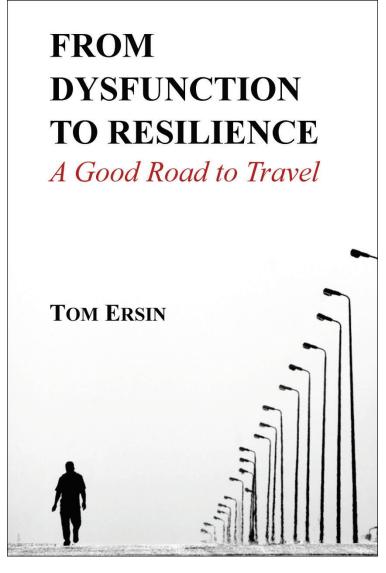
From Dysfunction to Resilience: A Good Road to Travel

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Your dysfunctional childhood may have actually changed your brain and body chemistry.

The chronic stress of growing up with a rageaholic, cruel, or deceitful parent — or overt abandonment — can affect your long-term biological functioning. But you can address childhood stress and learn to reconcile the past with the present while building a more resilient future.

This is a story about nuclear and extended family relationships: the good, bad, and dysfunctional. Why are certain members manipulative, malicious, and even sociopathic, often attempting to split family? Why do others exhibit integrity and treat members with love and respect? Still others are caught between integrity and weakness, struggling with being manipulated. All of us are affected by our childhood. Many emerge well adjusted. Some emerge fearful, angry, and lacking self-worth, with varying degrees of recovery.

This book will help you:

- Identify and recover from dysfunction and learn to live with the past.
- Build resilience, the ability to bounce back from tribulation and distress.
- Enhance emotional intelligence and improve relationships.
- Travel the continuous road of self-improvement, starting from wherever you find yourself now.

Back Cover

For many people, the principles of building resilience come easily, that is, they always bounce back from adversity ultimately in better shape than before they started. Some barely have to give it any thought. Aren't those people annoying? Seriously, for the rest of us, many of whom are children of dysfunction, we have to put out real effort.

If you grew up with a parent who was alcoholic, absent, emotionally abusive with all that that entails, trapped in "victim" mentality, unstable, or cruel



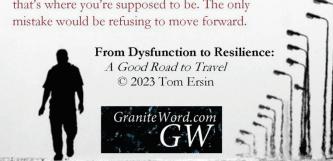
to others — or some combination of these or worse — you've either traveled the road from dysfunction or you're still stuck on it. You either have overcome the denial, repressed feelings, compulsive behavior, and low self-esteem or still are trapped in the whirlpool.

The primary principle of resilience is a mindset of continuous self-improvement and learning. There's always some physical or social skill, coping method, or

internal emotional mechanism that we could stand to strengthen. So we strive to better ourselves with the intention of enhancing our happiness, empathy, self -confidence, and humanity throughout life. Cherish the times when everything is going well, and be better prepared for those inevitable times when we'll have to respond to challenge or tribulation.

The way to be better prepared is to determine where in recovery or personal growth you are now, then commit to moving ahead from there on the road of self-improvement. Maybe you are in need of clinical therapy to begin peeling away a lifetime of accumulated layers of the onion that now surround and conceal a core of emotional pain and dysfunction. Perhaps you have long-overdue amends to make. Or possibly you're already versed in resilience training, formally or intuitively.

Or you're situated *between* flourishing and fixing what is broken. This is the spectrum of personal growth. You are where you are now; that's where you're supposed to be. The only mistake would be refusing to move forward.





About the Author

Tom Ersin has been a full-time health and well-being writer/editor since 2010 and holds degrees in communications and counseling. He's a former Certified Alcohol and Drug Counselor (CADC) and mental health professional who has worked in outpatient and inpatient settings in Michigan and California. His experience comprises work in the fields of clinical therapy and chemical dependency treatment. He has a comprehensive familiarity with both sides of the counselor-client relationship within individual,

couples, and family therapy. And he has a (good) dog named Bob Barker.■

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FOR IMMEDIATE RELEASE

Book: "From Dysfunction to Resilience: A Good Road to Travel" (2023, 210 pages, \$10) **Contact:** Tom Ersin | tom@graniteword.com | Troy, MI 48085 | GraniteWord.com

Troy, MI, December 15, 2023 — GraniteWord.com has announced the release of "From Dysfunction to Resilience: A Good Road to Travel" by Tom Ersin. Growing up with dysfunction — that is, parental chemical dependency, emotional/physical abuse, abandonment or neglect, anger and rage issues, or antisocial behavior or other mental health conditions — can cause lifelong emotional issues along with physical disorders caused by extreme chronic (long-term) stress.

In the book's second half, the many components of resilience are addressed: the ability to endure and recover from stressful periods or traumatic events in life and come out better and stronger on the other side. For many of us, the period could comprise a childhood (or adulthood) with one or more dysfunctional family relationships. Or the event could be a single challenging occurrence.

Regarding personal growth, some people are in the flourishing stage, that is, they have no significant mental or emotional roadblocks to overcome, and they're simply seeking self-improvement: enhanced relationships and happiness; increased meaning and purpose; deeper life engagement. They're looking to thrive rather than simply coast.

Conversely, others still are digging out of codependent confusion. There's no one explanation for a person's severe emotional debility. It's always some combination of initial causes, trauma, an extended sense of victimhood, and possibly years of denial and negative cycles of reasoning.

Wherever individuals find themselves on the personal growth spectrum — ranging from emotional malaise to evolution and flourishing — every person has the freedom to decide: "Do I remain stuck at my current level of development, or do I make a commitment to move forward from here?"

"From Dysfunction to Resilience: A Good Road to Travel" and excerpts are available at Amazon.com. For review copies, interview requests, or more information, contact Tom Ersin at tom@graniteword.com. (2023, GraniteWord.com, \$10)

Excerpt

From Chapter 5: Readers' Questions

Repressive Marriage

Q: I know at least three people, female and male, that are in situations similar to this story, including my cousin. She's been in a repressive marriage for years. Her spouse often has been emotionally abusive: He's disparaged and raged at the family for much of their time together — off and on, as those guys do. I always thought she was waiting for their two daughters to be grown and gone, which now is the case. So why doesn't she finally leave this unhealthy relationship?

A: Yes, alas, this is not rare. We don't know your cousin. But reflect on what we've learned about these types of families. First, both partners likely grew up in environments with at least one of the following: parental chemical dependency, emotional/physical abuse, abandonment or neglect, anger and rage, hyper rigid household rules, or other dysfunction. Some people break that cycle as adults but unfortunately many don't.

Second, consider the common codependent characteristics your cousin likely has carried into adulthood and marriage, attitudes that often harden over a lifetime if left unaddressed: 1) Low self-esteem and fear of abandonment — she may have integrated the conscious or subconscious belief that this relationship is all she deserves; 2) Victim mentality — her sense of "victimhood" might be so ingrained that she simply can't let go of parts of her life that support it; 3) Denial — she's likely continuing a decadeslong denial of the situation resulting in attachment to her toxic "normal"; she's kept up the emotional front for so long, it's her only reality; 4) Repressed feelings — your cousin likely has habitually (compulsively) stuffed her painful emotions down for many years, causing her emotional mechanisms to be impaired severely, i.e., she doesn't process negative *or* positive feelings the way most others do.

By the way, a common side effect in people with this type of denial, low self-esteem, and debilitated emotional functioning is to put blame for the pain anywhere besides its true source. They're likely afraid of that source and the hurricane of frightening emotions it could unleash if ever confronted. As a result, it's not unusual for people like your cousin to invoke persistent cruelty toward certain other family members, often those who love them the most, for three reasons: A) to give themselves an artificial sense of righteousness to divert their attention from their own demeaning abusive situations (from childhood and in adulthood); B) to lift themselves up artificially by "bringing down" and hurting others around them; and C) to assuage warped resentment toward loved ones who have helped them; they're embarrassed, resentful, and/or in denial of needing that help. Psychologists call this "hostile dependency."

A common method of shifting the pain through hostility is by being excessively and often hypocritically judgmental, attempting to split family and force members to choose sides. Weaker individuals may succumb to this pressure. Those with integrity will not. They realize this only enables and perpetuates the malicious behavior. For children who are being manipulated, the emotional harm can be intense and long-lasting.

This cruelty is inherent evidence of severe emotional disorder.

Why doesn't she leave the relationship? Denial, repressed feelings, disabled emotional functioning. Is there any hope? She may have few friends and interact mostly with likeminded relatives who support her cognitive and emotional distortions. It's difficult to picture any effective therapeutic intervention. But we always hold out hope. Life sometimes has a way of presenting unexpected circumstances that might prompt a moment of clarity leading to recovery.

Rageaholic Parent

- Q: The principal in our family was my mother. She was a rageaholic who doled out persistent toxic criticism. Why did I "inherit" her anger issues and hostile aggression whereas my younger brother turned out to be overly submissive and afraid of his shadow, with an acute woe-is-me "victim mentality"?
- **A:** Again, we don't know the specific dynamics of what went on in your childhood home. But generally speaking, principals (female *or* male) exhibit one or more of an array of harmful-to-the-family behaviors, as laid out earlier in this book. In turn, those family members, e.g., children, frequently develop one or more of an array of dysfunctional characteristics, also as laid out earlier. Any principal's adverse behavior can lead to any dysfunctional characteristics in each child, for various known and unknown reasons.

It's also common for a child to "inherit," i.e., learn, the *same* behavior exhibited by the principal. Often the first child has received the brunt of the damaging treatment — in this case, anger, rage, and malign criticism. What could be more logical than that juvenile growing up to be angry and rageful? Commonly, that oldest child also might have developed auxiliary problems including depression/anxiety and chemical dependency, the latter even though his parents never indulged in alcohol or other drugs. In recovery, this adult child will have a hierarchy of issues to address, beginning with the substance use disorders, then the anger/rage, followed by the depression/anxiety. *Without* recovery, the cycle not only continues but expands.

Conversely, you say younger brother is overly submissive, timid (has difficulty standing up for himself), resentful, and full of victim mentality. There are two possibilities to explain this: 1) due to his inherent personality, genetic makeup, and/or birth order, he simply developed different dysfunctional behaviors than you; or 2) he "inherited" (learned) the enabling spouse's primary behaviors, i.e., ignoring, denying, and covering up the principal's harmful treatment. Younger brother could have been more prone to buying into the

enabler's efforts to draw an artificial picture of a healthy, happy family when it was anything but. However, believing this lie (while subconsciously knowing the truth) likely has caused adult younger brother to doubt his perceptions and doubt himself, resulting in submissiveness. He's afraid of his shadow because he's never learned to confront conflicting information. He simply shuts down emotionally instead. Having impaired defenses, negative things seem to come his way more often, hence the "victimhood."

Note: A prime *commonality* between you (oldest) and younger brother is the depression/anxiety. Additionally, the chances of one or both of you developing chemical dependency rise considerably.

Chemical Dependency Counseling

Q: You say we can't make a drug/alcohol dependent get sober, that we can only stop enabling. What about my brother and his wife, parents-in-denial of a self-destructively addicted young adult daughter, Fiona, who still lives at home?

A: Sadly, this is an issue for too many chemically dependent young people. It still comes down to (parental) enabling and the denial behind it. Here's a common scenario (not the only one but common): The child is in denial because she doesn't want to stop using chemicals, which likely are numbing emotional pain and definitely are warding off withdrawal effects including depression and anxiety. The parents are in denial likely because they don't want to address the underlying familial turmoil. In this case, the dependent child, Fiona, is the "identified patient," the member whose obvious poor behavior is an open manifestation of deeper family affliction. The identified patient's symptoms often are the catalyst for bringing other members into treatment and, with hope, recovery.

To help save Fiona, informed loved ones should intervene with the parents, gently at first, then more confrontationally if necessary. It's better for them to be confronted by a loved one than by their child's mortality. You may be castigated for butting into the family's business. You likely never will be thanked. But your input could prompt a moment of clarity in the parents. And you'll know you did what you could to save your niece's life.

Point your brother and sister-in-law toward chemical dependency counseling — for them. This provides invaluable support: 1) personalized education about alcohol/drug addiction; and 2) unbiased, unemotional guidance in dealing with their daughter's destructive symptoms and underlying family issues. If they won't go to counseling, suggest at least a support group — for them.

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