

# My PhD idea: Compulsive Helping

## Qualitative research to define Compulsive Helping and locate it within the taxonomy of addiction psychology

- PhD idea** I am grateful to the Society for the Study of Addiction for permitting me to submit this PhD idea though I am not yet a PhD student and am still in the process of formulating my research direction.
- The Issue** My interest in this topic arose from my private practice as an integrative psychotherapist. I have a long-term client with a distressing persistent condition that I've come to understand best as 'Compulsive Helping' because it has the hallmarks of an addiction.
- The client** My client seeks external validation, acceptance and a sense of belonging compulsively, in an effort to avoid a fear of exclusion and abandonment, in a process of negative reinforcement.
- Compulsive Helping** I see Compulsive Helping as prosocial behaviour that has run out of control. It can be understood as self-medication, codependency, a complex trauma, a survival schema, chronic shame (de Young, 2015), an obsessive compulsive adaptation and/or repetition compulsion (Freud, 1920). I suggest it is here conceived of as a behavioural addiction in its own right. I further suggest it should be viewed from an attachment perspective (Flores, 2004, Gill, 2014) suggestive of treatments based on Affect Regulation Theory, Polyvagal Theory and Embodied Psychology.
- Aims** To define Compulsive Helping nomothetically and locate it within the taxonomy of addiction psychology. Possibly, therefore, also to investigate the application of Polyvagal Theory.
- Request** **I am looking for leads to a potential Academic Supervisor** with experience in two or more of my areas of interest: Behavioural Addictions, Qualitative Research, Affect Regulation Theory, Polyvagal Theory and Embodied Psychology.

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Declaration: No conflict of  
interests arises in this  
proposed research

# Compulsive Helping

**“It is progressive and destructive like any other addiction”** (Lefever, 2014, p.74).

## Research Justification

Whilst much has been written about compulsive helpers in the context of codependency, portrayed as enabling addicts and as badly affected by addiction as the addict themselves (e.g. *The Lois Wilson Story*, Borchert, 2009), little has been written about Compulsive Helping *per se* and no agreed definition exists.

## Addictive Characteristics

Symptoms are typical (see Lefever, 2014, p.59): dependency, opportunity-seeking, preoccupation with use, use for mood alteration effect, protection of supply, repeatedly using more than planned, having a higher consumption capacity than others, tolerance reducing over time and continuing to use despite progressively damaging consequences, including psychotic episodes.

## Treatment Resistance

Treatment resistance is likewise typical: denial, minimalisation, compartmentalisation, epistemic rigidity.

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## Addiction as an attachment disorder

Attachment Theory has an ethological basis and “nothing in biology makes sense except in the light of evolution” (Dobzhansky, 1973). Flores (2004, p.7) wrote: “Because of a person’s difficulty maintaining emotional closeness with others, certain vulnerable individuals are more likely to substitute a vast array of obsessive-compulsive behaviours (e.g. sex, food, drugs, alcohol, work, gambling, computer games etc.) that serve as a distraction from the gnawing emptiness and internal discomfort that threatens to overtake them.” Gill (2014, p.27) saw addiction “in terms of trauma and personality, and... as self-medicalising response to internal suffering.”

# Method Options

**Qualitative Research** Semi-structured interviews analysed by thematic analysis. Additional data obtained from self-reports of trauma symptoms.

**Participants** Six to eight participants, thematic analysis. Quantitative measures will be needed to identify and distinguish comorbidities and cross-addictions:

**Measures** e.g. SCI-TALS Structured clinical interview for trauma and loss; and TALS-SR Self-Report Instrument (Dell’Osso et al., 2009); SPQ for cross-addictions (Christo et al., 2003), SIV Survey of Interpersonal Values (Gordon, 1960), SMS for self-medication (James & French, 2008), Spann-Fischer Codependency Scale (Spann, 1991), CTI Complex Trauma Inventory (Brown & Spinazzola, 2017), YSQ-S3 schema questionnaire (Young & Brown, 2005), ISS for internalised shame (Cook, 1988); Y-BOCS for obsessive compulsive adaptations (Goodman et al., 1989), DY-BOCS for obsessive compulsive symptom dimensions (Rosario-Campos et al., 2006), ECR-R attachment style (Fraley et al., 2000), NEO PI-3 personality traits (McCrae et al., 2005), RSES self-esteem (Rosenberg, 1965), SCC self-concept clarity (Campbell et al., 1996).

## Results

**Qualitative Research** A nomothetic definition of Compulsive Helping within the taxonomy of addiction psychology, illustrated by thematic analysis.

**Quantitative Research** Instruments used to distinguish Compulsive Helping from cross-addictions and comorbidities may acquire wider application as a screening tool. I desire some indication of treatability, showing that Compulsive Helping is amenable to treatment by an embodied psychology but it may be too much

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for one research project.