The purpose of this study was to gain a better understanding of how a problem-determined system developed around a case of drug addiction within the context of a system of relatedness. The epistemological framework informing this qualitative study was constructivism. The six participants who took part in the study represent the most prominent role players in the particular context of living. The individual battling with drug addiction, his parents, older sister, maternal grandmother and maternal aunt were interviewed. The methods of data collection employed were semi-structured interviews, a chronological event chart, genograms, and an eco-map. The interviews were interpreted using the hermeneutic approach. The different themes that emerged from each participant’s story were integrated in relation to each other and with respect to the collaborative sources of data. The most dominant themes extracted within this study are the initial reactions to Andrew’s drug addiction, life changes experienced due to Andrew’s drug addiction, support, as well as the meanings attributed to Andrew’s drug addiction. Further researcher into problem-determined systems in different cultures is recommended.

Keywords: Problem-determined system, drug addiction, system of relatedness, context, family.
Even in this era of rapid globalisation and major technological advancement, the human race is still faced with problems of pandemic proportions. Worldwide unemployment, poverty and AIDS appear to be problems of such enormous complexity that none of man’s extraordinary, modern and intelligent innovations seem capable of solving these crises. The remedies to these problems, which threaten the existence of mankind, seem to elude experts and laymen worldwide. Yet there is another problem of colossal proportion which, similarly to the ones referred to above, in essence also seems to strike at the very heart of countless families all over the globe.

Drug addiction seems to be a rapidly growing societal problem that leaves many lives destroyed in its wake. Families are ripped apart by its devastating impact, and countless drug addicts are unable to free themselves from the powerful grip of drug addiction and consequently pay with their lives.

According to Edmonds and Wilcocks (1995), drug addiction is a very real problem in South Africa. It affects people from all walks of life and can no longer be considered a localised problem. Jackson, Usher and O’Brien (2006) found that the experience of having a family member that is addicted to drugs, especially a child, had a profound effect on other members of the immediate family as well as on the family relationships. Butler and Bauld (2005) highlighted the devastation parents experienced in learning that their child was addicted to drugs and the subsequent impact that this had on their lives.

Grohsman (2007) argues that the impact of drug addiction goes beyond the individual and the family, as the ripples thereof can also be felt in the larger community and economy. Therefore, it seems that parents, families, teachers, community and church leaders, healthcare professionals, law enforcement agencies, government and society at large, have a tremendous task ahead in the prevention and treatment of drug abuse throughout the country.

Just like a tree bears fruit when conditions are optimal for such an occurrence to take place, the problem of drug addiction is also assumed to develop within the context of a system of relatedness that put forth just the right ingredients for its emergence. Therefore, as the
researcher, I set out to explore the specific interactions between role players that created a suitable environment for the problem of drug addiction to emerge.

As human beings, we are social creatures and thus our life experiences are inevitably tied up in the experiences of others. Any attempt to understand a particular individual has to include those that form part of that individual’s ecology of living. Huit (2003) explains that human beings cannot be fully understood in isolation, as it is the relationships between and amongst people that give meaning to our behaviour.

Becvar and Becvar (2006) argue in a similar fashion by suggesting that we should shift our attention away from the individual as the bearer of the problem. Instead, we should focus on the domain of relationships, as problems, struggles and difficulties develop between people and not within people. In a case of drug addiction, the problem is also expanded to include not only the individual in crisis but the entire context in which it occurs.

Huit (2003) points out that the most immediate influences are from the family, as members of a family mutually influence one another through a web of interaction. According to Bowen (1985), a change in the functioning of one family member is followed by compensatory changes in the functioning of other family members, even the symptomatic ones. In support of this view, Liddle and Dakof (1995) suggest that drug addiction as individual behaviour, is related to the family functioning in the past and present.

Meyer, Moore and Viljoen (2000) propose that the problem of drug addiction is understood as a symptom representing a “sick” system of relatedness to which all those involved have contributed. For this reason, the symptom tells the story of how the family system became stuck in repetitive and ineffective feedback networks. Meyer et al. (2000) also explain that “sick” systems attempt to stay the same at all costs by maintaining the status quo. This unwavering commitment to sameness can only be maintained as long as the family’s scapegoat is willing to be the sole carrier of the family’s problems.
In this light, the family is viewed as a closed system in which the symptom or problem prevents the possibility of change. Therefore, a symptom or problem serves the primary purpose of maintaining stability and continuity within the family.

Stanton (1982) suggests that the drama of drug addiction provides an underlying sense of stability to the family system, as both the addict and the family become predictable through their repetitive interactive patterns which serve a very important function. According to Stanton (1982), the drug addiction provides the addict and the family with a paradoxical solution to the dilemma of maintaining or dissolving the family, that is, of staying with the family as it might fall apart without him, or leaving home and becoming an independent adult. The drug addiction thus maintains the homeostatic balance of the family system and offers the addict a form of pseudo-individuation.

Whitaker (in Becvar & Becvar, 2006) argues that it is only through a sense of belonging to the integrated whole of the family, that its members have the freedom to differentiate, individuate and separate from the family system. In this instance, the power of the family is used in a positive manner to ensure the growth and development of its members.

**RESEARCH DESIGN**

*Aim of the Study*

As the researcher of this study, I chose the topic of drug addiction specifically because of the increased prevalence of this phenomenon right around the world. Drug addiction seems to have a very strong grip on the youth and countless studies have already exposed the devastating impact thereof on the self and others that are involved. Therefore, the overarching aim of this study is to explore and come to know the journey of a specific family’s battle against the drug addiction of one of their own.

Within this broad scope, there are also smaller pockets of inquiry that will focus on specific aspects of this journey. These varying aspects are also integrated in an attempt to foster a
meaningful understanding of the lived experience as told from the uniquely subjective experience of each participant involved.

As far as the rationale of this study is concerned, I see it as my duty to expose a part of the problem of drug addiction which for the most part, I feel, we have only been scratching the surface. Therefore, creating awareness and educating the general public about the disastrous impact of drug addiction on the self and other role players is extremely important. For this reason, my aim is to explore the ways in which a case of drug addiction might be created and maintained by the very systems that attempt to curb it.

More specifically, I set out to explore how a case of drug addiction emerged within a specific context of relatedness. I wanted to explore how the exchanges between family members became so rigid that it created the very problem this family system is now attempting to eradicate. I also wanted to pinpoint the exact moment in space and time when a problem-determined system formed around a case of drug addiction. Consequently, I wanted to investigate a case of drug addiction as a symptom of a bigger family disease in which each member is affected and simultaneously plays an important role in its maintenance.

As the researcher, it is my hope that the data that was generated in this study may add value to and contribute toward existing theories, and possibly assist those who have faced a similar ordeal.

This study could perhaps serve as a rude awakening for drug addicts and their families who are living in denial by not fully acknowledging the danger of drug addiction. To such people I would hope that this study could produce a powerful jolt to spur into action the active participation of all those involved. To others, this study could perhaps serve as a deterrent and warning, especially to those who have perhaps just gotten their toes wet in the alluring world of drugs. This study could also serve as a source of enlightenment, whereby readers might become aware of particular systems maintaining the very problems that they are attempting to correct. In this light, the study advocates awareness of one’s own responsibility, involvement and impact which might contribute towards the development and maintenance of a problem in others. But overall, I hope that this study leads to positive
outcomes for all who read it and that it brings across a message of hope for positive change in even the direst of situations.

**Postmodernism**

The ontology of this study is based on the assumptions of postmodernism. According to Lynch (1997), postmodernism emphasises that knowledge, or that which we believe, is an expression of the language, values and beliefs of the particular communities and contexts in which we exist. Postmodernism also allows for alternative explanations or interpretations of reality as many alternative accounts, descriptions or meanings may be possible.

A postmodern ontology allows this study to explore different sets of experiences regarding the same case of drug addiction within the context of a specific system of relatedness.

Postmodernism has a particular interest in narrative as conversation is considered to be the ultimate context within which knowledge can be understood. Therefore, Becvar and Becvar (2006) argue that postmodernism views language as the means by which individuals essentially come to know their world and in their knowing, also simultaneously construct it.

Postmodernism also places an emphasis on practical knowledge which is socially useful and which would benefit the community. Consequently, this study would provide an in-depth look at the real-life story of a widely occurring experience which impacts the lives of countless individuals. This study could be socially useful and beneficial to the community as it promotes awareness by educating the general public about a very real problem which has devastating effects.

**Constructivism**

The epistemology of this study is based on the tenets of constructivism, which are consequently used as a lens through which reality can be viewed. Constructivism postulates that reality is not external to any person but rather that it is constructed by each individual
as we bring our own personal perceptions to bear on it, give meaning to it and give order to it (Becvar & Becvar, 2006). Therefore, constructivism can be seen as the process whereby the observer gives meaning to whatever is being observed and so create his or her own reality (Watzlawick, 1984).

Doan (1997) also explains that any person's interpretation of reality is considered “true” as long as it works within that particular context. In essence, constructivism moves away from the belief in a single, objective and universal truth, as evident in the assumptions of modernism, towards the existence of multiple “truths” which are all possible.

This study also draws on ideas related to the principles of social constructionism. According to Owen (1992, p. 386), “social constructionism is thus the claim and viewpoint that the content of our consciousness, and the mode of relating we have to others, is taught by our culture and society.” Anderson and Goolishian (in Hart, 1995) go on to explain the social constructionist perspective in that we live with one another in a world of conversational narrative and we understand both ourselves and others through stories and self-descriptions. Consequently, each individual socially constructs his or her reality by using shared and agreed meanings communicated through language. In this sense, the interviews conducted in this study are socially constructed between me (as the researcher) and each of the selected participants, whereby our uniquely individual values, experiences, as well as social and community contexts have bearing on this construction.

**Qualitative Approach**

De Vos, Strydom, Fouché and Delport (2002) define qualitative research as a multiple perspective approach to social interaction that is aimed at making sense of, describing, and interpreting this interaction in terms of the meanings people attach to it. A qualitative approach suits this study as the study in general and the interviews in particular provide rich sources of data regarding the experience of drug addiction on the self and others involved in this problem-determined system.
The aim is therefore to understand how each participant perceives and interprets his or her experience through a process of co-construction between the researcher and each participant. Consequently, the researcher is regarded as an inseparable part of the research process as the researcher’s experiences, not only those of the research participants, are invaluable. In this sense, the qualitative researcher becomes a natural part of the context by engaging each participant in an open and empathetic manner.

Moreover, Terre Blanche, Durrheim and Painter (2006) explain that a qualitative approach allows the researcher to study selected issues in depth, openness and detail as it involves the studying of real-life situations as they unfold naturally. Therefore, the qualitative approach facilitates, on the basis of interviews, the researcher’s attempts to build up a detailed picture of the life stories and experiences of people.

Whitley (2002) also argues that a qualitative approach focuses on understanding how people experience and interpret events in their lives. Therefore, by using a qualitative approach the voices of the participants became articulated more clearly as no external framework is imposed on their experiences. However, Terre Blanche et al. (2006) suggest that the meaning of words, actions and experiences can only really be understood if they are studied within the context in which they occur.

**Sampling and Selection**

As qualitative research generates masses of data, the researcher generally only looks intensively at a few cases. Therefore, Terre Blanche et al. (2006) argue that qualitative research is more concerned with detailed and in-depth analysis than with statistical accuracy which has a better fit with quantitative research. For this reason, qualitative approaches supply a large sample of observations about a small number of participants in context.

The participants selected to participate in this study were obtained by making use of convenience sampling. According to Whitley (2002), convenience sampling of participants
involves whoever happens to be in the setting at the time the research is conducted. Consequently, I have selected participants with real-life experiences of drug addiction.

The scope of this particular study is limited to the experience of drug addiction as pertaining to one system of relatedness. The participants include:

- Andrew (youngest sibling and drug addict)
- Lauren (mother)
- David (father)
- Katie (eldest sibling)
- Emma (maternal grandmother)
- Sophia (maternal aunt)

Members of the Joubert family

(nuclear family)

Members of the extended family

**Method: A Case Study**

As this research project is qualitatively orientated, it is vital to obtain data that reflects richness and quality rather than quantity. Therefore, the case study research method was chosen as fitting within this qualitative scope, as it allows in-depth and descriptive data to be generated about the inner workings of only one particular system of relatedness. Soy (1997) supports this view and similarly argues that case studies provide a detailed analysis of a few events and the relationships between them which allows the researcher to obtain a better understanding of more complex real-life issues.

Therefore, only one family system is focused on in this dissertation. It will include those affected by the drug addiction of a specific individual (including the drug addict), as well as those mobilised around the problem in an attempt to intervene. To study such a case, Stake (in Denzin & Lincoln, 2005) proposes that the case study researcher should draw from the nature of the case in terms of its activity and functioning, those informants through whom the case can be known, that is, the historical background as well as the context in which the case is embedded. In this manner, the case study researcher can attempt to organise the
case around specific issues and seek out both what is common and what is particular about the case.

PROCEDURE

Collection of Data

The data for this study was collected by means of conducting a semi-structured interview with each participant. In general, the nature of the semi-structured interview is such that it allowed the story of each participant to naturally emerge as a coherent whole. In this manner, each participant is regarded as the expert on the subject in question. The aim was to interview all the relevant parties within the context of the problem-determined system, as to obtain a deeper understanding of the experience being narrated. Each interview was audio taped to facilitate the processes of data capturing and data analysis.

During each interview certain tools were also used to focus and structure the process of data gathering. Thus, as the researcher, I was able to dig much deeper into each participant’s unique story. These collaborative sources of data include a description of the family and its members, a chronological event chart, genograms and an eco-map.

In particular, these tools entail the following:

- The chronological event chart was used to record significant events in each participant’s life, while noting the impact of such events on others.
- The genograms provided a visual representation of the family system and of the patterns or themes within the broader relational system which might be influencing or driving the problematic behaviour of drug addiction.
- The eco-map provided a picture of the family in its life situation as it identifies and characterises the significant nurturant or conflict-laden connections between the family and the environment.
Analysis of Interviews

After the data had been gathered by using semi-structured interviews, and had then been transcribed, the data had to be analysed. Therefore, hermeneutics was used to impose structure on the mass of data that was obtained, as it aims to achieve understanding of that which might not yet be understood.

According to Addison (1992), hermeneutics is based on the assumption that people give meaning to what happens in their lives and the process of interpretation makes making sense of a person’s world possible. An outline of the procedure followed when performing hermeneutics has been adapted from Aronson (1994) and Terre Blanche et al. (2006). The steps comprise of:

- Familiarisation and immersion involves a process whereby the researcher is immersed in the world created by the text.
- Thematising suggests that the researcher revisits the text and infer themes from it.
- Coding entails a process of grouping together similar and related occurrences under the same theme.
- Elaboration requires that the researcher explores the generated themes more closely as to delve into deeper meanings.
- Interpretation and checking refers to the actual presentation of the interpreted text and the reconstruction of various themes.

Integration of Data

A re-construction of each interview is presented in the form of themes that represent each individual’s unique account of reality with regard to the topic of this dissertation. The themes underlying each participant’s story is also integrated into a coherent whole that represent a “community of voices”. These main themes are supported by the data obtained from the description of the family and its members, the chronological event chart, the
genograms and the eco-map, in order to facilitate a deeper understanding of the family drama.

**Role of the Researcher**

According to Auerswald (1985, p. 1), “the therapist functions as a benign detective, seeking out with the family and others the event-shape in time-space that contains the reported distress”. Similarly, as the researcher, I set out to investigate where the problem of drug addiction first began, how it developed, how it might have been maintained by the very systems that attempted to admonish it, and how the drug addict and others were affected by the drug addiction as well as where they all drew strength and support from.

Anderson and Goolishian (1988) also suggest that the qualitative researcher is a master conversational artist or an architect of dialogue. As such, I attempted to create a space that would facilitate dialogue and conversation.

**Ethical Considerations**

According to Neuman (1997, p. 445), “ethical research requires balancing the value of advancing knowledge against the value of non-interference in the lives of others.” For this reason, ethical codes need to be implemented to safeguard both the researcher and the participants involved. The ethical considerations that were taken into account within the context of this study include obtaining written consent, clearly explicating the aim and possible uses of the research as well as maintaining confidentiality and anonymity.

**DISCUSSION OF RESULTS**

From each participant’s story the most prominent themes which characterised the experience being narrated, were identified. The similarities and differences amongst each participant’s inferred themes were also noted. Consequently, the different themes
underlying each participant’s story was integrated into four main themes that represent a “community of voices”. These main themes are contextualised by the literature study, a description of the family and its members, the chronological event chart, the genograms, as well as the eco-map.

**Theme One: Initial Reactions to Andrew’s Drug Addiction**

The first theme contains all the initial reactions experienced by the participants shortly after Andrew’s drug problem was exposed. Moreover, Andrew’s reaction to the responses from his family is also included here.

**Affective reactions**

Lauren, David, Katie, Emma and Sophia all reported experiencing shock. Both Lauren and David reported experiencing devastation, helplessness and guilt. Yet Lauren and David also felt relieved as they reported how the puzzle pieces fell into place at that moment. Emma was the only participant to report feelings of utter disbelief, and Katie was the only participant who reported that she was not surprised by the news of Andrew’s drug addiction as she had all along been suspecting that something was wrong with Andrew.

Andrew reported feeling embarrassed and sad when he told his family about his drug problem.

**Cognitive reactions**

In response to the news of Andrew’s drug addiction, David and Lauren both blamed themselves and tried to make sense of the situation. Both Emma and Sophia report that they also blamed David and Lauren for Andrew’s drug problem.

When Katie heard about Andrew’s drug addiction, she blamed him for it, while Andrew also reported that he only had himself to blame.
**Behavioural reactions**

Lauren, Emma and Sophia all increased their support for Andrew as they became involved in trying to help him overcome his addiction. Emma and Sophia also extended their support to Lauren and David.

David and Katie reported that the conflict between them and Andrew increased and that they subsequently withdrew from him.

Lauren was the only participant who reported that she shielded Andrew from David and that she actively went about trying to mobilise resources to intervene in Andrew’s drug addiction.

In response to his family’s reactions, Andrew reported that he sobbed uncontrollably.

**Theme Two: Life Changes Experienced due to Andrew’s Drug Addiction**

This theme characterises all the changes that resulted in the family from the impact of Andrew’s drug addiction. Also included in this theme are the changes that took place in Andrew’s own life as a result of his drug addiction.

**Emotional changes**

Lauren and David reported that they felt helpless, guilty and overwhelmed by Andrew’s drug addiction. Emma and Sophia reported that they felt overwhelmed by the extent of their involvement.

Both Lauren and Andrew reported that they both felt utterly alone during this time.
Katie was the only participant to report that she felt tied-down by her responsibilities toward her own family, and that she was subsequently rather uninvolved in Andrew’s problems. Andrew reported that he felt anger towards his family.

Identity changes

Lauren, David and Andrew reported that they thought of themselves as failures. Lauren felt that she had failed as a mother and David felt that he failed as a father.

Andrew reported that he was labelled as the black sheep of the family when his drug addiction became public. David was the only participant to report that he was embarrassed by Andrew.

Occupational changes

Lauren reported that her occupational situation had become stressful as she repeatedly had to take time off from work as a result of Andrew’s drug addiction. She often had to attend court hearings when he had been arrested. Andrew reported that he had lost his job as a result of his drug addiction.

Relationship changes

Lauren, David, Katie and Andrew all reported that there was much more conflict between the family members. David and Lauren reported that communication within the family had become constrained.

Emma and Sophia reported that they became much closer to the members of the Joubert family as a result of their involvement. Katie was the only participant to report that she visited her parents less because Andrew was there.
Both David and Katie reported that their individual relationships with Andrew had become much more distant. Andrew confirmed their responses by saying that they had started drifting apart. Lauren reported that she and David were also drifting apart.

**Financial changes**

Both Lauren and David reported having less money available to them as their money, vehicle and other assets were stolen by Andrew when he needed money to buy drugs. Emma reported that her financial situation was stable, despite the fact that she and her husband paid for Andrew’s rehabilitation at the Noupoort centre.

Andrew reported that his financial situation had been strained for a long time. As a result, he often stole from his parents because he had no source of income.

**Theme Three: Support**

The theme of support encompasses the various types of support the participants mobilised around the problem of Andrew’s drug addiction. In particular, the support the participants received, gave and did not receive is highlighted.

**Support given**

Emma, Sophia, Katie and Lauren reported that they extended emotional support to Andrew and prayed for him often. Emma, Sophia and Katie also emotionally supported and prayed for his parents, Lauren and David.

Lauren, David and Emma reported that they financially supported Andrew. Andrew reported that he tried to support his girlfriend to overcome her own addiction to drugs.
Support received

All the participants reported that they received support from God and from various other family members.

Lauren, David and Andrew reported that they received support from their local pastor and from each rehabilitation centre that they came in contact with. Lauren and David also reported that they received support from the Tough Love group, the Caring group (church), police members and the courts.

Lauren was the only participant to report that she received support from the Vista Clinic during her time of need.

Instrumental support

Lauren, Katie and Emma reported that they received much needed strength from God, and that their faith had made a fundamental difference in their lives, at a time when they needed it the most.

Support not received

Andrew reported that he did not receive the support that he desperately needed from his father, David or from the twins, Katie and Tim.

Theme Four: Meaning Attributed to Andrew’s Drug Addiction

Each participant had their own beliefs as to why Andrew became addicted to drugs. Andrew’s own perspective is also included here and juxtaposed against the perspectives of his family.
Lauren, David, Katie and Andrew reported that the blame solely fell on Andrew. Emma reported that Lauren, David and Andrew were to blame. Sophia reported that Lauren and David were the only ones to blame.

The following causes or catalysts are mentioned by the participants as contributing factors to the development of Andrew’s drug addiction:

Lauren, David, Andrew and Emma reported that Andrew’s having too much money and freedom, having the wrong friends and desperately wanting to fit, were factors that might have played a role.

Lauren, Sophia and Andrew reported Andrew’s low self-esteem as a possible factor.

Emma and Sophia reported Andrew’s being compared to his siblings, his lack of support and involvement by his parents, as well as his not being accepted. Katie and Andrew reported wanting to belong and loneliness. David and Sophia reported Tim’s leaving home and suppressing emotions. Lauren and David reported Andrew’s rebellious and stubborn nature. David and Katie reported the age gap between Andrew and the twins.

Katie was the only participant that reported Andrew’s wanting to impress people, wanting to be popular and refusing the assistance of others as possible catalysts. Sophia reported his parents failing to pick up on warning signs. Emma reported his always being blamed. David reported Andrew’s not abiding by rules and being unhappy. Andrew reported using drugs to feel better and to forget about the rejection received from his family.

Integration of Results

According to Meyer et al. (2000), problems develop within the context of human interaction. This study envisioned to explore how the problem of drug addiction developed within a particular system of relatedness.
Thus, if we are to understand how Andrew came to where he is now, it is necessary to explore where he came from. Bowen (1985) suggests that individual family members cannot be understood in isolation from one another, but rather as part of, or in relation to, the family as a whole. Consequently, I have interviewed the most prominent role players that make up Andrew’s context of living.

The aim of this study was to illuminate how the exchanges between family members had become so limited that rigid patterns of interactions were established to ensure this family’s stability. According to Becvar and Becvar (2006), the concept of negative feedback suggests how this type of family attempted to maintain its stability or status quo by opposing any fluctuations or disturbances.

However, despite this family’s unwavering commitment to sameness they had managed to create the very context for the problem of drug addiction to develop. Therefore, the manifestation of Andrew’s drug addiction had challenged the family’s rigid repertoire to such an extent that evolution took place.

Through the stories of the family members, this study also attempted to highlight when and where a problem-determined system was formed around the issue of Andrew’s drug addiction.

At the very moment that a problem-determined system was formed, the Joubert family unit was extremely strong and extremely weak at the same point. The prospect of change was so great that the family’s stability was more fragile than ever before. Yet in the face of such impending danger, the family was also much more resistant to avoid the possibility of change.

But why did Andrew’s drug addiction pose such a threat to the stability of his family unit? It was at this very moment when Andrew was no longer satisfied with being the family’s scapegoat, that a problem-determined system was formed. However, his drug addiction threatened to expose the family’s inability to take responsibility for their own problems. The formation of a problem-determined system around the issue of Andrew’s drug addiction was
the family’s desperate attempt at keeping Andrew as the carrier of all the family tension, so that their stability could be maintained.

 Bowen’s (1985) suggestion would support this view, namely that the prospect of change was a threat to family continuity and so the dysfunctional family ensured its own continuity by halting the possibility of individual differentiation.

 Below is a discussion of drug addiction as a problem-determined system. Andrew’s journey is described from the humble beginnings of being the family’s scapegoat and being the regulator of family tension, toward being the most powerful member of the family that catapulted them all toward evolutionary differentiation.

 When Andrew’s drug problem first came to light, each family member reacted in accordance with the prevailing relationship definitions of the time and in keeping with their typical roles and attitudes. At this point, the twins and their parents formed an “undifferentiated blob of sameness” which perpetuated the tang of similarity that echoed in their respective responses.

 Thus, it seems that the stability of this family is dependent on unity which can only be achieved if all the members of the family act and think the same. As such, the Joubert family was not open to the idea of change. Over time, their rules had become so inflexible that the types of values, roles and behaviours that were considered appropriate and acceptable by the family system, were limiting to its members.

 When Andrew was born he embodied the epitome of difference and posed a challenge to the rigid rules of the family system. Yet the subsequent resistance from the family system meant that he was not granted membership to the family. Consequently, he was labelled as the outsider and the black sheep of the family.

 However, the time came when Andrew started to grow tired of being the scapegoat of the family, and in desperation the availability of drugs was used to fill the relational vacuums between the various members of the Joubert family. This act of self-sacrifice threatened to
disturb the family’s equilibrium or homeostasis. Therefore, in an attempt to neutralise the possibility of change, Andrew’s behaviour was labelled as deviant and so the status quo could be maintained.

Stanton (1982) explains how drug addiction often develops due to the intense fear of separation experienced by the family in response to the drug addicts’ attempts at individuation. Ever since Andrew was a little boy, his parents had tried to force him to conform to the mould of their expectations. Perhaps the difference he brought to the family was so anxiety provoking that it had to be stifled.

Lauren describes Andrew by saying that:

“He has always been the type of person who is easily influenced and manipulated by others. Andrew would easily sacrifice his own well-being for another friendship or relationship.”

Perhaps Andrew took up the role of a drug addict to deflect all the attention away from the impoverished relationships in his family. Did he sacrifice his own well-being so that the family could save face?

For a brief period of time, Tim felt obligated to carry the problems of the family because he was the eldest son. If he did not leave the field completely, would he have been the drug addict today? Perhaps Andrew wanted to take up this role and this privileged position when Tim left. Yet Andrew only received the burden of all the family problems without the crown and glory. So when the weight of everyone’s tension became too much for Andrew to bear, he resorted to drugs as a way to escape this undue responsibility.

The impact of Andrew’s drug addiction reverberated throughout the family as his individual battle soon became the problem of the family. Andrew’s drug addiction posed a terrible risk to the stability of this family system. Inevitably the difference that Andrew’s drug addiction brought to the seemingly united family was too great and the family was pushed off its axes. As a result, the relationship dynamics amongst the family members changed to such an
extent that greater differentiation of individual members was made possible. This differentiation or emancipation of family members can be seen through the severed relationships that resulted.

However, this rigid family system did not easily allow such evolution to take place. During the times when Andrew’s drug addiction posed the greatest risk to the stability of the family unit, external systems were mobilised in an attempt to intervene. In this manner, the family system attempted to maintain the status quo to avoid the possible dissolution of its unity.

In the end, Andrew’s drug addiction was more powerful than the homeostatic tendency of the family system.

It appears that Andrew’s drug addiction perturbed his rigid family system in such a way that evolution took place. As a result, individuals and the relationships amongst individuals are now much more differentiated, even though it is unhappily so. Therefore, Andrew’s drug addiction can be regarded as his attempt at emancipation from an undifferentiated family. Through the formation of a problem-determined system around the perceived problem of his drug addiction, evolution took place in the Joubert family system.

But how do the participants or family members view the development of Andrew’s drug addiction? What meanings do they attribute thereto?

Through an exploration of the ideas held by each individual, the intricate relational dynamics by which they are informed are also revealed. The very conditions that perpetuated Andrew’s drug addiction are made explicit. Again, aspects of sameness, difference, loyalty, membership and belonging “fizzle” to the surface in the story of each participant.

Andrew’s parents and sister immediately pointed a finger at him and suggested that his own intrinsic qualities catapulted him into the powerful grips of drug addiction. These perspectives reflect the prevailing “norm” in the Joubert family, namely that Andrew is the bad seed who is always to be blamed for defiant behaviour and poor decisions.
Through this belief, the members of the Joubert family desperately attempt to rid themselves of any responsibility for Andrew’s drug problem. However, as suggested by Meyer et al. (2000), a symptom or problem says something about the dynamics within the system, as it tells the story of how the particular family system became stuck in repetitive and ineffective feedback networks. Therefore, the problem of drug addiction is understood as a symptom representing a “sick” system of relatedness to which all those involved have contributed. Becvar and Becvar (2006) also explain the importance of looking away from the individual as the bearer of the problem. Instead, it is suggested that problems, struggles and difficulties develop between people and not within people.

The relational explanations offered by Andrew, Emma and Sophia regarding the causes of Andrew’s drug problem are incredibly valuable. In essence, these role players argue that the Joubert family never accepted Andrew as part of their clan, and in response, Andrew searched for acceptance and a sense of belonging elsewhere. Unfortunately, he found it in the wrong places.

Perhaps the true salvation of this family will only come once all the significant role players acknowledge and accept their own contribution to the behaviour and problems of others. Liddle and Dakof (1995) suggest that individual behaviour is best understood as being related to the family functioning in the past and present.

In essence, Becvar and Becvar (2006) argue that a family’s key to success lies in its ability to make adaptive changes to its own structure relative to the family circumstances and the developmental stages of its members. In particular, a delicate balance is required between family stability and individual autonomy.
EVALUATION OF THE STUDY

Limitations of the Study

Throughout the entire process of completing this study, the following limitations were found:

The focus of this study was only directed on the experiences of one particular family in one specific culture. This narrow scope might be considered a limitation to this study, as it only explored how a single Caucasian family ascribed meaning to their particular experience of drug addiction.

However, the main reasoning or driving force of this study was not to generalise the experiences of a particular family as being similar or dissimilar to the experiences of other families. Therefore, the qualitative orientation of this study allowed me as the researcher to focus my attention solely on the manner in which one family conceptualised their experiences of drug addiction. As was pointed out, Terre Blanche et al. (2006) explain that a qualitative approach allows the researcher to study selected issues in depth, openness and detail as it involves the studying of real-life situations as they unfold naturally. Therefore, the focus of this study was not aimed at aspects of generalised applicability that would fall within the domain of quantitative research.

Another limitation to this study was the absence of Tim’s perspective regarding the family drama. However, it was each participant’s privilege and right to decide whether they wanted to partake in this research study. Tim's refusal to be a part of this research study was therefore respected.
Recommendations for Further Research

As the researcher, I hope that this study will motivate others to conduct more research focused specifically on drug addiction, and that this research would be based on findings that are appropriate and specific to South African conditions.

In particular, I recommend an exploration of the following areas:

- How does the problem of drug addiction affect an entire system of relatedness in different cultural contexts?
- Which supportive and interventive resources are available in different cultural contexts?
- How do different cultures attribute cause and blame to the development of drug addiction within a specific system of relatedness?
- How do families from different cultural backgrounds create a context that is suitable for the development of drug addiction to take place?

Reliability and Validity

In particular, reliability was obtained through the clear delineation of this study’s overall scope and field of interest. Both the aim and rationale of this study clearly reflect what this study is about, why it is important and what the study aims to achieve.

The orientation of this study is also adequately disclosed in that, as the researcher, I clearly demarcated my personal interest in the study and expectations thereof. The nature of the study was also clearly explained.

As the researcher, my engagement with the material is reflected through the hermeneutic process of data analysis, which attempts to discover meaning and to achieve understanding. Consequently, specific themes were identified that seem to underlie each participant’s unique experience regarding the topic of the study. Therefore, I attempted to approach this
study from a position of “not knowing” and allowed myself the privilege of seeing the world through the eyes of each participant that took part in this study. The hermeneutic process of data analysis also allowed me the opportunity to firmly ground the various interpretations, by linking each identified theme with examples from the specific interviews conducted with the participants.

The validity of this study was obtained by utilising the “triangulation” strategy. The data generated in this study was obtained from multiple sources such as the literature study, the description of the family and its members, the genograms, a chronological event chart, an eco-map and semi-structured interviews.

The validity of this study is further strengthened by the overall coherence reflected in the qualitative nature, postmodern ontology, constructivist epistemology, literature study, hermeneutic method of analysis and collaborative resources chosen for this study. As such, a visible thread of relevance runs through the different facets of this study. The study also appears “fruitful” as it provides an abundance of rich and meaningful descriptions about drug addiction as a problem-determined system.

In particular, the participants that took part in this study all agreed that the ways in which I engaged them individually had made sense to them. As such, catalytic validity has been achieved. The participants also indicated that they would not have made any changes to the study, as the retelling of their stories that are reflected in the results of this study, had made sense to them. Consequently, testimonial validity has also been achieved.

Reflexive validity was also obtained as the data generated within this study changed my own way of thinking. Whilst working on this study, I was continuously inundated with various burning issues that came to the fore. My involvement with the literature and each participant has taught me the following:

As the researcher of this dissertation, I have come to know and appreciate how the stories of each participant cannot be removed or separated from the context in which it was originally formed and shaped. Becvar and Becvar (2006) argue that reality is not external to any
person; rather it is constructed by each individual as they bring their own personal perceptions to bear on it, give meaning to it and give order to it.

I have also realised how each participant’s story is based on predetermined beliefs and so does not represent an exact account of reality. Therefore, the manner in which each participant perceives the world and events that occur within it is inevitably coloured by their tinted lenses of previous experience, culture and society that they wear. For this reason, Doan (1997) advocates that we should move away from the belief in a single, objective and universal truth, towards the existence of many possible multiple “truths” which are possible.

Similarly, I have also realised how each participant’s story is only a partial explanation of the entire family drama, as there are as many versions of a family as there are members in it. Therefore, it is only through the appreciation of a “community of voices” that the family drama unfolds in its entirety.

On a personal note, I have also come to understand how the fear of change sometimes drives people to create the very circumstances that they fear the most. Yet the impact of such actions sometimes only becomes visible many years later when the thread of relevance that ran through from the beginning to end has already become so tangled that the patterns are no longer immediately recognisable.

Conclusion

This study allowed me as the researcher the profound privilege of bearing witness to intricate complexities of the Joubert family drama. Through the stories told by each participant, the themes that seem to underlie them, and from the collaborative sources of data, I was able to see how Andrew’s drug addiction developed within the context of his family system. The following hypotheses were made:

It appears that the Joubert family has always had extremely limiting rules to which each member had to adhere. These rules inevitably resulted in the formation of redundant
patterns of interaction between the family members. The limited family repertoire provided a sense of stability as it ensured the predictability of each family member.

Perhaps Andrew’s birth marked the start of this family’s evolution from an “undifferentiated blob of sameness” to greater individual differentiation.

When Andrew was much younger, it was easier for the family to maintain its stability or status quo by opposing the difference or the new information that Andrew tried to bring to the family system. At this time, Andrew was merely pushed toward the periphery of the family as he was labelled the black sheep and the outsider. Thus, by reframing the difference that Andrew brought to his family as deviance, the family was able to remain homeostatic and unchanged.

But despite the Joubert family’s commitment to sameness, they had managed to create the context for change. Their immediate response to the challenge that Andrew’s drug addiction posed to their stability, was to form a problem-determined system whereby they all agreed through their languaging that Andrew’s drug addiction was in fact a problem. In this manner, the family tried to keep Andrew as their scapegoat by once again labelling him as the sole carrier of the problem.

However, Andrew’s drug addiction was much stronger than the homeostatic tendency of the Joubert family unit, and so evolution could take place. As a result, the stable family system was pushed off its axes and relationships were altered to such an extent that greater differentiation amongst the family members was made possible.

Finally, it seems appropriate to say that where there was a beginning there is now an ending and in that way the study has come full circle as it achieved that which it has set out to achieve.
REFERENCES


http://chiron.valdosa.edu/whuitt/materials/sysmdlo.html


