

# **Relationships in Recovery: Identifying Hidden Risks for Your Marriage**

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Recovery programs often focus on helping families get assistance for the person with a substance use disorder and transitioning into recovery. However, there's a significant gap in recovery resources and literature addressing what happens after treatment, especially for families. Recovering families need information regarding the complexities they face in early recovery, the dynamics that set up conflicts, and what they need to foster a resilient recovery journey.

## **The High Risk in Early Recovery:**

Early recovery is the most vulnerable time for substance use disorder relapse. It is also a time of high risk for families, with a considerable percentage of marriages breaking up after acute care treatment. Several factors contribute to this dissolution:

## **Short-lived Recovery:**

Short-lived recovery attempts may give the non-addicted spouse permission to leave the relationship. Many people who are going to relapse after inpatient treatment do so in the first thirty days. Many people with substance use disorder seek abstinence and recovery as a direct response to a spouse's ultimatum or leaving the relationship. Relapse is often a deal-breaker for the spouse who was ready to leave before treatment.

## **Non-addicted Spouse's Recovery:**

Family members seeking their own recovery may discover that even with a short time in recovery, they have gained enough self-confidence and self-efficacy to know that they can survive and thrive with or without their loved one with substance use disorder. New self-care skills and self-esteem give

them the boost needed to discontinue a relationship that is not working for them.

### **Two People with Substance Use Disorder in a Marriage:**

In cases where both spouses are afflicted with substance use disorder, the recovery of one challenges the defense mechanisms and confronts the active addiction of the other, forcing a choice between the drug of choice and the spouse. The recovering spouse may believe that they have to choose between their sobriety or their spouse. If the other spouse is not being treated for their own substance use disorder, they may prefer to continue to use rather than participate in a lifestyle that restricts or prohibits their use.

### **Behavioral Shifts:**

The person recovering from substance use disorder may replace their drug of choice with another drug or with a destructive behavioral addiction, intensifying the strain on the relationship and demoralizing the spouse who had high expectations of all the changes that were going to come about because of sobriety. Process addictions can be as devastating to relationships as substance addictions.

### **Expectation Mismatch:**

Unrealistic expectations, lack of knowledge about stages of recovery and developmental tasks, and new skills needed to navigate all the changes contribute to the dissolution of marriages in early recovery. Partners may feel frustrated and disappointed if either person doesn't meet expectations for change quickly, fostering a belief in the couple's basic incompatibility.

### **Emotional Roller Coaster:**

Early recovery often introduces an emotional roller coaster for everyone involved. Unresolved issues and old attachment injuries may move into the foreground before family members reclaim their ability to communicate effectively. The changes in roles, rules, and functioning in the system may

contribute to identity crises and existential questioning, potentially leading to separation or the entry of new relationships. The fear of abandonment and poor emotional regulation increases the vulnerability of relapse and family member disengagement. The recovering person or their spouse may have many conflicting feelings and begin to believe that they no longer love their spouse.

### **One Recovery Only in the Family:**

It is worth repeating that families where both partners are pursuing their own recoveries have better outcomes than families where the person recovering from substance use disorder is the only family member seeking recovery. While families don't fit neatly into typologies, there are some common themes that run through families where both spouses are in recovery and families where the person recovering from substance use disorder is the only partner pursuing recovery.

When both partners are working on their own recovery, they are each typically attending a 12-step group and focusing on their issues for personal development. The person with substance use disorder is learning abstinence skills and trying to repair damage caused by addiction. Both are trying out new relationship behavior, and practicing new patience, tolerance, and acceptance of each other. They are guided by groups, sponsors, and professionals on what to expect in recovery and defining their "new normal" together.

The non-addicted spouse who is not pursuing recovery will often fall behind in their understanding of addiction and recovery principles. They may not have the same vocabulary as their spouse and have difficulty discussing recovery topics. They may continue to identify the partner with substance use issues as "The Problem" and put the responsibility for resolving all the problems in the relationship on them. They may resist lifestyle changes conducive to recovery, undervalue continuing care, and resent the support group involvement of the recovering partner. When only one spouse is working on recovery, both partners are often unwilling to discuss the past and confront unresolved relationship issues. They often have little confidence in their ability as a couple to affect change.

Recovery programs typically focus on supporting individuals with substance use disorder during treatment and their transition into recovery. However, there exists a significant gap in resources and literature addressing the challenges faced by families post-treatment. The complexities encountered by recovering families in early recovery contribute to conflicts within relationships. Early recovery poses a high risk for both substance use disorder relapse and marital dissolution, with several factors exacerbating these risks. Short-lived recovery attempts, newfound self-confidence in the non-addicted spouse, dual substance use disorder within a marriage, behavioral shifts, mismatched expectations, and emotional upheaval all contribute to marital strain during this critical period. Importantly, families where both partners engage in their own recovery tend to fare better, highlighting the importance of mutual support and understanding within the recovery journey. However, when only one spouse pursues recovery, challenges arise, including communication barriers, resistance to lifestyle changes, and unresolved relationship issues. Recognizing and addressing these challenges is essential for supporting families in navigating the complexities of early recovery and fostering resilience within relationships.



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