# Models and interventions of Codependency treatment, Systematic Review<sup>\*</sup>

Fatemeh Karimi Ahmad Abadi,

Department of Social Science, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran **Masomeh Maaref Vand,** Department of Social Science, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran **Hakimeh Aghaee** Department of Psychology, Shahrood Branch, Islamic Azad University Shahrood, Iran

#### Abstract

Codependency is a disease which is targeted family as the most important element of any community. Professionals consider it as a disease that can be cured, but the treatment is not known. In this paper, models and interventions of Codependency treatment are reviewed and sorted.

Methods: The study was conducted using systematic review. For this reason, articles related to models and interventions of Codependency treatment were searched in databases of PubMed, ScienceDirect, Proquest, Willy, Taylor & Francis, Scopus Cochrane and Iran databases including Iranmedex, SID, Magiran, Irandoce and finally 14 articles with Inclusion criteria were selected for review and comparison.

Findings: All interventions to treat Codependency are both psychological and separated into three groups: group therapy, family therapy and cognitive therapy, respectively. Programs for the group therapy include the most interventions to cure and improve the people with Codependency disorder.

Conclusion: The results showed that there is significant relationship between psychological interventions during treatment and follow-up and decreasing the symptoms of Codependency

Keywords: Codependency, model, treatment, systematic review

#### Introduction

Codependency was first identified about 1970 as the result of years of studying interpersonal relationships in families of alcoholics(Beattie 1986). Although less than half century after introduction of Codependency concept but its extensive prevalence is so wide which is known as the root of all addictions (Vaitfild, 1991). Different groups are introduced with Codependency or in expose of this disorder. Influential people in the life of "a person addicted to a variety of chemicals " (Gibson & Donigian, 1993; Edmundson, Byrne & Rankin, 2000; Edmundson, Byrne & Rankin, 2005), those with chronic illness (Dupree, 2009), professionals such as nurses (Biering, 1989; Ançel & Kabakçi, 2009; Williams, Bissel & Sullivan, 1991; Hopkins & Jackson, 2002), Assistance professional (Martsolf & et al., 1999; Whitfield, 1984) and even alcoholic people and addicted ones to other addictive chemicals are also with codependency, and probably long before the chemical dependent, have been with the codependency (Beattie 1986; Cermak, 1986). Currently, the prevalence of codependency has been emphasized in stressful families (drug users, people with mental illness, with physical illness) (Fuller & Warner, 2000).According to the most recent statistics (by the Drug Control Headquarters, 2012) in the implementation of the National Plan and epidemiology of addiction and consumption of narcotics and psychotropic substances, which have done in the general population aged 15 to 64 years, the approximate number of drug abusers in Iran is about 1325000 people( public relations of campaign to combat drugs, 2012,. http://www.dchq.ir) According to the national survey of mental health carried out by the Ministry of Health in years 2010-2011, it was found the general prevalence of psychiatric disorders is 23.6% of the population 15 to 64 years in country that is 12 574 343 people have been identified

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with one mental disorder (Online Analytical site of ASRKHABAR, 2013 http: //www.asrkhabar.com/fa/news/18055). Anyone familiar and importance of life the person with problem, such as a spouse, parent, child, friend, who is related closely to same interdependent person called codependent (Bepko, 1991). If people are interdependent, only be considered with stressful families (drug abuser and the mentally ill) and if the household number is 3.6 people (Statistical Quarterly of Strategic Information and Statistics Center, 2012), it can be estimated that about four million of the 75 million people of Iran (Iran Statistical Center, 2012) who are subject to codependency only in terms of drug use, 45 million people with mental illness. Morgan (1991) believes codependency is growing in the general population. Now the big challenge of codependency syndrome is the lack of treatment methods and recovery of codependent people. Many of them are seeking treatment for codependency disorder (Hodgson, 1993). Codependency can be treated (Whitfield 1984, Cermak 1986, Miller 1994) But most studies about treatment have ignored Codependency .the concept and diagnosis of Codependency has been concentrated but few professionals and people are aware of this situation. Lack of awareness is a key factor to ignore the diagnosis and treatment of Codependency. The growing Codependency is so fast that it is necessary the writers and researchers are actively engaged in clinical practice (Whitfield , 1991). Studies have shown that there is significant strong relation between in families of alcoholics and drug abuse and mental disorders, especially depression (Loughead, Spurlock & Ting, 1998; Roehling & Gaumond, 1996; Wells, Glickauf-Hughes & Bruss, 1998).Codependency may reduce the efficacy of the treatment of people with mental disorders and drug abuse after entering the family environment and leads to recurrence of disorder .As a result, a recovered person will enter to the fault cycle of a codependent family and will expose the codependency behavior of family members, so that there is no treatment, but also the patient will be disappointed to continue treatment (Harknes et al., 2001). Codependency as a factor against stopping drug dependence, and without improved codependency will not be able to improve the addictive process. In this paper, codependency interventions and treatment models reviewed and sorted.

## Methods

In this study, using English Keywords associated with Codependency (Co-dependency, Codependent, Co-dependent, Co-alcoholic, Coalcoholic, addiction, Co- Coaddiction), combined with key words related to treatment (Treatment, Therapy, Recovery, Healing, Model) a systematic search for articles in major databases including PubMed, ScienceDirect, Proquest, Willy, Tylor & Francis, Scopus, Cochrane was done and by using Persian keywords, the Codependency in combination with words Treatment, recovery and model databases in the country, including the database of articles Medical Sciences (Iranmedex), Scientific Information Database (SID), database of journals and periodicals (Magiran), Institute of Scientific Information and Documentation (Irandoce), was searched. In the first 42 articles were obtained. After Review and delete unrelated ones, eventually, 14 articles, 2 in Persian and12 in English were eligible on the basis of acceptation criteria and were enrolled for final study.

#### **Reception criteria for the study articles**

The accepted articles were available in full text in searched databases. They analyzed a kind of intervention in order to improve codependency or they were become as critical components of a model and intervention including purpose population, kind of intervention, methodology and results f article. There was not any limitation to select them in regard to the time and place of research. All articles of reception criteria were investigated and repeatedly were analyzed and categorized the interferences regarding to purpose group, type of intervention and its results.

No	Author	Purpose	Study type	population	tools	Method& model of treatment	results
1	Nazmi, Tahereh(21 04) IRAN	the study of effect of group therapy on codependenc y and differentioanl in women who have addicted husband, Andomeshk Town	Clinical trial Randomiz ed two groups	30 individuals from among those who score 40 or higher gained the Haliuk Codependen cy index (HCI)	Haliuk Codepende ncy index (HCI) Their differentiati on (DSI	12 sessions of 90 minutes with the content: - The dependence of the reasons for the difference between healthy and unhealthy dependence and independence e, assertiveness and communicat ion skills to defend their rights and to respect themselves, to meet their needs, and feelings of emotional reactivity, the concepts of creativity and self- actualization	There is significant difference between control group &test group in regard to differentiation & codependency . In test group, than pretest and control group the mean of codependency decreased but mean of differentiation increased. The results continued during two consecutive periods
2	Etefaghian, Arezoo(201 3) IRAN	the study of effectiveness of family therapy based on Bowen approach of codependenc y, emotional disorder and anxiety in women who asked divorce in Hamedan IN 2013	Clinical trial Randomiz ed two groups	30 women counseling centers visited Hamedan divorce and divorce cases were in court.	- EspEn- Fisher codepende ncy Tests - Toronto - 20 Emotional disorder - Scl-90 anxiety test subscale	Protocol 1 hour, 8 sessions once a week in the form of individual counseling and family therapy Bowen approach	A significant difference in the results of the post-test experimental and control groups, respectively. Family-based treatment to reduce the dependence of Bowen emotional, emotional

							disorders and anxiety divorce affected.
3	Dianna L. Belyea 2011) USA	The relationship between codependenc y and the level of emotional intelligence Check-depth session on the impact of a change in the attitude of codependenc y on consultants.	Clinical trials before and after	23 students graduated in counseling	- Emotional intelligence questionnai re (EIS, Schette et al.1998) - Halyvk codepende ncy questionnai re (HCI)	Eight 2-hour sessions / workshops substance abuse with family Map content, aging and drug addiction, my story (use, abuse, recovery), the codependen cy, alcohol fetal syndrome, the introduction of the cycle of addiction and addiction	Between small-scale and manage their emotions on the outside, there is an inverse correlation. Analysis of pre and post- test scores showed that holding a seminar includes an in-depth meeting with the codependency on the scores do not affect codependency
4	Robert Edmundso n*. Marllyn- Burne Eric-rakin (2000) USA	Check the effect of family- centered model of group therapy for the treatment of symptoms of psychological origin and current communicati ons and improve Psychosocial functions of interrelated and dependent on chemicals	Clinical trials before and after	69 people, both men and women in 8 groups (10.7 persons) open -close	Epidemiolo gy Depression scale (CESD) - codepende ncy index(COD I) Features - anxiety index(STAI)	12 sessions of 90 minutes in 12 weeks With emphasis on content awareness, understandi ng metaphors family, aware of the role of communicat ion and feeling accepted in the family of origin, increased expression skills, understandi ng of	A significant reduction in the level of depression and anxiety, as well as improve understandin g of the behavior and codependency on outside contributors showed.

5	Robert Edmundso n*. Marllyn- Burne	use And growth model for group therapy and	Clinical trials before and after	46 patients with mental health problems are	Internal control index(ICI) - codepende	responsibilit y in the family of origin, shame on cognitive function of communicat ion. 12 sessions of 90 minute duration of 12 weeks (weekly	perception of external control and codependency of patients on
	Eric-rakin (2005) USA	interpersonal communicati on problems associated with codependenc y Increased self-seeking behavior and reduce communicati on problems and its symptoms.		diagnosed based on clinical symptoms. The sample included both sexes in the 6 groups of open- close	ncy index (CODI)	sessions), the use of two colleagues (male and female) Awareness of the role of explicit content learned, identifying the origin of the family metaphor, knowledge of issues related to accountabilit y and communicat ion, isolation, and personal growth.	the 3-step test during 12 sessions and after 6 months of follow-up was significantly improved
6	Gloria - Jean Kirby- Green (1998) USA	Check psychological impact dynamic- cycle (CPT) to reduce the codependenc y behaviors in families with children are blind or vision impaired	Case (clinical trials before and after)	selection 4 families (N = 9 patients) had a child blind or have visual impairment (no other physical or mental challenges)	direction Of life (measured the dependence on three cognitive rigidity, expressing feelings, common expectation s).	12 sessions in 12 weeks	There is Significant differences between the scores of the three- dimensional orientation in pre-and post- test questionnaire

7	Christina	- The concept	Clinical	Including 35	- Beck	6 sessions	there is
,	Strakes.	is to design a	trial	women (17	Depression	during 6	Significant
	1997)	program of	Randomiz	patients and	Inventory	weeks	differences
	USA	group	ed two	18 control	- Inventory	Check the	between the
		therapy,	groups	group) of	confidence	content of	control and
		cognitive		student	- Outestienne	the core	test the level
		dependence. Check the		counseling at least once	Questionna ire of	beliefs of individual	of depression and self-
		effect of		physical	coping	genealogies	confidence.
		cognitive		abuse or	methods	and	But there is
		group		emotional		Monogram	no significant
		therapy on		and		how identity	difference
		self-		powerless to		formation,	between the
		confidence,		end the		an overview	two groups in
		coping skills,		relationship		of Erikson's	coping skills.
		and		at the		psychosocial	
		depression		normal time.		model, understandi	
				time.		ng of self-	
						destruction	
						and how to	
						deal with it.	
8	Joan	Present A		codependen		Three main	The three
	Gibson,	treatment for		t families in		phases of	main stages of
	Germiah	people		the area of		treatment:	treatment can
	Donigian	dependent on Bowen		mental health and		- Work with	be the largest
	(1993) USA	theory.		chemical		the family of origin	component dependency
	0.5/1	Goal of		dependency		- Position "I"	treatment
		achieving a		acpendency		-recovery	program and
		higher level				Lost	a framework
		of self and				emotions	for
		thus reduce					understandin
		the level of					g the situation
		anxiety.					in the area of
							mental health and chemical
							dependency
9	Katleen	Check the	This	50 patients	-	12-step	Effective
	Veronica	effect of a 12	research	(40 women	codepende	treatment	intervention
	Prouty	step program	was an	and 10 men)	ncy index	program is	in reducing
	(1992	of	experimen	with a	questionnai	based on a	the level of
	USA	codependent	tal study.	family with	re (CODI)	treatment	psychopathol
		s and status		inefficient	- MMPI questionnai	plan Cottonwood	ogy, as well as
		effects during the 3 months		communicat ion	re	de Tucson`s	changes in the track surface
		follow-up		1011	ie	de l'úcsoff s	remains
		program of 12					constant
		steps					
10	Pamela-	The focus of	Clinical	40 women	Milon	10 sessions 2-	Structured
	Sue	treatment	trial	(20 test and	Clinical	hour over 10	group
	Ellinger—	programs	Randomiz	20 control)	Inventory,	weeks.	counseling,

	Dixou (1990) USA	(structured group counseling) is dependent on three main features: decision obediently, low self- esteem, attachment problems	ed two groups		- Cooper Smith Confidence questionnai re - Personality assessment form - Assessment decision form	The self- contained, self- discovery, emotion, decision- making, family of origin, care alone	effective treatment for codependency in women is improved and no significant difference between control and experimental groups at the level of self- confidence and obedient decision- making
11	Brown Howard Payton USA		Case study (clinical trial before and after)	21 patients (15 women and 6 men) with codependen cy disorders, alcoholism, drug addiction, sexual addiction, eating disorders		12 sessions in 12 weeks Treatment based on BASIC-Is, consists of two phases: First, help people use and twelve step Alcoholics Anonymous program. Second, life skills training	Experts interviewed by the target sample represents BASIC-IS in the psychological effectiveness of the approach. Follow-up at 3 and 11 months after treatment, indicating stability in the majority of the target group
12	Ronald T.patter- Efron Patricias.p atter- Efron, 1989	Check your acceptance of the world around them and conduct regular (daily) itself. - Improving the differentiatio n and achieve self-worth		Children, adults, couples / friends / parents of alcoholics and dependent on chemicals		12-week treatment program including a combination of training, individual therapy and group therapy and treatment plan for the four sections (behavioral, cognitive, emotional	This model, a model is effective to improve codependency

						and spiritual) is designed.	
13	.Richard G, Cavasina (1987)		Clinical trial Randomiz ed two groups	30 women who reported their husbands' alcohol abuse	- Check list of behavioral problems - codepende ncy questionnai re	Teaching communicat ion skills to an experimental group and the control group received standard applications clinic.	Teaching communicati on skills to couples therapy showed a more positive associations.
	Martha Eleveland (1987)	Structured model for women associated with identity and low self- esteem and improving emotional- behavioral and emotional functions -use Interpersonal model for intergenerati onal transfer system is not dependent dysfunctional families		Codependen t women		Treatment model includes three basic steps: First, create a positive image Second, the growth of self- discovery The third , interpersona l relations	Visualization (image) a powerful technique as a long-term intervention. Generally, working with mental images of women is dependent can be an effective intervention

## Results

A total of 14 papers in the field of addiction treatment were only 2 studies (14.02 percent) in Iran and 12 of another study (85.98 per cent) have been performed abroad. The overall volume of samples was conducted in 11 clinical trial studies includes 330 patients (296 females (86.80%) and 45 men (13.19 percent)), respectively.11 studies (78.57%) were clinical trial as before / after (5 studies) and randomized to the control group (6 studies), and 3 studies (21.42%) in line with the model of dependence treatment were taken. In a randomized study with a control group of study , the participants were variable between 40-30 people (who were randomly divided into two groups: 15-20). In clinical trials before and after the sample size varies from 59 to 9 members. The number and duration of meetings were between 6 and 12 sessions of treatment depend on clinical studies (1.5 to 4 months) one session each week (60 to 120 minutes) that 7 studies (63/63%) included 12 sessions of 90 minutes per week for a meeting of a study (0.7 percent) as six sessions in

6 weeks . 9 studies (65 percent) were performed in the period (1999 to 1987) and five studies (35%) in the period (2014-2000).

## Interventions

Interventions about codependency treatment were designed and performed in three methods: group therapy, family therapy and cognitive therapy

## The first category: Group Therapy

It includes interventions that focus on group programs in codependency treatment so that most interventions studies of this type were studied. The programs include group therapy with approaches of breakdown, cognitive, group counseling and 12 steps program. (Peter-Efron and Peter - Efron, 1989; Peyton, 1989; Elinger Dayakso, 1990, Kathleen Vronika, 1992; Astrakz, 1997; Edmandsond et al., 2000; Edmandsond et al., 2005, Nazmi, 2014). Group therapy is so effective to treat codependency disorder and will make the social security for codependent persons who want obtain new information in Predictable and appropriate space. Codependency defines as multiple relations and group therapy causes to forming multiple relations which can't be controlled easily and is effective to recall the symbolic behaviors and making a space like a family. In sum, the protection and support of relatives, not just of Therapist is valuable in treatment process,. This support is an emotional experience for codependent person which give a positive feedback to person and lead to break down denial of himself and expression his true feelings.Codependent person in dissociative group therapy can acquire the separation and bordering skills in communications and problem solving so that separate his problems from addicted one. The study of genealogy, monogram and belief core anticipate how to form identity, Erickson mental-social model, self-destruction and how to confront it in group therapy and the intervention can lead to decrease depression and increase self- esteem. In addition, groups which controlled by professionals and experts, 12 steps groups perform as based counseling groups whom concentrate on increasing self- awareness, self- development, self - esteem and expression of feelings.

## The second category: Family Therapy

Second category includes interventions stressed in the effect of family therapy to treat codependency. Only two approaches discussed Bowen family therapy to improve codependency, a clinical survey of divorced women and a model design of codependent people in the area of mental health and substance abuse (Gibson and Donigan, 1993; Etefaghyan, 2013).Bowen believes that the social and psychological effects on the family, especially interpersonal patterns influence on the position of the codependency. An ineffective family failed to provide security and good atmosphere to rear children and a set of preventive factors govern in this family which lead to inconsistency of family and prevent the social and emotional development of children. So we need to teach the family members how to adjust the inner realities of family and increase discrimination level to establish communication with others and express their feeling openly.

## The third category: Cognitive Therapy

The third category includes interventions in which the efficacy of cognitive therapy interventions emphasizes to treat codependency. Including cognitive therapy interventions can be pointed out the mental -dynamic approach (Jane and Green, 1998), a multi-dimensional approach to spiritual - psychological (Peyton, 1989) and the use of image (Alvlnd, 1987). In cognitive treatment to improve codependency stressed on changing person cognation about him and others and making new cognitions, it is believed that improvement of cognition can change and improve codependent behaviors. Mental-dynamic approach to treat codependency focused on recognition of personal and environment problems (family and society) which cause to obscure self- change and will help to recognize himself and surrounding environment by active behavior interventions. Using mental image is also among the interventions that emphasize to treat codependent women based on three stages, making positive image, the development of self-discovery and the establishment interpersonal communications.

## **Codependency measurement**

In most studies conducted to measure the Codependency, the questionnaires were used. The Codependency questionnaire (CODI) and the Halivog Codependency (HCI), Espen- Fisher and life orientation were used, but the Codependency questionnaire (CODI) is used more to measure the Codependency (Nazmi, 2014; Etefaghiyan, 2013; Baliyeh, 2011; Edmandson, 2000; Edmandsond, 2005, Jane &Green, 1998; Paroti, 1992; Kavasina, 1987).

#### **Target population**

Regarding the target population of the study, more attention has been paid to the treatment of codependence in women. In 2 studies, counseling students determines as target population and one of them with codependency received intervention treatment. In other article, the counseling students taught as therapist to recognize the codependency and 2 studies investigated the efficacy of intervention on codependency of family in mental health and addiction as well as physical illness. In general most studies study codependency in alcoholic and drug abuse people Most studies discussed participants with problems in life and only 3 studies, the alcoholic and drug abuse person considered as codependent person.

#### The content of interventions

The content of educational interventions for treatment programs include a focus on their codependency (6 studies), the problems of family origin (5 studies), ineffective communication (4 studies), express feelings (3 studies), twelve-step programs (2 studies) respectively.

#### The effects of therapeutic interventions

The expected outcomes of the studies included improving self-confidence, coping skills and decisionmaking, reduce trauma (depression, anxiety, stress, heavy reliance, self-losing), change in mental status, improving the conditions of codependency based on external control, increasing differentiation and communication skills. The review of studies shown interventions lead to increase self- esteem and decision making, changing the mental status, increasing self- finding and differentiation and improve communication skills and improving codependency behaviors and incompatibility between couples. **Conclusion** 

## In this paper, models and intervention of codependency treatment were reviewed. Most of the participants in the studies were women. In many studies, long-term follow-up (11, 6, 3 and 2 months) after the intervention, codependency symptoms were significantly reduced. In a study was done by Gloria Jeans and Kirby Green in 1998 to study the impact the dynamics of the cycle - therapy on the psychological codependency on families with children are blind or vision damage, there was no significant effect on the level of codependency that it would may be due to low sample size. Methods for treatment of codependency can be presented in three categories of group therapy, family therapy and cognitive therapy classified. Group therapy over other methods was used to treat codependency.Codependency treatment interventions have been conducted for several groups, people who are mentally ill or drug abuse, those with family or Substance Abusers, or physical or mental disease or live with their therapists or have close relationship to them.Vigshayder-Cruz (1996) suggests that the treatment of codependency is not a long-term maintenance therapy (in life), however, requires long-term interventions, but after a certain period ends. Most interventions for the treatment of a medium-term or long-term codependency is also designed and in most cases their focus was on skills training. Most studies were done about this subject in 1989-1999 and after that period, the number of same studies decreased. It seems to focus more on the treatment of patients (eg drug abusers) is diminished to focus codependency treatment. In other hand, lack of strict agreement about definition of codependency, difficulty to measure it and resistance of codependents against treatment could be factors to prevent development of codependency treatment. The study also faced restrictions. When searching in the databases may be articles under publishing process, but still have not been indexed or hidden from the perspective of a researcher in the study and not entered into the study. In case of a language other than English and Farsi by Iranian researchers is published, were not examined. Apart from the search database, the other database existed where the search didn't take place; there are articles that have not been studied. In IRAN, the only way in which they can use to improve codependents is 12 step methods. It is necessary to design and use different treatment methods .So studies on the subject of designing and clinical survey of codependency interventions can provide a sufficient ground to offer effective professional services to codependent people.

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