*

When people feel that they cannot do anything to affect or change the situation they are in, they may develop learned helplessness, that is, they may give up. They may lose some ability to take actions to affect, change, or move a situation forward. The program slogans, "Take the next right action" and "a day at a time," help people, who feel immobilized to break their frozen position, and move forward in manageable increments.

### *Depression with Feelings of Despair*

The limbic system regulates mood. When people are deregulated in the emotional system, they may have trouble regulating feelings such as anger, sadness, and fear, all of which may contribute to depression. Elevated levels of cortisol, associated with the fight or flight response, are also found in high amounts in people who report feeling depressed.

### *Somatic Disturbances*

Because the body processes and holds emotion, people may experience unconscious emotions as somatic disturbances such as back pain, chronic headaches, muscle tightness or stiffness, stomach problems, heart problems, or heart pounding, sweating, queasiness, shivering, and shaking (van der Kolk, 1997).

### *High-Risk Behaviors*

Whether to jump-start a numbed-out inner world, act out intense emotional and psychological pain or alter mood, high-risk behaviors may be self-medicating by stimulating a predictable rush of adrenaline. Adrenaline can be as addictive to the brain as heroin.

### *Survival Guilt*

The person who gets out of an unhealthy family system while others remain mired within it may experience what is referred to as "survivor's guilt." People with survivor's guilt may become overly

preoccupied with fixing their families, because the thought of being happy when their families remain locked in dysfunctional ways of living can be very painful to them.

### *Traumatic Bonding*

Trauma impels people both to withdraw from close relationships and to seek them desperately. The profound disruption in basic trust, the common feelings of shame, guilt, and inferiority, and the need to avoid reminders of the trauma that might be found in social life, all foster withdrawal from close relationships. But the terror of the traumatic event intensifies the need for protective attachments. Therefore, the traumatized person frequently alternates between isolation and anxious clinging to others. Traumatic bonds have a tendency to repeat themselves; that is, we tend to repeat this type of bond in relationships throughout our lives, often without our awareness (Hermann, J., 1997).

### *Desire to Self-Medicating*

The emotional, psychological, and physiological setup that accompanies relationship trauma can lead to self medication, in which the person attempts to numb out painful emotions and disturbing physiological symptoms and sensation with drugs or alcohol. Addiction can be seen as a problem with self regulation.

### *Both Mind and Body Need to Heal*

In order to achieve sustainable emotional sobriety people need to *translate unresolved emotions that churn around inside into words so that they can understand, gain insight and create new meaning.* As the process unfolds, they reframe the past through the more mature and aware eyes of today and achieve a degree of emotional balance through understanding. But in addition to achieving freedom and equilibrium through insight, they need to recognize that they also need to keep their bodies in balance.

- Exercise, for example, gives us a daily dose of serotonin, nature's natural antidepressant. *Serotonin* keeps the moods balanced and up beat. It calms anxiety and improves our sleep.
- Eating nutritious foods and avoiding caffeine, and an excess of white sugar and flour prevents energy spikes and crashes.
- Maintaining a network of supportive relationships and sharing emotions releases serotonin. Touching releases *oxytocin*, that bonding chemical that mediates emotional closeness. Paradoxically, oxytocin aids in feeling connected and to setting boundaries. It helps to mediate closeness.

Paying attention to mind/body forms of balance and healings helps maintain emotional fitness so that people build the necessary resilience necessary to meet the challenges of their lives. ▼

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