



# Substance Abuse, Depression, and Anxiety: A Case Analysis on Clinical Implications

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## Abstract

Olive is admitted due to conflict with parents, substance abuse, depression, and anxiety. She is a 15-year-old girl and is predisposed to the problems above. Notably, the girl's biological father was physically violent while both biological parents were alcoholics. The father's physical violence was especially pronounced towards Olive's biological mother. At the age of nine, Olive's parental rights were terminated. Due to this major life event, Olive and her siblings (two brothers and a sister) resorted to a parentless children's home. Afterward, neither her mother nor her father contacted them to check on their well-being. A few years later, Olive's biological mother died. By the time the mother died, Olive's brothers had been adopted, just after seeking refuge in the home for the parentless. Imperative to note is that Olive and her sister were also adopted in the following year but by a different family from that which adopted their brothers. The resultant scenario was a case of two adopted sisters with a different family; two adopted brothers with a different family, a departed mother, and an absentee father. Olive's father and mother were of the Caucasian origin but the parents who adopted her brothers, as well as those who adopted Olive and her sister, were Hispanic. Both families are also Christian.

**Keywords:** Substance, Anxiety, Depression, Alcoholics etc.

## 1 Introduction

Olive's biological parents worked in a local factory but lost the jobs after the factory was closed for legal reasons. The new parents who adopted the sisters and brothers were self-employed, working in the business sector. Given the state of Olive's family's domestic violence, all the children did not manage to pursue education past high school. Before and after the adoption, the Olive was still unemployed. Neither Olive nor her siblings served in the military sector. Olive had been exposed to considerable trauma for a significant period, especially during the early childhood stage. For the many times that he beat his wife, Olive's father's actions would result in serious injury in most of those violent occasions. To the violence, Olive

emerged as a frequent witness. The eventuality is that she demonstrated significant responses to the traumatic nature of the childhood environment in which she was raised; inclusive of self-mutilation. At the time, Olive would wander the streets freely, and adult supervision was absent. She would also go to school just once in the week.

About four years into the adopted family, Olive began developing depressive symptom. The condition worsened quickly and this outcome was evident when she began isolating and withdrawing from her peers. She also began performing poorly in academics, and this drop in performance was abrupt. Other important features with which she presents include one suicide attempt, cutting on herself, sleep disturbances, and difficulty concentrating. Additional features include

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substance abuse, sneaking out, lying to the new parents, and acting out behaviorally. Olive insists that her decision to resort to substance abuse is an informed action because it makes her perceive life as being fine. However, Bitter (2014) cautioned that the decision by most of the family members to engage in substance abuse tends to reflect possible distress, an attribute that is characteristic of Olive.

Olive's family does not have a history of disabilities, with a similar outcome evident for the new families into which she is adopted with her sister; as well as the new family into which the brothers find themselves.

## 2 Methodology

It is the first appointment for mental health issues for the client. Regarding Olive's relationship with the current, adoptive family, she demonstrates severe impairment regarding the trust she holds with the parents. Particularly, she experiences difficulty communicating with these parents. She states that her father is always working and that the mother keeps interrupting her. From the mother's perspective, Olive tends to idealize her late biological mother and that her regular comparison of the idealized image with the adoptive mother reveals negative results in most cases. However, she (Olive) seems to embrace good relationships with the rest of the members of the adoptive family. Notably, the mother and Olive point to a healthy and strong marital relationship, often marked by open communication and appropriate closeness between the parents. However, Olive expresses discomfort with open marital communication. Specifically, her freight comes from the childhood experience involving the biological parents' conflicts that made her distressed, an outcome that Cotrell and Boston (2002) observed to be a sign of post-traumatic stress. Therefore, Olive feels that she does not fit into the adoptive family and demonstrates a strong fear of rejection because the functionality of the new parents is contrary to the case of how her biological parents interacted.

For the case of the adoptive family, there is a high level of competence in which parents share leadership and proceed to enjoy strong parental coalitions. With the family experiencing considerable closeness among parents, Olive finds it difficult to internalize. Hence, conflict resolution and negotiation between Olive and the new parents prove difficult to achieve; yet the parents negotiate between themselves and with the rest of the

members of the family successfully. Also, Olive demonstrates poor emotional expression skills while the rest of the adoptive family exhibits moderate skills. For example, Olive keeps projecting worries and fears onto the parents and experiences difficulty understanding what she feels. The family of origin constitutes Olive, her parents, a sister, and two brothers. After the parents' separation and mother's death, the brothers and sisters are adopted in two new families.

## 3 Results and Discussion

During Olive's childhood, life under her biological parents was marked by domestic violence, alcoholism, uncontrolled freedom for the children, and poor communication. The client family is somewhat complex. In particular, the system blends two unique or distinct families involving an adoptive family and a biological family. In terms of style and competence, the two families are different. However, it is worth noting that both family systems play a contributory role in shaping Olive's sense of self-identity, as well as interactional patterns. Based on the problems that Olive experience relative to adapting to this new family system, it is worth inferring that they (problems) are illuminated by her focus on the style and competence of both families. Based on the insights gained from the studies by Nichols and Fellenberg (2000) and Szapocznik, Schwartz, Muir and Brown (2012), it is evident that the biological family exhibits low competence. The low competence is informed by reigning chaos that marred her childhood experience, which was evident further when she emerged as a witness in most cases. The coalition between the biological parents was also weak because of issues such as poor supervision of their daughter, the prevalence of physical violence, and severe alcoholism. Similarly, constructive problem-solving and negotiation were absent, with grossly ineffective communication compounding the situation. With the parents intolerant of each other's state of individuality, they would express their feelings through corresponding fear and violence or anger. With conflicts unsolvable, it is evident that the household was depressed and reflected a severely dysfunctional family system. Apart from competence, the family systems also reveal the attribute of style. Olive's biological family' members are seen to resort to the outside world to seek satisfaction. The system was established in such a way that warmth would be communicated rarely,

most of the family members were aggressive, open conflicts were evident, and intimacy was discouraged. Imperative to highlight is that this style occurred when Olive was extremely young. Major life events in Olive's life include domestic violence between her biological parents, the parents' separation, and the death of her mother. As mentioned earlier, Olive and her siblings did not pursue education beyond high school. The client has a history of substance abuse, to which she resorted as a coping strategy relative to a negative childhood environment in which she was brought. At the time of intervention, the client still uses drugs but the frequency seems to have reduced slightly compared to the case when she was with her biological parents.

#### 4 Conclusion

Major life events include the separation of Olive's biological parents, the death of her mother, and trauma in the wake of domestic violence between her father and mother; as well as adoption into a new family system. The client is admitted due to conflict with parents, substance abuse, depression, and anxiety. She has experienced these symptoms for a relatively long period but this is the first time she is seeking mental health assistance.

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