An exploration of the lived experience of codependency: implications for occupational therapy.

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Introduction

Codependency: a contested construct

Research findings

What is the lived experience of codependency among people who have sought support from a 12-step recovery group for codependents?

Conclusions and recommendations
What is codependency?

• Literature presents different definitions:
  ▪ Disease or addiction
  ▪ Family problem
  ▪ Personality disorder
  ▪ Social interaction

• No agreement on definition or diagnosis

• Dear et al (2004):
  External Focusing, Self sacrifice, Interpersonal conflict
  Emotional constraint

• Widely criticised (Orford et al 2005)
What is codependency?

Historical Context

1940 - American health professionals identified common behaviours in wives of alcoholics.

Charles Whitfield documented clinical cases.

Women who love too much book.

1980 - 1986/7 - CoDA is created. Cemark’s work codependency concept considered as an independent disorder.

1990 - Strong presence of quantitative research.

Today codependency continues to draw research and clinical attention.

Why research codependency?

‘I think all addiction patterns come from codependency, I think they come from codependency. It [Codependency] is kind of the mothership of all addictions ...’

Misha (research participant)
Participants

- 8 Adults (3 male and 5 female)
- Individuals who identified themselves as codependents
- Attendance to 12 step groups

Methodology/ Design

- IPA methodology (Smith et al 2009)
- Hermeneutics, phenomenology, idiography
- Data collection
  - 3 semi-structured interviews 6 months
  - Visual methods
Findings – Model of personhood

- Profound lack of sense of self
- Real and tangible experience
- Emotional and occupational imbalance
- A sense of abandonment and control in childhood
‘An undefined and fragile sense of being’.

‘I think being fragmented is real common feeling that I have, I am all over the place. I don’t have a sense of myself as being whole and good and constant.’
‘Becoming like chameleons’

‘…tailoring myself to suit the environment that I am in, managing people’s impression of me…Modifying myself in a chameleon like fashion to fit in, losing a sense of constancy around my values, my needs….’
Seesawing through extremes in life.

‘Maybe [my life] is a seesaw ... And it’s not very consistent, the two ends of it ... I feel very out of control, but if it is balanced, it would be easier’. 
‘Doing poorly’

‘...because is the doing something else to make you feel like life is enough. So whether it is on other people, on its on drugs or into alcohol, it’s on anything you are obsessed with ...’
Theoretical Interpretation

Occupational Science

- Occupation promoting health and well being
  (Wilcock 2005a, 2005b, 2007)
- Doing, being and becoming
  (Wilcock 1998, 1999)
- Harmful occupations, occupational imbalance?
  (Twinley 2013, Whit et al 2013, Wasmuth et al 2014)
Application for practice

Non-traditional client group:

• Reflection of occupational choices – underlying meanings
• Risk factors associated with occupational imbalance
• Stress management techniques, mindfulness
• Balance engagement in leisure, productivity, self care
Conclusion

• A complex psychosocial construct with multiple meanings.
• Attribute meaning to their life experiences.
• Associated with identity, family experiences and lack of occupational and emotional regulation.
• There are important implications for occupational therapists clinicians working in mental health practice.
• An emerging role for occupational therapists?
Thank you

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References


