California State University, San Bernardino

CSUSB ScholarWorks

Theses Digitization Project

John M. Pfau Library

1991

Personality characteristics of adult children of substance abusers

Julie Siri

Follow this and additional works at: https://scholarworks.lib.csusb.edu/etd-project



Part of the Substance Abuse and Addiction Commons

Recommended Citation

Siri, Julie, "Personality characteristics of adult children of substance abusers" (1991). Theses Digitization Project. 846.

https://scholarworks.lib.csusb.edu/etd-project/846

This Thesis is brought to you for free and open access by the John M. Pfau Library at CSUSB ScholarWorks. It has been accepted for inclusion in Theses Digitization Project by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

PERSONALITY CHARACTERISTICS OF ADULT CHILDREN OF SUBSTANCE ABUSERS

A Thesis

Presented to the

Faculty of

California State University,

San Bernardino

In Partial fulfillment

of the Requirements for the Degree

Master of Arts

in

Psychology

by Julie Ann Siri August 1991

PERSONALITY CHARACTERISTICS OF ADULT CHILDREN OF SUBSTANCE ABUSERS

A Thesis

Presented to the

Faculty of

California State University,

San Bernardino

bу

Julie Ann Siri

August 1991

			A	Appro	рà:	λ:	
	Marsha	В.	Liss,	Chair			-
	Matt R	igg	Š	0,	<i>)</i>		
•	Lynda '	War	ren				

ABSTRACT

Codependency is a popular concept whose characteristics and definitions are numerous and varied. To date the concept has not been empirically defined. A common theme that emerges from the codependency movement is that all adult children of substance abusers (ACSB) exhibit "codependency" characteristics. The purpose of this study was to access the codependency characteristics of ACSB and adult children of non abusers (ACNSB). The subjects were 215 university Each subject was evaluated on 50 personality characteristics derived from the codependency literature. These 50 items were factorially reduced to 5 codependent themes. The results indicate that ACSB did not differ significantly from ACNSBs with regards to external referenting, caretaking, control or low self-expression. ACSB did, however, have lower self-worth than ACNSB (p<.05). These results do not support the popular view that all adult children of substance abusers are codependent. The subjects were also evaluated concerning relationship addiction and the 5 codependent factors. Results indicate that people who describe themselves as addicted to relationships had higher scores in the areas of external referenting (p<.001), caretaking and control (p<.05) than subjects not addicted to relationships.

Table of Contents

Title Pagei
Signature Pageii
Abstractiii
Table of Contentsiv
List of Tablesv
Introduction1
Purpose of the Study3
Origin of the Concept3
Definitions and Characteristics5
Review of the Scientific Literature16
Summary and Problem Statement19
Method21
Subjects21
Measure21
Procedure22
Results23
Discussion32
Appendix A: Codependent Characteristics35
Appendix B: Personality Characteristics Questionnaire48
References

List of Tables

Table	1.	Sorted Rotated Factor Matrix for
		Personality Characteristics24
Table	2.	Relationship Addiction Main Effects31
, 100010		The second of th

Introduction

Codependency is a term which lacks an agreed upon definition. It has been referred to as a social phenomenon (Schaef, 1987), a disease (Wegscheider-Cruse, 1984), a personality disorder (Cermak, 1986), an addiction (Beattie, 1987), and a conspiracy (Katz & Liu, 1991). Codependency as a construct has not been psychometrically evaluated by the academic or professional psychological community and its characteristics vary by theorist.

One possible reason for the lack of an integrated theory or definition may be the fact that codependency has become the focus of a "grass roots" movement. The majority of the literature is based upon the personal experiences and observations of self-described codependents. Many of the authors, the lecturers, and the "experts" are people who have struggled with codependency and are in their own process of recovery.

In spite of this ambiguity the concept of codependency has become very popular both with the general population and those professionals who work in the chemical dependency treatment environments. It has been the main topic on various radio and television talk shows. Self-help books on how to "recover" from codependency have become best sellers. Indeed, Melody Beattie's book "Codependent No More" has sold well over 1.5 million copies since it was published in 1987 (Katz & Liu, 1991). Like other codependency "experts",

Beattie is a former chemical dependency counselor and refers to herself as a recovering codependent.

Another very popular author is John Bradshaw. His bestseller, "Bradshaw on: The Family" is the book form of his well received PBS television series by the same name (Wholey, 1988). His material is also available on audio and videotapes.

In addition to books and tapes there are workshops, lectures and a wide range of treatment centers and self-help groups all designed to assist the codependent in beginning his or her "recovery process".

It has been suggested that the popularity of codependency is due in part to the general and broad nature of the different theories. There are so many descriptions and characteristics that almost anyone can find themselves perfectly described within the codependency literature. Beattie offers 254 characteristics in her book that signal codependency (see Appendix A). \Bradshaw describes 54 roles a codependent may portray while acting out their codependency (Katz & Liu, 1991). In fact the one idea that many of the codependency movement leaders agree upon is that the term "codependency" has become ubiquitous. At times lack of a clear definition has led to confusion and a loss of credibility (Cermak, 1986; Potter-Efron, 1989). been stated that: "Codependency is anything and everyone is codependent" (Beattie, 1987, p. 29).

Purpose of the study

The purpose of this study is to empirically evaluate some of the more common characteristics cited in the popular literature as characteristic of codependency and thereby reduce some of the ambiguity associated with this term.

What follows is an overview of codependency, beginning with the origin of the concept and a presentation of the range of its definitions and characteristics. Relevant literature will be cited. This will be followed by a summary and a presentation of the hypotheses.

Origin of the concept

Historically the concept of codependency emerged from
the alcoholism treatment field. During the 1950's,
therapists working with alcoholics began to realize that
alcoholism was not just an individual problem but one that
impacted on the family system of the alcoholic. Therapists
observed that non-drinking spouses (usually wives) of
alcoholics seemed to share certain characteristics with
their alcoholic husbands. Specifically, alcohol had become
the principle organizing feature of the wife's life. The
wife also was observed to be engaging in the defense
mechanism of denial regarding her spouses's alcoholism.
Since preoccupation with alcohol and denial of alcoholism
are typical characteristics of alcoholics, the terms "coalcoholic", para-alcoholic", and "non-alcoholic" surfaced to

describe those people closely involved with an alcoholic (Beattie, 1987).

Another characteristic common to spouses of alcoholics was something that came to be designated as "enabling behavior". It was thought that the wives were supporting their husbands' alcoholism in order to preserve their own importance and role in the family system, thereby "enabling" their husband to stay drunk (Schaef, 1986). Examples of such enabling behavior would include: helping the alcoholic deny the disease, assuming responsibility for the thoughts and actions of the alcoholic, or simply calling his boss to say he is ill and will not be in today. The term "enabler" surfaced as another label to describe those whose behavior was affected by being in a relationship with an alcoholic.

In the late 1970's, alcoholism and drug dependencies were combined under the generic term "chemical dependence" and the term "codependent" emerged to replace "enabler", "co-alcoholic", "para-alcoholic", and "non-alcoholic" (terms previously only associated with alcoholism) (Cermak, 1986). Thus, codependent evolved as a generic term to refer to any person whose behavior is affected by his or her relationship with a substance abuser.

The concept of codependency has continued to be applied to an expanding number of people. In its broadest application it is used to describe those people who organize their lives, values, beliefs, decisions, and perceptions

around someone or something else without any necessary reference to substance abuse (Brown, 1988).

<u>Definitions</u> and characteristics

The definitions and characteristics of codependency are numerous and cover a wide range. This section will begin with a simple presentation of characteristics obtained from Codependents Anonymous (CODA). This will be followed by an assortment of the more frequently cited authors in the codependency movement. Finally this section will conclude with a proposed definition of codependency using a DSM III type format.

Codependents Anonymous

This list of characteristics was obtained from the author's attendance as a Codependents Anonymous (CODA) meeting. CODA is a twelve-step program for recovering codependents. CODA is perhaps the most prevalent and accessible type of self-help available utilized by individuals who diagnose themselves as codependent. In addition to other literature, the following description of codependency was presented to all newcomers at the particular meeting this researcher attended:

What Is Codependency ?

My good feelings about who I am stem from being liked by you.

My good feelings about who I am stem from receiving approval from you.

Your struggles affect my serenity.

My mental attention focuses on solving your problems; on relieving your pain.

My attention is focused on pleasing you. My attention is focused on protecting you.

My attention is focused on manipulating you to "do it my way".

My self esteem is bolstered by relieving your pain.

My own hobbies and interests are put aside in favor of sharing your interests and hobbies.

Because I feel you are a reflection of me, I want your behavior and personal appearance to be dictated by my desires.

I am aware of what you feel and want rather than of what I feel and want. Even when I am not truly aware, I assume that I am.

The dreams I have for my future are linked to you.

My fear of rejection determines what I say and do.

My fear of your anger determines what I say and do.

I use giving as a way of feeling safe in our relationship.

My social circle diminishes as I involve myself with you.

I put my values aside in order to connect with you.

I value your opinion and way of doing things more than my own.

The quality of my life varies in relation to the quality of yours.

Author unknown

A common theme in this list of characteristics is the emphasis on external sources for one's sense of identity and self-worth.

Wegscheider-Cruse

Wegscheider-Cruse, a social worker, author, and lecturer on codependency, defines codependents as "all persons who (1) are in a love or marriage relationship with an alcoholic, (2) have one or more alcoholic parents or grandparents, or (3) grew up in an emotionally repressive family" (cited in Schaef, 1986, p.14). According to Wegscheider-Cruse this definition includes 96% of the population. She further states that codependency is a primary disease which is present in each family member as a result of trying to adapt to a sick family system which is seeking to protect and enable the alcoholic (Wegscheider-Cruse, 1988).

Whitfield

Whitfield is a physician, specializing in the treatment of addictions. Similar to Wegscheider-Cruse, Whitfield views codependency as a disease. His earlier definitions linked the concept solely to alcoholism. He described codependency as "ill health, maladaptive or problematic behavior that is associated with living with, working with or otherwise being close to a person with alcoholism"

(Whitfield, 1989, p. 20). He has since expanded his definition to be "any suffering and/or dysfunction that is associated with or results from focusing on the needs of others" (Whitfield, 1989, p.19). According to Whitfield, codependency arises when one begins to neglect their inner self and repress their emotions, reactions and observations. This may be done in order to please parents and survive a stressful environment. Repression of feelings and experiences leads to invalidations and neglect of one's self. A codependent (false) self develops to replace the true self (Whitfield, 1989). For this reason, Whitfield describes codependency as a disease of lost selfhood.

Smalley

In contrast to Wegscheider-Cruse(1988) and Whitfield (1989), Smalley does not view codependency as a disease. Smalley is a licensed psychologist and chemical dependency practitioner. Her specialty is dependent relationships. She describes codependency as a pattern of painful, exaggerated, dependency characteristics which manifest themselves in the context of relationships. She further states that "codependency is a learned pattern of behaviors, feelings, and beliefs. It often results in self-neglect and is characterized by an external locus of control" (Smalley, 1987, p.126).

These patterns are thought to be developed as a

response to living in a high-stress family environment. This stress can come from sources other than alcoholism, such as the presence of chronic illness, mental illness, or obsessive compulsive traits. The patterns develop as a way of avoiding pain. Smalley identifies the following cognitive beliefs as characteristics of codependents trying to avoid pain:

"If I just stay close, I'll be OK."

"If I just stay distant, I'll be OK."

"If I just stay in control, I'll be OK."

"If I just give enough, I'll be OK." (Smalley, 1987, p.126)

One or more of these beliefs can become the central organizing feature of the codependent's life. Other characteristics of codependency are:

- External locus of control. Codependents focus on people and objects outside themselves for validation.
- 2. Preoccupation with relationships. This is most evident in intimate relationships. The codependent person will exhibit extreme attachment or avoidance in the relationship.
 - 3. Unseen audience. The codependent feels that he or she is being constantly observed and evaluated by a psychological audience that they carry around with them.

4. High tolerance of inappropriate behavior accompanied by explosive outbursts of rage or panic (Smalley, 1987).

Subby

Association for Children of Alcoholics, a lecturer, author and treatment counselor defines codependency as "an emotional, psychological, and behavioral condition that develops as a result of an individual's prolonged exposure to, and practice of a set of oppressive rules" (Subby, 1988, p. 26). Subby does not believe that codependency necessarily evolves from being in a relationship with a person who is chemically addicted. Rather, he believes that codependency is transmitted through family systems by a set of unspoken and unwritten family rules. Some of these rules are:

- 1. It's not okay to talk about problems.
- 2. Feelings should not be expressed openly.
- 3. Communication is best if indirect, with one person acting as messenger between two others (triangulation).
- Unrealistic expectations -be strong, good, right, perfect. Make us proud.
- 5. Don't be "selfish".
- 6. Do as I say not as I do.
- 7. Its not okay to play or be playful.

8. Don't rock the boat. (Subby & Friel, 1988 p. 34).

exill

Subby postulates that by living by these rules a person learns to do only those things that lead to approval and acceptance thereby denying who he or she really is. Additionally, they have difficulty expressing and identifying feelings. They worry about what others will think of them if their true feelings were known. They desire closeness but have difficulty forming and maintaining relationships. They are rigid and attached to their attitudes and beliefs. They are perfectionistic and have high expectations for themselves as well as others. Codependents have difficulty making decisions and adjusting to change. They feel responsible for others' feelings and In order to feel good about themselves, there or behavior. is a constant need for the approval of others. They also feel as though they have no power over their life.

Subby further states that being codependent may precede chemical dependency (Subby & Friel, 1988). That is, a person may turn to drugs or alcohol as a result of being codependent.

Schaef

Schaef is a self-defined recovering codependent, lecturer, author, psychotherapist and workshop leader. Her definition is perhaps the most global. She states that codependency is "a disease that has many forms and

expressions and that grows out of a disease process that is inherent in the system in which we live" (Schaef 1986, p.21). In other words, codependency is not just a reaction to a single dysfunctional relationship or family system, but rather is a reaction to a diseased society.

Codependency as characterized by Schaef is representative of the majority of the codependency literature. As a result, her descriptions will be presented in some detail.

According to Schaef the central characteristic of codependency is "external referenting". The codependent develops a sense of self based upon external sources. One example of external referenting would be relationship addiction. The codependent needs the relationship to validate his or her own existence. Whether their partner requires it or not, codependents will sacrifice parts of themselves in order to maintain the relationship.

Another form of external referenting would be a lack of "boundaries", where boundaries refer to a sense of where the self ends and others begin. Since they have no boundaries, they will take on the feelings and/or thoughts of those people around them. Schaef comments that this may explain why codependents have difficulty with intimacy. In order to be intimate, one needs a self. Otherwise getting close brings with it the risk of being consumed or engulfed by the other person. Often in alcoholic families there is a

Youd

excell.

lack of boundaries. According to the treatment literature, family members assume responsibility for the alcoholic's problems. The drinker is given the power to determine the codependents moods and reactions.

Impression management is yet another type of external referenting. Codependents are extremely concerned about how others are perceiving them. Since their self worth is dependent upon external validation, they go to great lengths to discover what others want from them and then try to deliver. They are often seen as "people pleasers". If they are unable to please, they consider it a personal failure.

A final type of external referenting would be not trusting one's own perceptions unless they are validated by others. According to Schaef this also tends to make codependents gullible. They will believe what others tell them even though it is an obvious lie. They hear what they want to hear and see what they want to see.

Another important characteristic of codependency as defined by Schaef is caretaking. Codependents feel that they have no intrinsic value and, as a result, people would not want to spend time with them unless they made themselves indispensable. They do things for others that others should be doing for themselves. In this way they encourage others to be dependent upon them. This is one of the predominate dynamics between an alcoholic and his/her codependent spouse. Codependents need to be needed (Schaef, 1986).

LISA

LISA

Codependents can also be characterized as "Good Christian Martyrs". They make sacrifices and often put others first. Their goodness is related to their suffering. They set their needs aside in order to serve others (Schaef, 1987).

Schaef also asserts that codependents assume responsibility for other people's thoughts, feelings and behaviors. They sometimes feel that they are the center of the universe and anything that happens to someone close to them was because of something they did. They feel that they can and should be able to control everything (Schaef, 1987).

A final characteristic of codependency according to — Schaef is that of physical illness. The codependent is often living in a stressful environment. They react to stress by denying the problem and working even harder to keep things under control. As a result, they may develop stress-related diseases such as hypertension; heart, respiratory, and gastrointestinal problems; asthma, headaches, and rheumatoid arthritis (Schaef, 1986; Cermak, 1986).

Cermak

The last definition to be discussed is that offered by Cermak. Cermak is a psychiatrist specializing in the treatment of spouses and children of chemical dependents. He proposes the following definition: "Codependence is a

recognizable pattern of personality traits, predictably found within most members of chemically dependent families, which are capable of creating sufficient dysfunction to warrant the diagnosis of Mixed Personality Disorder as outlined in DSM III" (Cermak, 1986, p.1). Cermak believes that the lack of an integrated theory and accompanying empirical evaluation has been a major obstacle to the understanding, diagnosing and treatment of codependency. As a result Cermak has proposed 5 diagnostic criteria in the style of DSM III. "The essential features of codependency include:

- continual investment of self-esteem in the ability to influence/control feelings and behavior in self and others in the face of obvious adverse consequences;
- 2. assumption of responsibility for meeting other's needs to the exclusion of acknowledging one's own needs;
- anxiety and boundary distortions in situations of intimacy and separation;
- enmeshment in relationships with personality disordered, drug dependent and impulse disordered individuals; and
- 5. exhibits (in any combination of three or more) constriction of emotions with or without dramatic outbursts, depression, hypervigilance, compulsions,

anxiety, excessive reliance on denial, substance abuse, recurrent physical or sexual abuse, stress-related medical illnesses, and/or a primary relationship with an active substance abuser for at least two years without seeking outside support (Cermak, 1986, p. 17.).

Review of the scientific literature

Although review of the literature yielded a variety of articles concerning the topic of codependency, the majority of these were case presentations based upon case histories, experiences and observations of the author. There was only one study which psychometrically evaluated the construct of codependency per se. In this study, Prest and Storm (1988) compared compulsive eaters and their spouses with compulsive drinkers and their spouses. Data were collected using a structured interview. Prest and Storm found that couples in both groups demonstrated similar characteristics which they labeled as codependent. Specifically, these characteristics included enabling behaviors, difficulty dealing with feelings, resolving conflicts, communication problems and organizing the relationship around the compulsive behavior.

They concluded that the presence of codependent characteristics in both groups lends empirical validation for the construct of codependency. It should be noted, however, that this was a pilot study, sample size was small

(10 compulsive drinkers, 10 compulsive eaters, and their spouses) and the groups were not compared against non-compulsive drinkers and/or eaters. In the absence of such a control group it cannot be determined that the observed "codependent" characteristics are specific to compulsive eaters and or drinkers. For this reason, it is questionable as to whether or not this study empirically assesses codependency.

Although the number of empirical studies specifically regarding codependency are limited, relevant studies can be found within the adult children of alcoholics literature.

One such study was conducted by Werner (1986). The subjects were children of alcoholics born on the island of Kauai, Hawaii in 1955. Werner followed the children from ages 1, 2, 10, and 18. Werner was interested in the variables that differentiated between those children that had coping problems and those that did not. Werner found that male offspring of alcoholic mothers were at a higher risk for psychosocial problems than female offspring of alcoholic fathers. Werner also found that not all the children of alcoholics were adversely affected. She concluded that there are other variables besides the presence of alcoholism that can affect a child's ability to function. Quality of the caregiving environment may produce a resilient child, that is, one who can successfully cope with the negative stressors often found in an alcoholic

home. The study is relevant to the present study because it suggests that not all children of alcoholics develop codependent characteristics based solely on family background, specifically the presence of alcoholism.

Berkowitz and Perkins (1988) conducted a study in which the personality characteristics of young adult children of alcoholics (COA) were compared to young adults from non-The subjects were assessed on 8 different alcoholic homes. characteristics which included; other-directedness, sociability, impulsiveness, independence/autonomy, selfdepreciation, need for social support, lack of tension, and directiveness. These researchers found that the COAs were similar to their peers on most of the personality measures, an important finding, given the fact that this is one of the few studies in which a control group was employed. finding supports the previously cited study by Werner (1986), which mentions the resilient nature of some children However, this study did find a significant of alcoholics. difference in self-depreciation scores between COAs and their peers, p<.006. This difference was most pronounced for daughters of alcoholic fathers, p<.05. In this study self-depreciation was a measure of depression and low self-This study is relevant to the present study because esteem. self-esteem issues and depression are two frequently mentioned characteristics of codependency.

Summary and Problem Statement

In summary it has been demonstrated that the definition of codependency is both ambiguous and overly inclusive. For some it is a consequence of being raised in an alcoholic family and for others it can result from any stressful or dysfunctional environment.

While codependent characteristics vary somewhat from one source to another, certain common themes emerge from the literature, including: external referenting, caretaking, control, over-responsibility, low self-worth and low self-expression.

The adult children of alcoholics literature is mixed. Werner's study (1986) found that some children of alcoholics were at higher risk for psychosocial problems while other children were surprisingly resilient. Berkowitz and Perkins (1988) found that children of alcoholics differed from their peers with regards to self-depreciation and yet were similar to their peers on several other personality measures. These studies question the underlying assumption that anyone raised in an alcoholic family will exhibit codependent characteristics.

Based on existing research and clinical reports to date we expect to find that codependent characteristics can be reduced to 5 main themes previously mentioned (external referenting, caretaking, control and over-responsibility, low self-worth and low self-expression.

According to the codependency literature, these characteristics should be more common to those subjects who come from a substance abuse background. In other words adult offspring of parents who abused substances should have significantly higher scores on the codependency factors than those subjects who did not come from such a background.

Method

Subjects

The subjects were 215 undergraduate students from a university in Southern California. There were 148 females and 66 males. (One subject did not complete the gender question). The subjects ranged in age from 18-51 years old (M=26.2, SD=8.46). The majority of the sample (64.7%) were white, while the remainder of the subjects represented a variety of ethnic groups.

Measure

The subjects completed a questionnaire (Appendix A) consisting of 4 sections, A through D. Section A (Personal Background) was an assessment of the subject's demographic statue. Subjects provided information concerning age, sex, level of education, income and current relationship status. They were also asked if they had been in a relationship with someone (past or present) who abused drugs or alcohol. Finally, they were queried concerning addictions and their own use of alcohol or drugs.

Section B (Family Background) was designed to evaluate parental substance abuse, as well as its severity and treatment.

Section C (Personality Characteristics) consisted of 50 items. These 50 items were created by the author based upon

the existing literature. Subjects were asked to respond to these items on a 7-point scale (1=I am never like this, 7=I am always like this). These items were designed to measure codependency characteristics.

Finally, in Section D the subjects were asked if they considered themselves an adult child of an alcoholic or drug abuser; whether they had attended a 12-step program, and whether they identified themselves as a codependent. The last item of the questionnaire was a free response question in which the subjects were asked to define codependency.

Procedure

The questionnaires were distributed during class sessions. Participation was voluntary and confidential. The subjects were asked to complete the questionnaires at home and return them at the next class session. Extra credit was available for participation.

The subjects were debriefed via an explanation sheet attached to the study, additionally this researcher returned to the participating classes and presented a summary of the findings.

Results

Five sets of analyses were conducted. A principal components factor analysis was performed on the data to extract 5 factors or subscales for accessing codependency. Multiple t-tests were then performed to determine if there was a gender difference on any of the 5 factors. Analyses of variance were performed to compare adult children of substance abusers (ACSB) with adult children of non-substance abusers (ACNSE) on each of the 5 factors. Finally, analyses of variance were utilized to compare subjects addicted to relationships (AREL) with subjects not addicted to relationships (NAREL) on each of the 5 factors.

Principal Components Analysis

Principal components analysis with varimax rotation was performed on the 50 personality characteristics. The analysis was done using SPSSX. The program was instructed to extract 5 factors in accordance with the 5 common themes extrapolated from the literature. Additionally the scree test of eigenvalues leveled off around the fifth factor.

Table 1 shows the sorted, varimax-rotated factor loadings for the 50 personality characteristics. The 5 factors accounted for 18.2%, 6.0%, 5.2%, 4.5%, and 3.4% of the variance respectively. The total variance accounted for was 37.4%. A minimum loading of .35 was chosen for

inclusion of a variable in definition of a factor. In Table 1 variables with loadings over .35 are asterisked.

Table 1
Sorted Rotated Factor Matrix for Personality Characteristics

	Annual Control of the Principle of the Control of t				
	Factor	Factor	Factor	Factor	Factor
	1	2	3	4	5
PC29	.75686*	. 18998	.04624	11092	.11223
PC48	.70450*	.09470	. 08636	04730	08364
PC12	.70442*	. 15452	.03727	07134	. 15350
PC23	.69835*	. 11767	.02042	10616	. 05990
PC26	.67920*	. 05546	06550	06554	.07753
PC35	.67663*	. 03553	00260	. 11900	. 02369
PC39	.67208*	.13072	.09430	.06027	06320
PC40	.64688*	. 15418	. 26935	02893	22017
PC20	.59671*	.09526	. 13053	.07856	27544
PC44	.56922*	06257	.31871	. 17648	09864
PC28	.50052*	.24937	.08534	13340	. 11666
PC21	. 48292*	.08703	. 06889	.00372	07365
PC38	.47468*	.35460*	05479	.10400	.18869
PC17	.45610*	.18441	. 10814	27669	.34999
PC37	.43303*	.42168*	.12350	.01996	. 10075
PC41	.42940*	.34759	.00974	. 33269	. 06080
PC13	.42391*	18111	. 29963	21294	. 22634
PC49	.41484*	.07645	. 34673	00680	12493
PC46	. 39558*	.04411	.25733	.08724	14610
PC34	.22774	.00798	.01100	.07667	.20154
PC32	.19304	.54035*	12964	.06879	.18807
PC42	. 37536*	.52460*	.10384	15792	. 23044
PC16	.00805	50858*	.01951	16526	. 15454
PC7	.47043*	.49611*	.00470	13691	.16632
PC25	23694	48462*	06915	. 08853	00583
PC43	. 08359	.47958*	.04200	.21819	04262
PC10	.00846	43465*	20057	. 17268	. 26036
PC36	.20719	. 42398*	08344	.32807	.32673
PC50	05259	41350*	06968	.08478	. 25926
PC15	. 29209	40335*	.31607	09565	.31719
PC8	. 12632	. 04055	.74513*	.10461	.04957
PC5	20923	04097	.73222*	. 12953	.04848
PC27	.31206	00577	.62900*	. 05054	08636
PC2	. 24325	.16020	.47521*	.07308	07780
PC22	.40260*	. 09231	.46820*	.08504	.08776
PC18	.26277	10559	.26785	08190	. 18917

Table 1 continued

PC6	11114	18036	.24193	.64482*	04904
PC4	07387	. 05584	. 15157	. 55255*	. 22806
PC1	23275	01048	.00901	.54789*	.10322
PC30	.19201	. 18535	04402	.48340*	. 05893
PC33	.30934	.01282	34769	.46033*	.01549
PC45	. 26873	01969	. 15514	.35970*	.03653
PC24	12891	06091	.04472	. 25996	.16437
PC31	05661	.06447	05218	.03447	.51391*
PC11	.11727	08908	.00113	05114	.44215*
PC3	. 02500	. 19579	08688	00181	.43551*
PC47	20790	14954	12601	.11860	.42227*
PC19	04382	.00991	. 15297	.11652	.37398*
PC14	.04681	05644	.03644	. 16273	.36130*
PC9	05177	20245	. 04645	. 12904	.22628
 			-		-

Due to a low loading (below .35) the following variables were excluded from further analysis: 34, 18, 24, and 9. Questions 37 and 7 were excluded because they loaded similarly high on more than one factor (factor 1 and factor 2). The following items were reverse coded to prevent response sets: PC3, PC9, PC10, PC11, PC14, PC16, PC19, PC24, PC25, PC31, PC34, PC47, PC50.

Factor 1 was defined by 18 personality characteristics that loaded highly on it. The number preceding the characteristic represents the item number from the questionnaire. Since these items reflect many of the components of external referenting previously discussed, factor 1 has been labeled External Referenting.

29. My good feelings about myself are based on being liked by others.

- 48. In order to get along and be liked, I tend to be what people expect me to be.
- 12. I feel good about myself only when other people like me.
- 23. I judge myself by other people's standards.
- 26. Sometimes the fear of rejection determines what I say and how I will act.
- 35. I worry about how others respond to my feelings.
- 39. I assume responsibility for others feelings.
- 40. I place more importance on the values of other's than on my own values.
- 20. I will ignore my own values in order to be in a relationship.
- 44. When I am in a relationship I spend a great deal of time pleasing my partner and seeking their approval.
- 28. I have difficulty making decisions.
- 21. If someone close to me does something wrong I feel that it is my fault.
- 38. I'm not always the person I appear to be.
- 17. Other people's actions and attitudes determine how I respond.
- 41. I feel that my asking for help is a sign of weakness.
- 13. I hate being alone.
- 49. Even if I am not enjoying myself, I often pretend to be having a good time.

46. I believe that self-sacrifice in a relationship is a sign of true love.

Factor 2 was defined by 9 personality characteristics. These items describe a person who does not like him/herself and cannot acknowledge good things about themselves. This person feels that their problems are not important and they should be kept private. This person does not enjoy having fun and has difficulty establishing close relationships. Additionally this person does not feel appreciated when doing things for others. They find value in being needed. Factor 2 is labeled the Low Self-Worth factor. Recall that items 16, 25, 10, and 50 were reverse coded.

- 32. I have difficulty in forming or maintaining close relationships.
- 42. It is difficult to acknowledge good things about myself.
- 16. I enjoy having fun.
- 25. I like who I am.
- 43. I believe it is important to keep your feelings and problems to yourself.
- 10. My problems are just as important as other people's problems.
- 36. People usually disappoint me.
- 50. I feel that the people in my life appreciate the

things I do for them.

15. I believe it is important to be needed.

Factor 3 was defined by 5 items which describe caretaking behavior that has martyrdom overtones. This factor has been labeled <u>Caretaking</u>.

- 8. Sometimes I neglect my own responsibilities in order to take care of other's needs.
- 5. Even if I am tired I will help other people.
- 27. I put other's wants and needs before my own.
- In a relationship I am loyal even if it is personally harmful.
- 22. Even though I am unhappy I will pretend that everything is fine.

The fourth factor was defined by 6 items which describe over-responsibility and control. The control issue predominates and this factor will therefore be labeled Control.

- 6. I consider myself more responsible than the average person.
- 4. If I want something done right I do it myself.
- 1. I enjoy being in charge of things.
- 30. I expect perfection from myself.
- 33. I expect too much from others.
- 45. I feel guilty or uncomfortable when I am not being

productive.

Factor 5 was defined by 6 personality characteristics. In this factor <u>every</u> item was reverse coded. These items describe a person who has difficulty expressing feelings, particularly anger. This person cannot ask for the things he or she wants and does not like being alone. They are people pleasers and have difficulty trusting others. This factor has been labeled <u>Low Self-Expression</u>.

- 31. It is easy for me to tell other people how I feel.
- 11. It is easy for me to trust others.
 - 3. It is easy for me to express anger.
- 47. I would not change my opinions (or the way I do things) in order to please someone else or win their favor.
- 19. I like doing things by myself.
- 14. I have no difficulty asking for the things I want.

t-TEST

Five t-tests were performed to determine if the scores on the 5 factors differed by gender. Differences were not significant and as a result gender was not included in any of the remaining analyses.

ANOVA and Adult Children of Substance Abusers

Using these 5 factors as dependent measures of codependency, analyses of variance was performed on the data

to determine if adult children of substance abusers had different codependency scores than adult children of non-substance abusers. Group membership was determined by self-disclosure. That is, subjects were asked if they considered themselves an adult child of an alcoholic or drug abuser. A significant main effect was found on factor 2, the Low Self-Worth factor, \underline{F} (1,210)=3.948, \underline{p} =.048. This indicated that adult children of substance abusers (\underline{M} =42.43) value themselves less than adult children of non substance abusers (\underline{M} =40.98) value themselves. Although this finding was significant, the amount of variance accounted for was small, R =.019.

ANOVA and Relationship Addiction

An Anova was performed on each of the five factors to determine if subjects who described themselves as addicted to relationships (AREL) had different scores than those subjects not addicted to relationships (NAREL). A significant main effect was found on 3 of the 5 factors. (See Table 2).

Table 2
Relationship Addiction Main Effects

		·	MEAN S	CORES
Factor	F Value	<u>DF</u>	AREL	NAREL
External Referenting	12.801**	1,208	67.22	58.97
Low Self-Worth	1.668	1,209	41.82	41.01
Caretaking	5.123*	1,213	22.15	20.43
Control	5.167*	1,211	29.94	28.38
Low Self-Expression	. 562	1,210	31.74	31.42

Note. Abbreviations for headings: DF=degrees of freedom; AREL=addicted to relationships; NAREL= Not addicted to relationships. *p< .05. **p< .001.

These results indicate that people who describe themselves as addicted to relationships have significantly higher scores on external referenting, caretaking and control factors than those subjects who do not describe themselves as addicted to relationships.

Discussion

Before attempting to evaluate aspects of codependency it was necessary to organize and reduce the number of codependent characteristics to a manageable construct. The principal components analysis yielded 5 factors; external referenting, low self-worth, caretaking, control, and low self-expression. The labeling and interpretation of these factors is based upon the empirical loading of the 50 personality items on each of the different factors. In the absence of an operational definition of codependency the scores on these factors were used as a measure of codependency.

In the present study adult children of substance abusers differed from adult children of non-substance abusers on only 1 codependency factor, specifically low self-worth. The popular codependency literature suggests a much stronger relationship between substance abuse and codependency. Indeed Wegscheider-Cruse (1984) states that anyone related to an alcoholic is codependent. Additionally the construct of codependency arose from the alcohol treatment field. Based on the literature and history of the construct one would expect to find adult children of substance abusers exhibiting several codependent characteristics. In the areas of external referenting, control, caretaking and low self-expression, there were no

significant differences between adult children of substance abusers and adult children of non-substance abusers. The finding of the present study are consistent with the comments made by Werner (1986) concerning the resilient nature of some children of alcoholics.

According to Smalley (1987) and Cermak (1986) one of the main characteristics of codependency is an enmeshment or preoccupation with relationships. In this study codependent characteristics were more strongly associated with relationship addiction than they were to substance abuse. Similar to codependency, relationship addiction is a popular ambiguous concept that has not been operationally defined. In this study subjects who described themselves as probably or definitely addicted to relationships exhibited many of the codependent characteristics presented in the popular codependency literature. Specifically they had significantly higher scores on external referenting, caretaking and control than subjects not addicted to relationships. These people looked outside of themselves for validation, are people-pleasers, and use relationships to feel good about themselves. Further they invest a great amount of energy into caring for other people at the expense of their own well being, and they exercise tight control of their environment and relationships.

In conclusion this study does not support the idea that almost everyone is codependent. Nor does it support the

popular idea that all adult children of substance abusers are codependent. This study did find evidence that codependency characteristics are closely associated with people who describe themselves as addicted to relationships.

Appendix A

Codependent Characteristics as presented in the best seller "Codependent No More" by Melody Beattie (1987).

Caretaking

Codependents may:

think and feel responsible for other people - for other people's feelings, thoughts, actions, choices, wants, needs, well-being, lack of well-being, and ultimate destiny.

feel anxiety, pity, and guilt when other people have a problem.

feel compelled - almost forced - to help that person solve the problem, such as offering unwanted advice, giving a rapid-fire series of suggestions, or fixing feelings.

feel angry when their help isn't effective.

anticipate other people's needs.

wonder why others don't do the same for them.

find themselves saying yes when they mean no, doing things they don't really want to be doing, doing more than their fair share of the work, and doing things other people are capable of doing for themselves.

not know what they want and need or, if they do, tell themselves what they want and need is not important.

try to please others instead of themselves.

find it easier to feel and express anger about injustices done to others, rather than injustices done to themselves.

feel safest when giving.

feel insecure and guilty when somebody gives to them.

feel sad because they spend their whole lives giving to other people and nobody gives to them.

find themselves attracted to needy people.

find needy people attracted to them.

feel bored, empty, and worthless if they don't have a crisis in their lives, a problem to solve, or someone to help.

abandon their routine to respond to or do something for somebody else.

overcommit themselves.

feel harried and pressured.

believe deep inside other people are somehow responsible for them.

blame others for the spot the codependents are in.

say other people make the codependents feel the way they do.

believe other people are making them crazy.

feel angry, victimized, unappreciated, and used.

find other people become impatient or angry with them for all the preceding characteristics.

Low Self-Worth

Codependents tend to:

come from troubled, repressed, or dysfunctional families.

deny their family was troubled, repressed, or dysfunctional.

blame themselves for everything.

pick on themselves for everything, including the way they think, feel, look, act, and behave.

get angry, defensive, self-righteous, and indignant when others blame and criticize the codependents - something codependents regularly do to themselves.

reject compliments or praise.

get depressed from a lack of compliments and praise (stroke deprivation).

feel different than the rest of the world.

think they're not quite good enough.

feel guilty about spending money on themselves or doing unnecessary or fun things for themselves.

fear rejection.

take things personally.

have been victims of sexual, physical, or emotional abuse, neglect, abandonment, or alcoholism.

feel like victims.

tell themselves they can't do anything right.

be afraid of making mistakes.

wonder why they have a tough time making decisions.

expect themselves to do everything perfectly.

wonder why they can't get anything done to their satisfaction.

have a lot of "shoulds"

feel a lot of guilt.

feel ashamed of who they are.

think their lives aren't worth living.

try to help other people live their lives instead.

get artificial feelings of self-worth from helping others.

get strong feelings of low self-worth -embarrassment, failure, etc. - from other people's failures and problems.

wish good things would happen to them.

believe good things never will happen.

believe they don't deserve good things and happiness.

wish other people would like and love them.

believe other people couldn't possibly like and love them.

try to prove they're good enough for other people. settle for being needed.

Repression

Many codependents:

push their thoughts and feelings out of their awareness because of fear and guilt.

become afraid to let themselves be who they are.

appear rigid and controlled.

Obsession

Codependents tend to:

feel terrible anxious about problems and people.

worry about the silliest things.

think and talk a lot about other people.

lose sleep over problems or other people's behavior.

worry.

never find answers.

check on people.

try to catch people in acts of misbehavior.

feel unable to quit talking, thinking, and worrying about other people or problems.

abandon their routine because they are so upset about somebody or something.

focus all their energy on other people and problems.

wonder why they never have any energy.

wonder why they can't get things done.

Controlling

Many codependents:

have lived through events and with people that were out of control, causing the codependents sorrow and disappointment.

become afraid to let other people be who they are and allow events to happen naturally.

don't see or deal with their fear of loss of control.

think they know best how things should turn out and how people should behave.

try to control events and people through helplessness, guilt, coercion, threats, advice-giving, manipulation, or domination.

eventually fail in their efforts or provoke people's anger.

get frustrated and angry.

feel controlled by events and people.

Denial

Codependents tend to:

ignore problems or pretend they aren't happening.

pretend circumstances aren't as bad as they are.

tell themselves things will be better tomorrow.

stay busy so they don't have to think about things.

get confused.

get depressed or sick.

go to doctors and get tranquilizers.

become workaholics

spend money compulsively.

overeat.

pretend those things aren't happening, either.

watch problems get worse.

believe lies.

lie to themselves.

wonder why they feel like they're going crazy.

Dependency

Many codependents:

don't feel happy, content, or peaceful with themselves.

look for happiness outside themselves.

latch onto whoever or whatever they think can provide happiness.

feel terribly threatened by the loss of any thing or person they think provides their happiness.

didn't feel love and approval from their parents.

don't love themselves.

believe other people can't or don't love them.

desperately seek love and approval.

often seek love from people incapable of loving.

believe other people are never there for them.

equate love with pain.

feel they need people more than they want them.

try to prove they're good enough to be loved.

don't take time to see if other people are good for them.

worry whether other people love or like them.

don't take time to figure out if they love or like other people.

center their lives around other people.

look to relationships to provide all their good feelings.

lose interest in their own lives when they love.

worry other people will leave them.

don't believe they can take care of themselves.

stay in relationships that don't work.

tolerate abuse to keep people loving them.

feel trapped in relationships.

leave bad relationships and form new ones that don't work either.

wonder if they will ever find love.

Poor Communication

Codependents frequently: blame.

threaten.

coerce.

beg.

bribe.

advise.

don't say what they mean.

don't mean what they say.

don't know what they mean.

don't take themselves seriously.

think other people don't take the codependents seriously.

take themselves too seriously.

ask for what they want and need indirectly - sighing

for example.

find it difficult to get to the point.

aren't sure what the point is.

gauge their words carefully to achieve a desired effect.

try to say what they think will please people.

try to say what they think will provoke people.

try to say what they hope will make people do what they want them to do.

eliminate the word "no" from their vocabulary.

talk too much.

talk about other people.

avoid talking about themselves, their problems, feelings, and thoughts.

say everything is their fault.

say nothing is their fault.

believe their opinions don't matter.

wait to express their opinions until they know other people's opinions.

lie to protect and cover up for people they love.

lie to protect themselves.

have a difficult time asserting their rights.

have a difficult time expressing their emotions honestly, openly, and appropriately.

think most of what they have to say is unimportant.

begin to talk in cynical, self-degrading, or hostile ways.

apologize for bothering people.

Weak Boundaries

Codependents frequently:

say they won't tolerate certain behaviors from other people.

gradually increase their tolerance until they can tolerate and do things they said they never would.

let others hurt them.

keep letting people hurt them.

wonder why they hurt so badly.

complain, blame, and try to control while they continue to stand there.

finally get angry.

become totally intolerant.

Lack Of Trust

Codependents:

don't trust themselves.

don't trust their feelings.

don't trust their decisions.

don't trust other people.

try to trust untrustworthy people.

think God has abandoned them.

lose faith and trust in God.

Anger

Many codependents:

feel very scared, hurt, and angry.

live with people who are very scared, hurt, and angry.

are afraid of their own anger.

are frightened of other people's anger.

think people will go away if anger enters the picture.

think other people make them feel angry.

are afraid to make other people feel angry.

feel controlled by other people's anger.

repress their angry feelings.

cry a lot, get depressed, overeat, get sick, do mean and nasty things to get even, act hostile, or have violent temper outbursts.

punish other people for making the codependents angry.

have been shamed for feeling angry.

place guilt and shame on themselves for feeling angry.

feel increasing amounts of anger, resentment, and bitterness.

feel safer with their anger than with hurt feelings.

wonder if they'll ever not feel angry.

Sex Problems

Some codependents:

are caretakers in the bedroom.

have sex when they don't want to.

have sex when they'd rather be held, nurtured, and loved.

try to have sex when they're angry or hurt.

refuse to enjoy sex because they're so angry at their partner.

are afraid of losing control.

have a difficult time asking for what they need in bed.

withdraw emotionally from their partner.

feel sexual revulsion toward their partner.

don't talk about it. force themselves to have sex, anyway.

reduce sex to a technical act.

wonder why they don't enjoy sex.

lose interest in sex.

make up reasons to abstain.

wish their sex partner would die, go away, or sense the codependent's feelings.

have strong sexual fantasies about other people.

consider or have an extramarital affair.

Miscellaneous

Codependents tend to: be extremely responsible.

be extremely irresponsible.

become martyrs, sacrificing their happiness and that of others for causes that don't require sacrifice.

find it difficult to feel close to people.

find it difficult to have fun and be spontaneous.

have an overall passive response to codependency - crying, hurt, helplessness.

have an overall aggressive response to codependency - violence, anger, dominance.

combine passive and aggressive responses.

vacillate in decisions and emotions.

laugh when they feel like crying.

stay loyal to their compulsions and people even when it hurts.

be ashamed about family, personal, or relationship problems.

be confused about the nature of the problem.

cover up, lie, and protect the problem.

not seek help because they tell themselves the problem isn't bad enough, or they aren't important enough.

wonder why the problem doesn't go away.

Progressive

In the later stages of codependency, codependents may: feel lethargic.

feel depressed.

become withdrawn and isolated.

experience a complete loss of daily routine and structure.

abuse or neglect their children and other responsibilities.

feel hopeless.

begin to plan their escape from a relationship they feel trapped in.

think about suicide.

become violent.

become seriously emotionally, mentally, or physically ill.

experience an eating disorder (over- or undereating).

become addicted to alcohol and other drugs.

Appendix B

Personality Characteristics Questionnaire designed specifically for the present study.

SEC	TION A: PERSONAL BACKGROUND
1.	Age: 2. Sex: Male Female
3.	Ethnic background a. Caucasian
	b. Hispanic c. Black
	d. Asian e. Other
4.	Level of education
	a. less than a high school diploma b. high school diploma
	c. some college
	d. college degree e. post graduate degree
5	Annual Household Income
	a. \$10,000 or less
	b. \$10,000 - \$20,000
	c. \$20,000 - \$30,000
	d. \$30,000 - \$40,000
	e. \$40,000 or above
6.	What is your current relationship status?
	a. single
	b. married How long
	c. not married but in a committed relationship How
	long
7.	Have you ever been in a relationship with someone that
	abused alcohol and/or drugs? a. no
	b. yes
8.	If yes, how many relationships of this type have you had?
9.	What was the length of your longest relationship in which your partner abused alcohol and/or drugs?
10.	Are you currently in a relationship with someone that abuses alcohol and/or drugs?
	a. no b. yes How long
11.	If yes, how serious is your partner's substance abuse? a. it has never been a problem b. mild c. moderate
	d. somewhat extreme e. extreme
	C. Caller

12. Have you ever felt that you were addicted to any of following? Please circle the best response for each item.

a.	cigarettes	No 1	Possi 2	bly 3	Maybe 4	Prob 5	ably 6	Defini 7	tely
ъ.	food	1	2	3	<u> </u>	5	6	7	
c.	work	1	2	3	4	5	6	7	
d.	sex	1.	2	3	4	5	6	7	
e.	relationships	1	> 2	3	4	5	б	7	
f.	exercise	1	2 1	3	4	5	6	7	
g.	gambling	1	2	3	4	5	6	7	
h.	excitement	1	2	3	4	5	6	7	
i.	shopping	1	2	3	4	5	6	7	
j.	saving things	1	2	3	4	5	6	7	

13. Have you ever felt that you had a problem with any of the following:
Please circle the best response for each item.

		No.	Possi	bly	Maybe	Proba	ably	Definitely	
a.	alcohol	1	2	3	4	5	6	7	
					1				
b.	drugs	1	2	3	4	5	6	7	

14.	Do you feel that you	engage in an	y repetitive	behaviors
	however minor?	yes no		
	If yes, what are they			

SECTION B: FAMILY BACKGROUND

- 15. When you were growing up did your father/step-father abuse drugs and/or alcohol?
 - a. no skip to question 19
 - b. alcohol only
 - c. drugs only
 - d. drugs and alcohol.

16.	How serious was the substance abuse?	
	a. it was never a problem	
	b. mild	
	c. moderate	
	d. somewhat extreme	
	e. extreme	
<i>.</i>	to a cost of collaboration	
17.	What kind of treatment did he seek?	
11.		
	a. none	
	b. attended a 12-step program	
	c. private therapy	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
	d. attended a rehabilitation program	
	e. other	
18.	Did he stop abusing drugs and/or alcohol dur	ing your
	childhood?	
	a. yes	
	b. no	
	Note that the state of the stat	+ 1 - 2 - 1
10	When you were growing up did your mother/ste	
13.		b-morner
	abuse drugs and/or alcohol?	
97	a. no skip to question 23	* **
	b. alcohol only	
	c. drugs only	
	d. drugs and alcohol	
		•
20.	How serious was the abuse?	4.
	a. it was never a problem	
	b. mild	
	c. moderate	
	d. somewhat extreme	
	e. extreme	
	e. excreme	
01	What kind of treatment did she mark?	
٠1.	What kind of treatment did she seek?	
	a. none	
	b. attended a 12-step program	
	c. private therapy	
	d. attended a rehabilitation program	
	e. other	
22.	Did she stop using drugs and/or alcohol duri	ng your
	childhood?	4 7
	a. yes	
	b. no	
23.	How would won decembe were home and	
~~·	How would you describe your home environment	white Aon
	were growing up?	
	a. very unhappy	
**	b. unhappy	
	c. happy	
	d. very happy	
	e. extremely happy	

SECTION C: PERSONALITY CHARACTERISTICS Please circle the number that best describes you for each item. 1 - I am never like this 7 - I am always like this

	W	eve	r r			A	.lwa	vs
1.	I enjoy being in charge of things.				4	5	6	7
2,.,	In a relationship I am loyal even if it is personally harmful.	1	2	3	4	5	6	7
з.	It is easy for me to express anger.	1	2	3	4	5	6	7
4.	If I want something done right I do it myself.	1	2	3	4	5	6	7
	Even if I am tired I will help other people.	1	2	3	4	5	6	7
6.	I consider myself more responsible than the average person.	ĭ	2,	3	4	5	6	7
7.	I often think of myself as a failure.	1	2	3	4	5	6	7
8.	Sometimes I neglect my own responsibi in order to take care of	lit	ies					
	other's needs.	1	2	3	4	5	6	7
9.	I like being surprised.	1	2	3	4	5	6	7
10.	My problems are just as important as other people's problems.	1	-2	3	4	5	6	7
11.	It is easy for me to trust others.	1	2	3	4	5	6	7
12.	I feel good about myself only when other people like me.	1	2	3	4	5	6	7
13.	I hate being alone.	1	2	3	4	5	6	7
14.	I have no difficulty asking for the things I want.	1	2	3	4	5	6	7
15.	I believe it is important to be needed.	1	2	3 .	4	5	б	7
16.	I enjoy having fun.	1	2	3	4	5	6	7
17.	Other people's actions and attitudes determine how I respond.	1	2	3 ,	4	5	6	7

	Ne	ver			•	A	lwa	vs
18.	I save things even when I no longer have a use for them.			3	4	5		•
19.	I like doing things by myself.	1	2	3	4	5	6	7
20.	I will ignore my own values in order to be in a relationship.	1	2	3	4	5	6	7
21.	If someone close to me does somethin wrong I feel that it is my fault.		2	3	4	5	6	7
22.	Even though I am unhappy I will pret that everything is fine.		2	3	4	5	6	7
23.	I judge myself by other people's standards.	1	2	3	4	5	6	7
24.	I am more comfortable when someone else is in charge.	1	2	3	4	5	б	7
25.	I like who I am.	1	2	3	4	5	6	7
26.	Sometimes the fear of rejection determines what I say and how I will act.				4	5.	6	7
27.	I put other's wants and needs before my own.	1	2	3	4	5	6	7
28.	I have difficulty making decisions.	1	2	3	4	5	6	7
29.	My good feelings about myself are based on being liked by others.	1	2	3	4	5	б	7
30.	I expect perfection from myself.	1	2	3	4	5	6	7
31.	It is easy for me to tell other people how I feel.	1	2	3	4	5	6	7
32.	I have difficulty in forming or maintaining close relationships.	1	2	3	4	5	6	7
33.	I expect too much from others.	1	2	3	4	5	Õ	7
34.	I am not upset by rejection.	1	2	3	4	5	6	7
35.	I worry about how others respond to my feelings.	1	2	3	4	5	6	Ÿ
36.	People usually disappoint me.	1	2	3	4	5	6	7

	N∈	ever				A	lwa	ys .
37.	Sometimes I have difficulty knowing how I feel emotionally.	1			4			
38.	I'm not always the person I appear to be.	1	2	3	4	,5	6	7
39.	I assume responsibility for others feelings.	1	2	3	4	5	6	7
40.	I place more importance on the value of other's than on my own values.	es 1	2 · .	3	4	5	6	7
41.	I feel that my asking for help is a sign of weakness.	1	2	3	4	5	6	7
42.	It is difficult to acknowledge good things about myself.	1	2	3	4	5	6	7
43.	I believe it is important to keep yo feelings and problems to yourself.	our 1	2	3	Ţ	5	б	7
44.	When I am in a relationship I spend a great deal of time pleasing my par and seeking their approval.	tner	- 2	3	4	5	6	7
45.	I feel guilty or uncomfortable when I am not being productive.	1	2	3	4	5	6	7
46.	I believe that self-sacrifice in a relationship is a sign of true love.	1	2	3	4	5	6	7
47.	I would not change my opinions (or tway I do things) in order to please someone else or win their favor.		2	3	4	5	6	7
48.	In order to get along and be liked, to be what people expect me to be.			3	4	5	6	7
49.	Even if I am not enjoying myself, I pretend to be having a good time.		en 2	3	4	5	6	7
50.	I feel that the people in my life appreciate the things I do for them.	1	2	3	4	5	6	7

Section D:

1. Do you consider yourself an adult child of an alcoholic or drug abuser?

a. yes
b. no

۵.	Have you ever attended a 12-step program? If so, which one	yes	no
	How many meetings did you attend		
	Are you still attending? yes no		- Control of the Cont
з.	Do you consider yourself a co-dependent?		
٠.	a. yes		
	b. no		
	c. I don't know		
Δ.	What is your definition of co-dependency?		
4.	What is your definition of co-dependency?		
4.	What is your definition of co-dependency?	· .	
4.	What is your definition of co-dependency?	······································	
4.	What is your definition of co-dependency?	:	
4.	What is your definition of co-dependency?		
4.	What is your definition of co-dependency?		

References

- Beattie, M. (1987). <u>Codependent no more</u>. New York: Harper & Row.
- Berkowitz, A. & Perkins, H. W., (1988). Personality characteristics of children of alcoholics.

 <u>Journal of Consulting and Clinical Psychology</u>, <u>56</u>, 206-209.
- Brown, S. (1988). <u>Treating adult children of alcoholics: A developmental perspective</u>. New York: John Wiley & Sons.
- Cermak, T. L., (1986). Diagnostic criteria for codependency. <u>Journal of Psychoactive Drugs</u>, <u>18</u>, 15-20.
- Gierymski, T., & Williams, T. (1986). Codependency.

 <u>Journal of Psychoactive Drugs</u>, <u>18</u>, 7-13.
- Gorski, T. T., & Miller, M. (1984). Co-alcoholic relapse: Family factors and warning signs. In <u>Co-dependency</u> (pp. 81-88). Hollywood, Florida: Health Communications.
- Katz, S. J., & Liu, A. E. (1991). The codependency conspiracy: How to break the recovery habit and take charge of your life. New York: Warner Books.
- Potter-Efron, R. T., & Potter-Efron, P. S. (1989).
 Assessment of co-dependency with individuals from alcoholic and chemically dependent families.
 Alcoholism Treatment Quarterly, 6, 37-57.
- Prest, L. A., & Storm, C. (1988). The codependent relationships of compulsive eaters and drinkers:

 Drawing parallels. American Journal of Family Therapy, 16, 339-350.
- Schaef, A. W. (1986). <u>Co-dependence: Misunderstood-</u> mistreated. San Francisco: Harper & Row.
- Schaef, A. W. (1987). <u>When society becomes an addict</u>. San Francisco: Harper & Row.
- Smalley, S. (1987). Dependency issues in lesbian relationships. <u>Journal of Homosexuality</u>, 14, 125-135.

- Subby, R. & Friel, J. (1988). Co-dependency. In <u>Co-dependency</u> (pp. 31-46). Deerfield Beach, Florida: Health Communications.
- Subby, R. (1988). Inside the chemically dependent marriage. In <u>Co-dependency</u> (pp. 25-30). Deerfield Beach, Florida: Health Communications.
- Wegscheider-Cruse, S. (1984). Co-dependency: The therapeutic void. In <u>Co-dependency</u> (pp. 1-4). Deerfield Beach, Florida: Health Communications.
- Werner, E. E. (1986). Resilient offspring of alcoholics: A longitudinal study from birth to age 18. <u>Journal of Studies on Alcohol</u>, 47, 34-40.
- Whitfield, C. (1989). Co-dependence: Our most common addiction-some physical, mental, emotional and spiritual perspectives. Alcoholism Treatment Quarterly, 6, 19-36.
- Wholey, D. (1988). <u>Becoming your own parent: The solution</u> for adult children of alcoholics. New York: Doubleday.