

Is Someone You Love a High-Functioning Alcoholic?

Are you concerned that someone you love might have a drinking problem even though they manage to show up at work every day and maintain close relationships? Sarah Allen Benton, a licensed mental health counselor in Boston and author of *Understanding the High-Functioning Alcoholic: Professional Views and Personal Insights*, answers questions about the signs and symptoms of high-functioning alcoholism.

Q: What is a high-functioning alcoholic?

A: A high-functioning alcoholic (HFA) is an alcoholic who is able to maintain his or her outside life, such as a job, academics, home, family, and friendships, all while drinking alcoholically. HFAs have the same disease as the stereotypical “skid-row” alcoholic, but it manifests or progresses differently. Many HFAs are not viewed by society as being alcoholic, because they have succeeded and over-achieved throughout their lifetimes. These achievements often lead to an increase in personal denial as well as denial from colleagues and loved ones. HFAs are less apt to feel that they need treatment for their alcoholism and often slide through the cracks of the health care system, both medically and psychologically, because they are not diagnosed.

If asked, most people will tell you that they know an HFA—whether it is a friend, family member or colleague. In fact, a landmark study in 2007 by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) categorized alcoholics into 5 subtypes: 19.5% of alcoholics are the “functional” subtype, 31.5% are the “young adult” subtype, 21% are the “young antisocial” subtype, 19% are the intermediate familial subtype (middle-aged with mental illness), and only 9% are of the “chronic severe” subtype that fits the stereotype of the low-



bottom alcoholic. Other addiction experts estimate that between 75% and 90% of alcoholics are high-functioning.

Q: What are the signs and symptoms?

A: Interviews with sober HFAs in my book have led to the creation of a list of characteristics that many HFAs display. Lower functioning alcoholics may also exhibit some of these signs as well that include but are not limited to:

1. Drinking Patterns:

- When they have one drink, they experience a craving to have more and cannot predict what their alcohol intake will be.
- They obsesses about the next time they will be able to drink alcohol.
- They behave in ways that are not characteristic of themselves while drunk and continue to repeat these unwanted behaviors and patterns.
- Surround themselves socially with heavy drinkers.
- Getting drunk before actually arriv-

ing at parties/bars (pre-partying).

- Setting drinking limits (ie, only having 3 drinks, only drinking 3 days per week) and not being able to adhere to them.
- Driving drunk and, by sheer luck, not getting arrested or involved in an accident.
- Always having to finish an alcoholic beverage or even another person's unfinished beverage.
- Using alcohol as a reward.
- Drinking daily or binge drinking (more than 5 drinks in one sitting) on weekends.
- Having blackouts (memory lapse due to excessive drinking) and not remembering what they did for a portion of their drinking episode.
- Feeling guilt and shame about their drunken behaviors.
- Taking breaks from drinking and then increasing alcohol consumption when they resume drinking after a period of time.
- Engaging in risky sexual behavior when intoxicated.

- Not being able to imagine their life without alcohol in it
2. Denial:
- Have difficulty viewing themselves as alcoholics because they don't fit the stereotypical image and because they feel their lives are manageable.
 - Avoid recovery help.
 - Make excuses for drinking by using alcohol as a reward or to relieve stress
3. Professional and Personal Life:
- Well respected for job/academic performance and accomplishments.
 - Can maintain a social life and intimate relationships.
 - Surround themselves with people who drink heavily
4. "Double Life":
- Appear to the outside world to be managing life well.
 - Skilled at living a compartmentalized life (ie, separating professional, personal, and drinking lives)
5. Hitting Bottom:
- Experience few tangible losses and consequences from their drinking, often by sheer luck.
 - Experience recurrent thoughts that because they have not "lost everything," they have not hit bottom.
 - Often hit bottom and are unable to recognize it

Q: How does this behavior start?

A: There is not just one way that alcoholism starts. Many HFAs began drinking before the age of 15, which, according to research by the U.S. Surgeon General increases the risk of developing alcoholism by 40% regardless of family history. Those who start drinking after the age of 15 have a lower risk of being alcoholic. Many HFAs have a family history of alcoholism and were raised in alcoholic homes. In fact, research by the U.S. Surgeon General also indicated that genetics account for 50% of the chance of developing alcoholism. In addition, some HFAs have underlying mental health issues such as social anxiety or depression and alcohol may have started out as a form of "self-medicating" but then they became addicted. Some HFAs began to drink heavily in college and blended in to the college drinking culture. However, they were unable to phase out of their heavy drinking after college and may then start to

realize that they have a problem. Research by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) concluded that 72% of individuals will experience a period of 3-4 years of heavy drinking that peaks during ages 18-24 but are then able to phase out. However, there are 22% who are unable to phase out and develop an alcohol-use disorder. Some HFAs start drinking later in their lives and women in particular are more vulnerable to developing alcoholism at any stage of life and in a quicker manner than men.

Q: How do HFAs challenge the stereotypes we hold about alcoholics?

A: The societal stereotype of the typical "skid row" alcoholic feeds the denial of HFAs, their loved ones and the general public. HFAs use their external successes to deny that they may be alcoholic, based on these societal messages about the alcoholic image. In the mind of HFAs and others, alcoholics are unemployed, have poor work performance, have poor academic records and are typically homeless. Therefore, the fact that HFAs are functioning well on the outside allows them and their loved ones to deny their alcoholism and feel that they are "better than" an alcoholic. This powerful sense of denial also prevents the loved ones of HFAs from intervening because they may not have concrete evidence that their alcoholism is leading to tangible losses. HFAs may provide the main source of income for a family and therefore, the spouse or partner may not feel that they have the leverage to persuade the HFA to get help.

Q: If HFAs are so high functioning, what's the harm of their drinking?

A: HFAs have the disease of alcoholism—a disease that is lifelong, chronic, progressive, and potentially fatal. While HFAs may be succeeding professionally or academically, they may be engaging in dangerous behaviors, such as drinking and driving, having risky sexual encounters, blacking out, etc. Although they may have been able to avoid serious trouble professionally or personally to a certain point, it is only a matter of time before alcoholism will lead to problems. HFAs are also putting their own health at risk through their alcoholic

drinking, and putting the emotional health of their family at risk because they are not getting treatment for their alcoholism.

Q: What should you do if you suspect you have a high-functioning alcoholic in your life?

A: HFAs often lack concrete evidence of the negative consequences of their drinking. Therefore, it is important that loved ones and friends tell the HFA how their drinking negatively affects them. Even if that conversation does not lead the HFA to get sober, it is planting a seed that may help the HFA to realize that their alcoholism is something that they need to get help for. You can also let them know that you will support them if they choose to get help. It is also important for loved ones and friends to set limits and boundaries with the HFA and possibly choose to pull away if they choose not to get help. An example would be telling the HFA that you will not spend time with them when they are drinking because of the way that they act or the way that you feel around them when they are drunk. This type of boundary will also provide a clear message that their drinking is affecting their social life as well as hurting those around them. It is also important for those around the HFA to learn to find a balance between supporting them without enabling their alcoholism. This may require that you attend therapy or Al-Anon. Al-Anon is an international, free mutual-help group for loved ones of alcoholics. There are meetings around the world and their website can provide more information as well as meeting information.