

the **T**herapeutic **G**enius of *Pia Mellody*

By John Bradshaw, MA

Watching a great therapist is like viewing an artist at work.

Pia Mellody joins the company of those who have created highly effective therapeutic models and who can put their theories into practice with unusual skill. Pia's approach is phenomenological, resulting from her own painful struggle with codependency, as well as from thousands of hours spent interviewing and working out healing strategies with patients at The Meadows.

Pia began her unique journey as the head of nursing at The Meadows. In her early days, she suffered from low self-esteem, unhealthy shame, and a hyper-vigilance that accompanied her need to be perfect in every aspect of her work and life. She lived in that lonely place of non-intimacy, polarization and silent anger that most codependents experience.

Pia decided to get some help for her problems at another treatment facility, where she found the experience not only frustrating, but ineffective. Her problems did not seem to fit into any consistent category of the Diagnostic Manual. When she completed treatment, she continued to try to make sense of her raw pain and confusion, reaching out to others to try to get assistance in alleviating the distress. She was grappling with an inner distress exacerbated by a sense of defectiveness, the inability to engage in really good self-care, and living in reaction to other people. Thanks greatly to her, this condition is now called "codependence." At that time, there was no coherent theory or therapy for the problem.

Early Roots of Codependency

Prior to Pia's work, some relevant work had been done concerning the reality of codependence. Ludwig von Bertalanffy's work titled *General Systems Theory* had filtered its way into several arenas of psychotherapy, notably those of Ronald Laing, Virginia Satir, and The Palo Alto Group (Gregory Bateson, Don Jackson, Paul Watzlawick and John Weakland).

In 1957 in Ipswich, England, John Howell concluded that the entire

family itself was the problem, rather than just the symptom-bearing individuals. Dr. Murray Bowen developed "The Bowen System" of family therapy. He clearly posited the whole family as the problem, maintaining that the most distressed and underfunctioning person in the family triggered the rest of the family into overfunctioning behaviors. The more the family members overfunctioned, the more the distressed person underfunctioned. Thus, the more the family tried to change, the more it stayed the same. Bowen was convinced that the whole family was in need of therapy. Bowen did not use the word "codependency," but he emphasized that, like a mobile, every member of a diseased family was dependent on his or her other family members.

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Dr. Claudia Black, currently a Senior Fellow at The Meadows, wrote a now-classic book called *It Will Never Happen to Me*. In it, she described the symptoms she carried as an adult that stemmed from living with an alcoholic father and a co-alcoholic mother. Dr. Black made it clear that her whole alcoholic family

was diseased, and that each member was codependent on the alcoholic father.

Soon hands-on clinicians such as Dr. Bob Akerman and Sharon Wegscheider Cruse (a protégée of Virginia Satir) were describing the symptoms of adult children of alcoholic families as "codependent," although no one knows who first used the term "codependency."

I did a 10-part series on PBS in April 1985 that met with a huge public response. In it, I used a mobile to describe the family system, moving it energetically to show how the whole family is affected in dysfunction, and allowing the mobile a lightly moving homeostasis to show its functional state. I devoted two parts of this TV series to issues I called "codependency," although my grasp of the concept was still vague and lacked a consistent theory of explanation.

Outside the recovery field, which deals with addictions of all kinds, was the work of Karen Horney and Theodore Millon. Horney's *Neurosis and Human Growth* presented many descriptions of a



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dependent personality. Horney's description touched upon many of the primary symptoms of codependency, which Pia Melody later organized into a coherent theory. According to Horney, those lacking healthy adult autonomy and interconnectedness sought their fulfillment and a sense of self from other people. For these people, relating to other people became compulsive and took the form of blind dependency. Horney used the phrase “morbid dependency.”

In the *International Encyclopedia of Psychiatry, Psychology and Neurology*, John Masters wrote: “I think that mainline academic psychology has not done enough extensive work on dependency as it relates to codependency as an identifiable personality disorder. Codependency is now seen by many to constitute a painful problem for certain clusters in our society. We are on a primitive frontier with regard to understanding codependence.”

Psychiatrist Dr. Timmon Cermak, in *Diagnosing and Treating Codependence*, argued that codependency was on par with other personality disorders. “To be useful though,” wrote Cermak, “codependency needs to be unified and described with consistency. It needs a substantive framework and, until this is done, the psychological community will not recognize codependence as a disease.”

Enter Pia Melody

It was at this point that a young nurse stepped onto the arena of modern psychology and made an extraordinary contribution.

One day, Pia Melody walked around the corner of a building and had a moment of clarity. She thought of AA and how alcoholics start recovery by simply telling the stories of their troubled drinking. They share their experiences and strength in embracing their shame and their first glimmers of hope.

Pia realized that hundreds of people had passed through her office at The Meadows with stories very similar to her own. For one thing, a large majority had been abandoned, abused and neglected as children. Pia had long suspected that her own symptoms stemmed from her traumatic childhood and severely dysfunctional family system.

At this point, Pia began interviewing the many people who came to The Meadows with stories of abandonment, neglect, abuse of all kinds, and enmeshment with a parent, the parent's marriage or the whole family system.

As Pia interviewed person after person, a unique and clear pattern emerged. All subjects had five similar symptoms:

- They had little to no self-esteem, often manifested in the carried shame of their primary caregivers;
- They had severe boundary issues;
- They were unsure of their own reality;
- They were unable to identify their needs and wants;
- They had difficulty with moderation.

These symptoms together marked extreme levels of immaturity, as well as moral and spiritual emptiness or bankruptcy. Patients shared their sense of relief in just being able to identify and talk about the distress they were in.

With an interviewing approach fueled by her intuition, Pia Melody had discovered what she called “codependency.” She had come to understand the word “abuse” in a much broader context than clinicians had previously understood it. Pia also showed how codependents carry their abusive caretakers' feelings. Our natural feelings can never hurt or overwhelm us; their purpose is to aid our wholeness. Our anger is our strength, a boundary that guards us. Our fear is our discernment, warning us of real danger. Our interest pushes us to expand and grow; our sadness helps us complete things (life is a profound farewell). Our shame lets us know the limits of our curiosity and pleasure; it becomes the core of modesty and humility. And our joy is the marker of fulfillment and celebration. “Carried” feelings lead to rage, panic, unbounded curiosity, dire depression, shame as worthlessness or shamelessness, and joy as irresponsible childishness.

Pia later saw the five core symptoms as leading to secondary symptoms: negative control, resentment, impaired spirituality, addictions, mental or physical illness, and difficulty with intimacy.

Continued on Page 9

the **Therapeutic Genius** of *Pia Mellody*

Continued from Page 5

Pia believed that alcohol and drug addiction, sex addiction, gambling addiction and eating disorders must be treated before the core underlying codependency can be treated.

Understanding that addiction is rooted in codependence is another contribution that Pia helped to clarify. Years ago, Dr. Tibot, an expert on alcoholism, saw that there was an emotional core to alcoholism that he called the "disease of the disease." Pia's work has certainly corroborated that intuitive insight.

Pia Mellody's most important contribution may be how she and her groups of suffering codependents worked out strategies of healing. They did this through trial and error. The results were so striking that The Meadows encouraged Pia to develop a workshop titled "Permission to be Precious." It was an instant success, and Pia began to take it to different cities around the U.S. Soon she wrote a book, *Facing Codependence*, with Andrea Wells Miller and J. Keith Miller. Later she developed a powerful approach to

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treating love addicts and their counterparts' avoidant addictions. Her most recent book, *The Intimacy Factor*, is the only relationship book that treats the core "grief feeling work" around early abuse, neglect and abandonment. I believe that other self-help relationship books fail because they do not address these fundamental issues. "Feeling work" involves exposure, vulnerability and what Carl Jung called "legitimate suffering." Pia has done her share of that and has the know-how to gently nurture others through this work.

Pia's work has become the core model in treating addictions of all kinds and the core of codependence they rest upon. She has personally led hundreds, probably thousands, of people suffering from codependency into recovery and wholeness.

Pia answered Dr. Timmon Cermak's challenge to do the work that established codependency as a treatment issue. She not only found a consistent way to conceptualize this source of suffering, but she found the know-how to address it.

The time has come for a broader recognition of Pia's art and genius. §

RECOVERY CORNER

*"A new life has been given us,
or if you prefer, a 'design for
living' that really works." BB, p. 28*

The coast of British Columbia is studded with inlets. The rivers that empty into these inlets flow so strongly that, for a good distance from the river's mouth, there is a fairly deep layer of fresh water floating atop the saline waters of the inlet.

The salmon that return to the rivers first spend a few days in the inlet. While there, they alternately swim in the saline waters, site of their former life, and in the fresh water, acclimating themselves to a new phase of life. To catch a salmon, a fisherman must have his bait in the saline waters. The salmon are losing the desire to eat, but they can be induced to bite when they are in their old environment.

The recovering alcoholic needs to be acclimated to a new life in the sunlight of the spirit. All of us return at times to our former world of resentment, self-pity and the like. While there, we are subject to being caught, filleted and eaten. We can choose to return to the sunlight, and we do so by using our kit of spiritual tools: a prayer, a meeting, a phone call, a 10th Step, and, before we know it, we are swimming above the bait.

We do not get acclimated to a new life, then spawn and die. We get to live a new life. *The Big Book* uses the word "new" in the context of a new life more than 60 times before page 164.

Our lower power knows how to fish.

-MK

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