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THE PAR-OTHER GROUP

“What is the Parother Group?”



IS YOUR SON OR DAUGHTER USING DRUGS OR ALCOHOL ??

ARE YOU UNSURE ABOUT WHAT TO DO ??

If you are a parent who would like help,
even if your adolescent or young adult child does not, this group is for you.

Please consider joining this safe, confidential and empowering group to help you make
informed and effective decision on what to do to help your family.

INTERESTED???????????

For more information, please call
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PAR-OTHER

We have all heard how Addiction is a family disease. How it impacts everyone in the family. And often, particularly with adolescents and young adults, the parents are the primary significant other.

It is all too common that it is the parent who bottoms out and reaches out for help and calls a treatment program only to be met with compassion and instructions to have the substance abuser call for an appointment.

This is all based on the premise that the substance abuser is the primary treatment client and that the family members are collaterals. Well, that thinking has changed. Going back to the premise that addiction is a family disease and impacts each member, each member is recognized as a primary client. And this is particularly helpful when working with resistant adolescents and young adult substance abusers who are refusing treatment.

In the past we required the substance abuser to make the call for treatment leaving the family members feeling helpless and hopeless. We were waiting for the sickest person in the family to be the first into treatment and begin the recovery process. That just doesn't make sense. We now recognize that the intervention in this family disease can begin with any member.

Hence, the birth of the program known as "pars-other". Parent – significant – other. Now when a parent of an adolescent or young adult calls and seeks help for their child who is refusing treatment we invite the parent in to begin the treatment process.

As you may imagine, initially the parent is resistant to entering for themselves. Sound familiar to early treatment? They don't see the need, believe they have a problem, and they initially fight the process, and work hard at getting the focus of treatment off themselves and on to their child/young adult. (Much like the client who denies having a substance abuse problem but instead a school/work/legal/fill in the blank problem). Again, sound familiar?

So we work to engage, educate and sustain them for the process to take hold.

AND IT DOES!

We found that following the same format that we would use in working with the addict works with the parent. The course of treatment runs parallel much like the progression of disease chart, we simply substitute the impulsive, compulsive, obsessive and out of control behaviors the addict demonstrates around their drug with that of the parent's obsessive, compulsive behavior trying to control the behaviors of their child. It's impossible and it leaves them feeling helpless, hopeless, shameful, angry and yet unable to stop. Now, this must sound familiar.

We work hard to help parents understand that (visual) when they are bent over trying to lift their child they are at their weakest position to be helpful. You know, it's like how they teach us on an airplane in an emergency, to put your face mask on first. Then, your child's. Same premise. The parent is as affected by the disease and they can not be of help until they are restored to a healthy position. Only from a point of strength can they have positive impact.

This is a tough concept for parents as it challenges their primary beliefs on what their role is. Many parents view their role as a protector, nurturer and provider. One who shelters and assists and often puts their needs second to their child's.

We help them to understand the difference between a "good" parent and a responsible parent. The good parent is the "doing for" and the responsible parent respects boundaries and maintains healthy expectations of self and others. See the capabilities in others and provides opportunity for growth and change.

Difficult to do but once they get it – treatment moves more quickly. We ask of them the same criteria that we do of our substance abusing clients during treatment which includes regularity of sessions, payments, abstinence, drug testing, support groups, education, and group work.

All of which you probably do in your treatment work with addicts. So what I'm telling you is that you too know how to do this. You just need to see the relevance to doing it with the parent when the adolescent/young adult refuses treatment. It starts the change process which often leads to the substance abuser entering treatment.