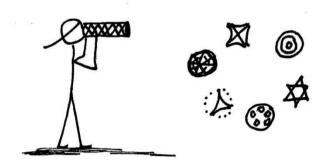
Chapter 1: A KALEIDOSCOPE



Merriam-Webster online dictionary defines "kaleidoscope" as "a tube that has mirrors and loose pieces of colored glass or plastic inside at one end so that you see many different patterns when you turn the tube while looking in through the other end." The patterns look like multiple variations on a snowflake or the most intricate mandala or mosaic designs. I imagine that most of us have been intrigued by the changing patterns and shapes created in a kaleidoscope.

A book about boundaries cannot be written without including the relationship pattern of codependency. Codependent persons are frequently in relationship with those practicing an addiction, who have a need to control, who tend to be dependent, or demonstrate narcissistic (self-centered) patterns of behavior. The characteristics of a relationship between a person with codependent tendencies and any of the above personalities, often creates great distress. The primary way out of the distress is for the codependent to set, and enforce, effective boundaries.

Even as I write these words I can hear some of you asking, "But what *is* codependency? Am I being codependent? How do I know when a boundary is needed? What does this topic have to do with the conflicts I'm having with ? How will this volume help me create a healthy love potion?"

And that describes my challenge as an author. Codependency and boundary setting are slippery topics. It's hard to get a grip on them because they are intermixed with words such as control, lack of control, choices, consequences, approval, helping, caring, expectations, resentment, love, pity, shame, responsibility, irresponsibility, drama, addictions, judgments, rejection, training, life lessons, beliefs, behaviors, fear, denial, and more. Right now it's as though the pieces of this topic are scattered all over the table rather than creating the orderly, symmetrical patterns in a kaleidoscope.

I've designed this book so that each chapter will give you a different view of codependency and boundary setting. It's as though after reading Chapter 1, you turn the kaleidoscope slightly and a different pattern is seen even though it's created by the same pieces of glass or plastic. Then, after reading Chapter 2, you turn the kaleidoscope again, and see the same pieces making a different pattern. All the chapters are using the same pieces, but each chapter presents them in a different configuration.

My goal is to describe and illustrate codependency and boundary setting in so many ways that you, the reader, will relate to a story, a description, a feeling, or a pattern of behavior in one or more of these

chapters or examples. As a result, you'll have more clarity about what codependence is and how codependency may be creating unnecessary stress in your life. You will also be more confident in the setting of appropriate boundaries. As I write each chapter I imagine hearing your "ah-hahs" or seeing light bulbs illuminating your mind!

HISTORY

Codependency as a behavioral pattern was first identified in the alcohol addiction recovery movement more than fifty years ago. In the beginning it was called co-alcoholism because it was first identified as a common behavior pattern of persons in relationship with an alcoholic. The co- part of the word indicates that it takes two to create this condition. You'll be reading about the role of each person in future chapters with many helpful examples given.

Those who worked with alcoholics soon realized, however, that the behavioral pattern of codependency is not restricted to those in relationship with an alcoholic. Melody Beattie was one of the first to make codependence a national buzz-word in her ground-breaking and best-selling book, *Codependent No More: How to Stop Controlling Others and Start Caring For Yourself.*

Before going into descriptions about what codependence *is*, how it works, and why it's destructive in relationships, first let me describe what codependence is *not*.

INTERDEPENDENCE

Healthy individuals grow from children who are totally *dependent*, gradually become *in*dependent as young adults, and finally, ideally, become appropriately *inter*dependent. Interdependence is healthy awareness that we cannot survive alone. For instance, most of us depend on farmers to grow our food, transportation companies to deliver it to our local store, and the store to sell it to us for our consumption. I could cite many other examples of interdependence at work in the culture where most of us live and work.

Another example of interdependence is found in businesses. The president of the company has the vision for the future and negotiates moves toward that goal in order to keep his employees employed and paid. Employees each have their jobs that, together, produce the product that keeps the company prosperous. Neither could do their jobs effectively without the other.

*Inter*dependence is not *co*dependence.

SELECTIVITY

In healthy, functioning households, as well as in most business partnerships, we also practice what is known as selectivity. Selectivity occurs when two persons divide up the chores of daily living according to who does what best. If he does a better job with the laundry, then he takes over laundry chores. If she loves gardening and has a knack for making the yard beautiful, then she may do all or most of the gardening. If neither likes to cook, they may take turns or do the cooking jointly. If one cooks, the other may do the clean-up.

At work, selectivity is seen when two or more persons partner to build a business. My father and his two brothers partnered in a farming business. My dad was the farmer, responsible for growing the crops in sufficient bulk to fill the orders. One of his brothers was responsible for keeping the tractors and trucks running that tilled the fields and delivered the produce to markets. The third brother had a head for

business and became the person responsible for paperwork, lease contracts, sales agreements, etc. They successfully functioned as partners because each did what he was best at doing.

Selectivity is characteristic of great partnerships, either at home or at work.

Selectivity is not codependence.

CARE-GIVING

Caring for someone who is, either temporarily or permanently unable to care for himself, is not codependence. Caring for someone who is disabled may be called love, responsibility, friendship or sacrifice, but it is not codependence.

EXAMPLES of TEMPORARY CARE-GIVING

My late husband Jim's house burned to the ground in the middle of the night many years ago. The family was lucky that all but their dog escaped alive, Jim wearing only his briefs. As they watched the fire trucks arrive, a neighbor lent him a pair of trousers, and a shirt. Another found a pair of shoes that would work for a few days. As the slow process of insurance claims and rebuilding took place, a friend gave Jim \$10,000 as a down payment on another house so they could move out of the motel.

When my niece was diagnosed with breast cancer and began debilitating chemo treatments, her family's friends took turns delivering meals.

Often after a disaster such as a tornado or hurricane, whole communities rally around the survivors bringing clean drinking water, temporary housing, meals and trucks for hauling away debris.

In time, the caregivers were grateful these victims had recovered and allowed them to resume their normal responsibilities. Jim's friend did not continue his gift by making the monthly mortgage payments. As my niece recovered and was physically able, her friends discontinued delivering meals. When a community has been rebuilt, emergency teams move their resources to some other needy community.

My parents were very capable of taking care of themselves until near the end of their lives. In their late eighties, each of them needed physical assistance and emotional support. For my dad, that meant that my sisters and I set up shifts and took turns caring for him during the day. We eventually hired a night nurse to care for him at night and were grateful for the support of our local hospice organization. My mother was not strong enough to meet his needs during this time and greatly appreciated the care-giving roles their daughters assumed until his death.

A few years later, my mother, although largely self-sufficient, needed more nutritious meals and someone to help her safely shower. The three of us who lived closest took turns for several months. Finally we helped her move into a facility that cared for her until her death.

Temporary care-giving is not codependence.

PERMANENT CARE-GIVING

Sometimes caring for babies or young toddlers feels like it will go on forever...will be permanent. But in most cases, children learn to walk so they no longer need to be carried. A growing child even insists on "I can do it myself!" Eventually, children learn skills that enable them to become adults, physically and

financially independent. The parents of healthy, independent adult children are fortunate. Some children are born with disabilities that require long-term or lifetime care. Parents of severely disabled children must rise to an elevated level of responsible caretaking that most of us are not required to experience. This may include personally caring for the disabled child. In some cases, it means finding paid or volunteer helpers to assist, or a facility geared to caring for the disabled.

Permanent care-giving, when necessary, is not codependence.

WHERE CARE-GIVING AND CODEPENDENCE INTERSECT

With the on-going reality of war, disabled veterans need partial or total care-giving. Adults who are war-wounded, disabled by an accident, or victims of a catastrophic event such as a stroke, present their caretakers with the need for discernment. How much care-giving is necessary? Too much care-giving can strip away a person's healthy desire to work for a better quality of life. Too little may make the victim feel hopeless...or compromise his or her health. This is a decision point where necessary care-giving and codependence that weakens the will, have to be identified and each handled differently.

When my eldest son Steven was diagnosed with a severely, enlarged heart, he returned home to live with Jim and me. He had several medications he needed to take on a regular schedule in order to minimize the stress on his compromised heart. Due to his years of drug addiction and severe Attention Deficit Disorder with Hyperactivity, (ADHD) he found it difficult to do anything according to a schedule. I agonized over the decision of whether or not to take charge of his medicines. On the one hand, it appeared that, most days, he was coping very well, even able to hold down a part-time job. On the other hand, forgetting to take his meds could result in another hospital stay or his premature death. I was told his condition was terminal, but I wanted him to live as long as possible. Walking the tight-rope between necessary assistance and codependence was agonizing. I eventually landed on the side of distributing his meds to him on the recommended schedule. There were other responsibilities that I left in Steven's hands. After two and a half years, no amount of medication could keep his heart going. I'm grateful for the extra time I had with him and do not regret my decision, even though some might label that choice "codependence."

The care-giver must discern between healthful care-giving and unhealthy codependence. This care-giver deserves grace for navigating in a murky area.

SUMMARY

Codependence and the need for setting reasonable boundaries are topics that are not simple, and do not lend themselves to easy formulas. That is why the chapters in this *Love Potions* volume, therefore, will present a variety of views of codependent characteristics and behavior, as well as stories of effective, healthy boundary setting.

The examples given above of Interdependence, Selectivity, Temporary and Permanent Care-giving are not to be confused with Codependence. There are situations where only the individuals involved can make an informed choice between healthy, necessary care-giving and unhealthy codependence.

STIR THE POT

As you read this chapter, what relationships came to your mind? Are there situations where you assume responsibility and then resent that the burden falls on you? Are there persons in your life that seem

mostly to be on the receiving side of your care and rarely on the giving side? What do you hope to learn from this book?