



Who Carries The Disease?

By Tian Dayton

In my alcoholic family, there were two choices for relationship styles -- merged or chilling aloneness. I was a nice, well brought up kind of girl, so I chose merged. As long as we agreed on everything, things went along fine, but disagreement was not in the contract. Disagreeing was perceived as an assault on the system, a blow to the core of the family ethic. The dissenter had to be isolated, kept at bay with a variety of defensive tactics ranging from blame to temporary suspension.

Needless to say, with little room for contrasting opinions, when we figured out that Dad was an alcoholic, we thought we had put our collective finger on the problem underlying our deteriorating relationship dynamics. He was the problem, the big problem, the only problem. If he could get sober, we would all be fine. If he couldn't get sober, he would have to be expelled. Imagine our surprise when, even after he was ousted, we were still a mess.

Our dynamics now were, in fact, even weirder because the person who had held or contained the pathology was missing. It was open season: a family in search of an object, a person to be the identified problem. The idea that each of us were disease carriers was unthinkable, so a couple of decades were devoted to playing hot potato. Who has the illness? You sir? Not I sir! Then who sir? The correct answer turned out to be "all of us, sir." And so we grew into young adulthood with a sort of communal pain, and within that pain were defenses, distortions, repressed wounds and anger that crippled our personalities and our relationships.

Those early relationships upon which as children we are so wholly dependent teach us how to conduct relationships

throughout life. For those of us who grew up in alcoholic homes, intimacy becomes a minefield loaded with anxieties and fears, hypervigilance and unresolved pain. It is when we engage in committed relationships in adulthood that the unresolved pain of childhood surfaces most intensely. Then we tend to resort to the primitive defenses that we used as children. We may perceive danger where it does not necessarily exist, then set about defending ourselves from our feared attacker, be it real or imagined. In this way we set ourselves up for a re-enactment of old painful dynamics from the past projected on to and lived out in present day partnerships.

It is no new story that we tend to choose people to be intimate with who in some way mirror our past. It is for precisely this reason that the relationships we choose can be, if both parties are willing, vehicles for healing. The very issues that intimacy brings up show us where our wounds and work lie.

A very significant part of healing from childhood trauma is to find safe places to share the pain. As a psychodramatist, I find it useful to do role plays so that clients can observe their own relationship dynamics in concrete form. Then they are able to understand the distortions, what meaning they assigned to particular interactions, how they came to feel about themselves and the other person or people, and how those dynamics might be playing out in their present-day lives.

Some ways in which unresolved trauma can affect relationships:

- Tendency to overreact to conflicts or problems or to misread subtle signals
- Fear of engulfment, abandonment

or commitment

- Loss of trust in the relationship bond
- Weak or rigid boundaries rather than flexible
- Inability to modulate emotional responses
- Drive to re-enact original hurt in a variety of ways
- Need to control in order to feel safe
- Loss of ability to conceptualize, believe in and take steps toward securing a happy future
- Loss of ability to read and make use of emotional reactions and subtle signals
- Problems in communicating

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In my book *Heartwounds: The Impact of Universal Trauma and Grief on Relationships*, I outline the effects of trauma first on the personality and second on the relationships, and how we can use relationships either as vehicles for healing old wounds or arenas for their reenactment. Therapy can offer a clinical situation in which to explore and examine old dynamics, along with an opportunity to reinternalize a healthier relationship. 12 Step programs can offer a new social world, a world in which pain is acknowledged and new ways of relating can be practiced - one day at a time.

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