

FAR SOUTHSIDE ROSC COMMUNITY MEETING

2/24/2025

- Welcome – What is ROSC – Robert Buford RC, CPRS, NCRS
- Introduction of Audience – Frederick Buford RC, CPRS
- Survey Results – Dr. White CADC, NCRS, RCT
- Presenting of Guest Speaker – De'Shara Shells FD
- Closing Remarks – Dr. White CADC, NCRS, RCT

Presenter: Ms. Patrice Beaman

The Impact of Addictions on the Adult Children of Substance Users

Please leave your business cards so we can connect.

Thank You





ROSC Monthly Meeting

Date: 02/24/2025

Location: TEECH Foundation

1750 West 107th Street Chicago IL 60643

In person/virtual

<https://us02web.zoom.us/j/5219481652?pwd=mtSechvUSF9KmbDjLEx8CMpgMa>

Meeting ID: 835 9464 6165

Passcode: 235477

Survey Response

FSSRI/FAR SOUTHSIDE ROSC: The community is responding and speaking out

Survey: November 2024 to January 2025

November 2024: conducted 21-question survey for the community to evaluate accomplishments, barriers, and gaps.

January 2025: received 1,348 responses given by individuals in recovery, their families, and community.

- Far Southside ROSC plans to address these gaps through education, spread awareness, resources, and support for individuals in active addiction and recovery while including the families and their community.
- Survey Summary displays respondents agree that substance users and mental those who suffer from mental illness should be respected 994 agreed. More MAR programs needed 845 agreed. More Narcan services needed 845 agreed. More mental health and Substance use services needed 958 agreed. Strong increase in government funding for social programs that offer Recovery, substance and mental health services 1025 agreed.
- Far Southside ROSC continues to increase their efforts with collaborations throughout the city and communities to bridge the gaps, offer resources and advocate for the needs of the people.
- The survey responses indicate that the Far Southside ROSC (FSSRI) has positively impacted local communities through collaboration and partnerships.
- Far Southside ROSC aims to create safe and supportive communities by enhancing the quality of life for everyone.

Community topic: The Impact of Addiction on Adult children of Substance Users

Guest speaker/trainer: Patrice Benson CADC, Gateway Foundation Treatment Center

Fact: Substance use disorder within the family causes a shift in normal behavior and not only the one in active use is affected. Everyone that is connected to the one in active addiction becomes a product of dysfunction.

Substance user survival roles from a child that is affected have been broken down into five (5) sections that can contribute to the cycle of dysfunction and misrule.

1. Enabler: Counterproductive behavior displayed in the action of covering up, making excuses, removing responsibility and accountability of the substance user.

Why is this unhealthy: It plays a vital role in substance user addiction. It sends a false message that the user never has to confront their substance use issues because someone will always be there to save them. This can keep the user in denial and comfortable in their pain.

2. The Hero: Typically, this is the oldest child in the family who would take this role. They will typically be model students, over-entitled, overachievers, perfectionist. They have made it their mission to overcome the shame and guilt that comes with substance misuse. The child may even take on the role of taking care of or feeling obligated for the parent or parents that misuse substances and/or alcohol.

Why is this unhealthy: Although they are productive and may even be successful, they are emotionally unattached. Also, this can cause unhealthy relationships where there is an imbalance which can cause depression, anxiety, and other mental health concerns as they become an adult.

3. Scapegoat: The troublesome child whose behavior displays the levels of dysfunction through bad behavior. This child has taken on the role of creating a focus that is outside of misuse and addiction within the home.

Why is this unhealthy: This can lead the child into substance misuse themselves as well as criminality. The child has not learned how to express themselves in a positive manner nor grow emotionally or mentally.

4. The lost Child: this child feels they have no voice and the best way to survive in the home of substance and/or alcohol misuse is to keep a low profile. They often develop feelings of not being loved, understood, or heard.

Why is this unhealthy: This can lead to patterns of abuse sexually, physically, and emotionally. Creating the norm that not speaking out is the best way to deal with trauma.

5. Mascot: This child has developed a norm of "I laugh to keep from crying". This is a child that is coddled and kidded. They have taken on a role of entertainment for family members. This may be the youngest or one of the younger children who maybe can't articulate there is a substance use disorder due to older siblings sheltering them. However, they are aware of dysfunction within the family unit.

How is this unhealthy: The child's growth is underdeveloped and as they grow in age the maturity level resembles that of a child. This can lead to criminality because the now adult has no understanding of consequence and how to govern themselves and their actions. It can also lead to unhealthy relationships due to the inability to be emotional intelligent.

Fact: Through the 5 roles that were discussed if recovery and a healthy and well-being way of living is not presented or acquired the pattern of dysfunction will continue and will show up in many ways that are unhealthy for the next generations to come. Not all children that have parents or caregivers that suffer from substances and alcohol misuse will battle substance use disorder although it is likely. However mental health challenges and behavioral issues will show up in some form of their lives as they become adults.

Suggestions for breaking the cycle:

- Seek Recovery and support services for not just the one in active use but for the whole family
- Be transparent about what addiction is and how it can affect all those connected to the individual with a substance use disorder
- Continuing to spread awareness and education on how families are affected and how they can get relief
- Continue to have conversations that expose the dysfunction of substance use and how recovery works
- Educate, spread awareness, have these uncomfortable conversations about mental health, emotion regulation, stigma - biases, cultural differences, and recovery

The Communities Have Spoken



Survey Results

In November 2024, the FSSRI conducted a 21-question survey to evaluate community accomplishments, barriers and gaps, while identifying the necessity for FSSRI's ongoing involvement in these communities. By January 2025, we received 1,348 responses. The survey results, presented graphically, identified significant issues as perceived by those in recovery, their families, friends, and community members. The Far Southside Recovery-Oriented Systems of Care (ROSC) Council plans to address these gaps through education, support, awareness, and resources for individuals in active addiction, recovery, family, friends and the community.

Survey Questions

1. People who use drugs deserve respect.
2. People with a mental illness deserve respect.
3. Medication Assisted Recovery-MAR (which is the use of medication to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder) is an effective treatment for substance use disorders.
4. It is difficult to find healthcare providers who offer Medication Assisted Recovery-MAR (which is the use of medication to treat substance use disorders e.g., methadone or buprenorphine to treat opioid use disorder) in my community.
5. Harm reduction services like Narcan and syringe service programs reduce the risks of drug use.
6. It is difficult to find harm reduction services like Narcan and syringe service programs in my community.
7. It is difficult to find mental health and substance use treatment services in my community.

Survey Questions Cont'

8. We should increase government funding on treatment options for mental health and substance use disorders.

9. Everyone in my community can get help for mental health regardless of income level, insurance status, race, ethnicity, primary language, disabilities, gender identity, sexual orientation, or citizenship status.

10. Everyone in my community can get help for substance use regardless of income level, insurance status, race, ethnicity, primary language, disabilities, gender identity, sexual orientation, or citizenship status.

11. I have seen a decrease in overuses since Harm Reduction and Narcan have been put in my community

12. I have seen an increase of collaboration with organizations, community members in my communities since the Far Southside ROSC began.

13. There is a need for more recovery support and mental health awareness/services in my community

14. We need more resources for youths ex., after school programs, activity centers, mentorship

Survey Questions Cont'

15. I have seen adolescent health amongst youths increase in my community within the past year.
14. We need more resources for youths ex. afterschool programs, activity centers, membership.
15. I have seen addictions/violent health amongst youths increase in my community within the past year.
16. I have seen crime increase in my community within the past year.
17. I have seen an increase of unhoused (Homeless) in my community within the past year.
18. My community is welcoming to returning citizens, whereas open to providing employment and residential housing.
19. Law enforcement, alderman and legislature have been sensitive to my community needs.
20. I use community platforms to get my voice heard about my community concerns ex., RUJC meetings, block clubs' meetings, CAPS, town hall meetings.

Summary of Survey

Most respondents believe in respecting people who use substances (984 strongly agree, 225 agree) and those with mental illness (937 strongly agree, 306 agree).

Many see MAF as effective for substance use disorder (410 strongly agree, 930 agree) but find it hard to access healthcare providers offering MAF (365 strongly agree, 905 agree).

Harm reduction services like Naloxone and syringe programs are believed to reduce drug use risks (845 strongly agree, 422 agree), though access is difficult (153 strongly agree, 370 agree).

There is a significant need for more mental health and substance use treatment services (958 strongly agree, 208 agree), with strong support for increased government funding (1025 strongly agree, 101 agree).

Perceptions indicate that not everyone can access mental health or substance use help regardless of circumstances. Decreases in overdoses have been observed since implementing harm-reduction services.

Increased collaboration within the community has been noted since the Fair Southside POSC began.

There's a strong demand for more youth resources (e.g., after-school programs, activity centre, mentorship) amid rising addiction and mental health issues among youth.

Crime and homelessness have both increased over the past year.

Opinions on community support for returning citizens and the sensitivity of law enforcement and legislators to community needs are mixed. Many use community platforms to voice concerns about these issues.

Fill In The Blank – Question 21

Surveyors have been collecting information, opinions, and insights. While multiple-choice questions offer a structured response, Question 21 allows respondents to express their thoughts in their own words. This open-ended question has helped researchers to gain deeper insights into what motivates people. Question 21 is often used to gather responses from respondents who have had the opportunity to reflect on their experiences, illustrating their interests, passions, and abilities.



2.1. What are some additional barriers/people you would like to be addressed in your community?

Key Areas

Question 21

Possible Solutions

Social and cultural institutions

Lack of substance abuse and mental health services specifically for women offenders

Health sector

Home for LGSD YQ Recovery housing for young people at risk

Services for other language learners (Spanish)

Housing

Information about programs that can assist the community in securing the available resources

Training affected families and housing

Housing case management

Resources for success

Social isolation

Low housing

Meeting the housing needs of the community and working individuals, including safe, affordable housing

Collaborative efforts with the community to encourage community members to relocate to their community

Community education and training programs

Establish substance abuse programs and culturally sensitive support groups

Advocate for initiatives and funding to address domestic violence

Create safe and supportive housing options

Provide family/counseling services and bilingual staff

Increase availability of affordable housing

Increase outreach and community liaison activities

Encourage community development in families

Engage supportive housing programs

Develop self-sufficient programs and services

Attract and support grocery stores in underserved areas

Incentive funding for homeless shelters and affordable housing programs

Built partnerships with faith-based organizations

Far Southside Impact on the Communities



Survey responses indicate that the Far Southside ROSC Initiative (FSSRI) has positively impacted local communities through collaborations and partnerships. However, respondents have identified areas for improvement. By addressing these key areas, we aim to create a safer, healthier, and more supportive environment for all community members. Through collective efforts, we can make significant advancements and enhance the quality of life for everyone.

Based on the survey conducted by the Fat Southside Recovery-Oriented Systems of Care Initiative (FSSRI), several key areas have been identified that require focused efforts to bring about changes within the community. Here are the nine communities identified as crucial focus areas:

2025 Focus Areas

1. Increase the Number of MAR Providers
2. Enhance Harm Reduction Services
3. Expand Mental Health and Substance Use Treatment Services
4. Strengthen Community Support for Substance Use Issues
5. Enhance Community Support for Mental Health
6. Boost Recovery Support and Mental Health Awareness
7. Enhance Youth Resources
8. Address Rising Crime Rates
9. Tackle Homelessness

Strategies

1. **Public Awareness Campaign:** FSSRI will continue conducting public awareness campaigns through various media channels, including social media, local newspapers, radio, and television, to inform the community about our initiatives.
2. **Community Meetings and Forums:** FSSRI will continue organizing community meetings and forums to provide platforms for open dialogue with community members. These gatherings will allow us to share our plans, gather feedback, and address any concerns.
3. **Partnerships with Local Organizations:** FSSRI will continue collaborating with local organizations, such as non-profits, schools, and healthcare providers, to amplify our message and reach a broader audience.
4. **Educational Workshops, Seminars, and Events:** FSSRI will continue hosting educational workshops, seminars, and events on topics related to community concerns. These activities aim to raise awareness and provide valuable information to community members.
5. **Regular Updates and Reports:** FSSRI will continue providing regular updates and reports on the progress of community concerns to keep the communities informed and engaged. This will be achieved through newsletters, websites, and social media.
6. **Engage Community Leaders:** FSSRI will continue involving community leaders and influencers in our efforts to build trust and credibility. We hope they will act as advocates and help raise awareness about community concerns.
7. **Feedback Mechanisms:** FSSRI will continue establishing feedback mechanisms, such as surveys and verbal communication, to understand the community's needs and concerns better. This approach demonstrates that we value your input and are committed to addressing the community's concerns.

Full Scope of the Needs Assessment
<https://www.govst.edu/BOSC/FSSRI-BOSC-Council/>

The objective of FSSRI/TEECH is to create communities that are safe, empowered, and nourishing. We strive to build a robust support network within our communities to aid individuals facing mental health challenges, active addiction, and recovery, along with their families, friends, and the broader community. We are dedicated to reconstructing communities that have lost their voices by providing a platform for them to be heard.

Thank You
For Supporting TEECH Foundation
www.teechfoundation.net

THE IMPACT OF SUBSTANCE USE DISORDERS IN THE FAMILIES

"THE FIVE FAMILY ROLES"



The Impact of Substance Use Disorders in the Families

When there is an substance use disorder in the family, the natural order of things is turned upside down in disarray, and are most times unpredictable. Rules and boundaries that normally help families to function are distorted or abandoned in response to the substance user's disruptive behavior. As a result of these behaviors, the family begins to take on roles that they were never intended to assume. After much time and energy is spent covering up for the substance user, the family loses their way. These changes in rules and roles become the family's vain attempt to find stability and safety in an atmosphere of fear, tension, chaos, mistrust and unpredictability brought on by the substance use disorder.

Addict's Family Survival Roles

Scapegoat

Hero



Lost Child



Scapegoat

Hero



Lost Child



Enabler

Roles

Mascot



THE ENABLER

The enabler means well but their efforts are counterproductive - for the substance user and for themselves. This person is usually the closest to the substance user, and their aim is to help the substance user. But the reality is that they do things that allow the substance user to continue their behavior without facing the consequences. For example, they might cover up or make excuses for the substance user's behavior at work or school or with friends. Or the enabler will take care of tasks that should be attended to by the substance user, like paying bills, or work around the house, or getting the car serviced - or a hundred other things that the substance user should be taking care of but is unable or unwilling to do. The enabler does all this because it is painful for them to confront the reality of their predicament, and it is easier to protect themselves and their family. In the end, though, the enabler is left exhausted and angry - and the substance user is no closer to getting better. In fact, the substance user is getting the message that they don't have to confront their drug problem because someone will always be there to save them.

Enabler



THE HERO

This person is usually the oldest child in the family and their role is to cover up to be over responsible. They will typically be middle students and have **very** conscientious. In families enriched by shame and guilt over substance and disorder in the home, this is a family member they can point to with pride. This child may take on the responsibilities of the substance user's mother/father and become the family breadwinner at an early age. Or the hero may become the surrogate **adult**, giving the parents the emotional support she/he should be getting from their spouse. Heroes see themselves having it all together, as being mature and responsible. The price for putting all their energy into achieving things is that these heroes of the family rarely feel good inside. Instead of being in touch with who they are and what they require, they have sacrificed their emotional lives trying to protect the family unit.

Hero



THE SCAPEGOAT

In families made dysfunctional by substance use, one of the children will assume the role of the troublesome child. Here is someone whose bad behavior can be acknowledged by family members — unlike that of the substance user. The scapegoat brings the family together in a perverse way and can make them feel good about themselves by comparison. This child also provides family members with a focus that enables them to avoid facing their own problems. In a situation at the breaking point with stress over the substance user's behavior, the scapegoat becomes a means of releasing anger and frustration.

Scapegoat



THE LOST CHILD

This role is assumed by the child who has decided that the best way of surviving in the home made unsafe by substance use is to keep a low profile. This child is often the one who has not received as much love and care as his siblings. The lost child goes unnoticed and can disappear for hours. They learn not to ask questions that might upset others, and they recognise that the best way to avoid attracting critical attention is to keep to themselves. Because they are "out of sight" they are also out of mind", and usually feel unimportant.



Lost Child

THE MASCOT

Often the youngest child in the family assumes this role. By the time this child comes along, the family dynamic has deteriorated to a serious state of dysfunction. This is the child who is coddled and adored, who is a source of amusement for family members. The older siblings are well practiced in their various compensatory survival roles, and their tendency is to want to protect the youngest member. They may withhold information from this child and pretend for his sake that all is well. Yet, despite all the efforts to protect this child from the truth, he cannot help but discover over time that something is drastically wrong with his family dynamic. Though he may not be able to name it at a substance use disorder, it affects him just the same.



5 Mascot

Addict's Family Survival Roles

Scapegoat

3

Hero

2



Lost Child

4



Enabler



Roles

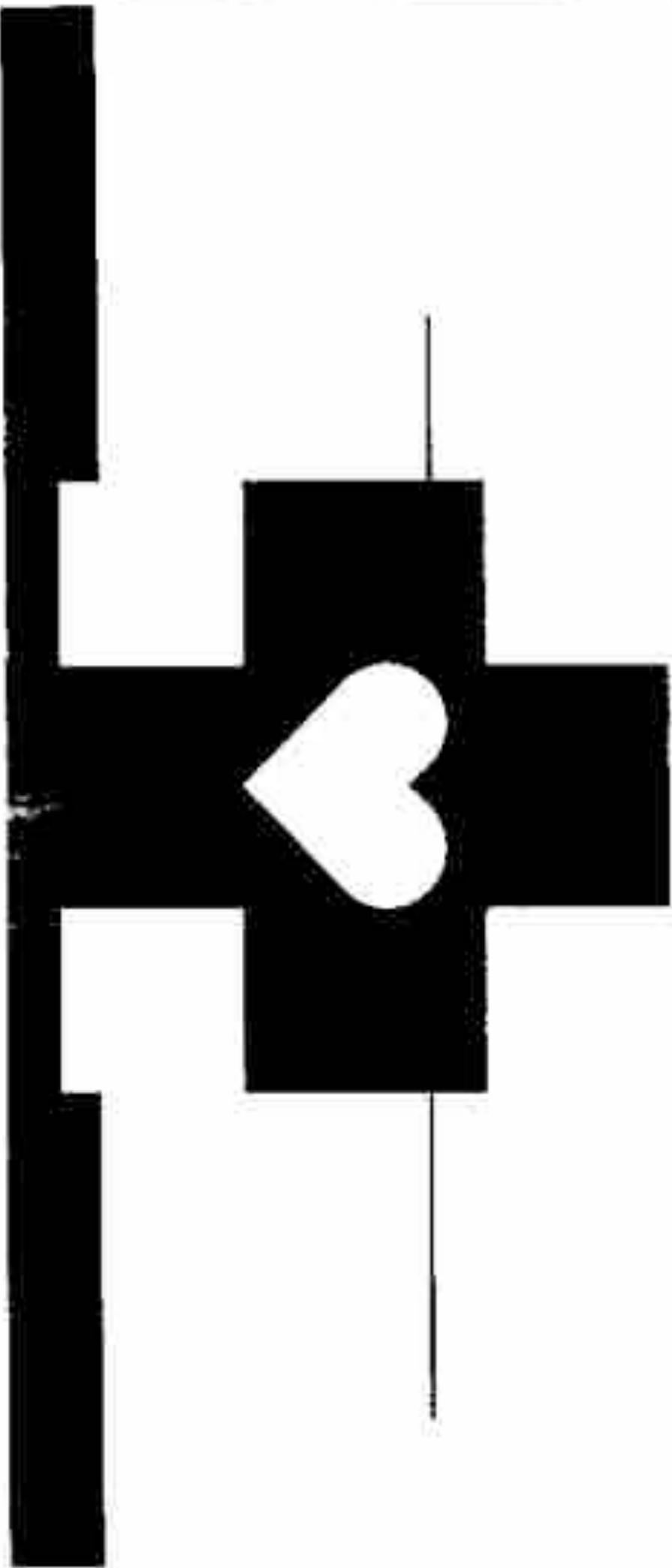


Mascot

5



LET THE HEALING BEGIN



THE TINY SEED KNEW THAT
IN ORDER TO GROW IT
NEEDED TO BE DROPPED
IN NIGHT, COVERED
IN DARKNESS, AND
TO REACH





THE HEALING PROCESS

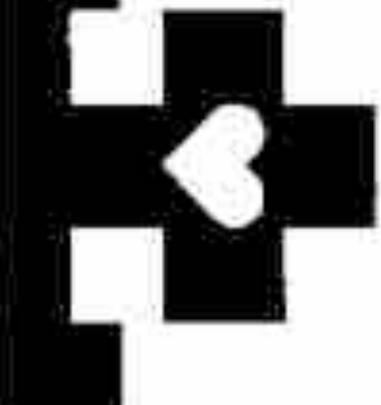
1. MEA Culpa (Latin) to acknowledge error.
2. Acknowledge that wounds have occurred.
3. Have a willingness to change.
4. Respond with your H.E.A.R.T.

H- hear

E- empathize

A- apologize

R- resolve



Questions & Answers



References:

1. <http://hamrah.co/en/pages/addicts-family-roles/>
2. Katherine Schafler -
<http://www.katherineschafler.com/the-6-family-roles-in-addiction/>

Thanks for Listening!

The End