



Sam's OATH

What's Hidden Doesn't Heal.

How to Set Boundaries Without Cutting Someone Off

A practical guide to setting and maintaining healthy boundaries with a loved one struggling with substance use or mental health challenges.

The Word Nobody Wants to Hear

"Boundaries."

If you're supporting someone with a substance use disorder or mental health condition, you've probably heard this word a hundred times. From therapists, from support group members, from well-meaning friends. And if you're like most family members, the word makes you feel somewhere between confused and guilty.

Confused because nobody tells you exactly what a boundary is supposed to look like in your specific situation. Guilty because setting a boundary feels like turning your back on someone who needs you.

Here's the truth that most boundary advice skips: boundaries are not about punishment. They're not about control. And they're definitely not about cutting someone off. Boundaries are the rules you set for your own behavior - what you will and won't participate in, what you will and won't accept in your own space - to protect your well-being and, ultimately, to preserve the relationship.

A boundary isn't a wall. It's a door with a lock. You decide when it opens.

What Boundaries Are (and Aren't)

****A boundary is a limit you set on your own behavior.**** This is the part people miss. You cannot set a boundary on someone else's behavior, because you cannot control someone else. What you can control is what you do.

"You need to stop drinking" is not a boundary. It's a demand - and one you can't enforce. "I will leave the room if you're intoxicated and speaking to me aggressively" is a boundary. It's about your action.

"You have to go to rehab" is not a boundary. It's an ultimatum. "I won't continue to pay for expenses that free up money for substance use" is a boundary. It defines what you will do with your own resources.

See the difference? Boundaries are about you. They're statements of what you need to be okay, not instructions for what the other person must do.

****What boundaries are NOT:****

- **Not punishment.** "I'm cutting off your phone to teach you a lesson." That's retaliation. A boundary would be: "I can't continue paying for a phone that's being used to arrange drug transactions. I'll pay for the phone again when that changes." - **Not manipulation.** "If you loved me, you'd respect my boundary." That's emotional coercion. A boundary stands on its own - it exists because you need it, regardless of whether the other person agrees. - **Not abandonment.** "I need space when you're using" is not the same as "I don't love you anymore." You can hold space and hold a boundary at the same time. - **Not rigid forever.** Boundaries can evolve as the situation changes. When your loved one enters treatment or demonstrates sustained change, the boundaries may shift. That's healthy adaptation, not weakness.

Why Boundaries Are So Hard for Families

If boundaries were easy, you wouldn't need a guide. Here's why they're especially difficult when substance use or mental health is involved:

Love makes you second-guess everything. You set a boundary, then lie awake wondering if this is the night they sleep on the street, overdose, or hurt themselves. The stakes feel impossibly high, and every boundary feels like a potential catastrophe.

The person may be genuinely suffering. This isn't a case of someone just being selfish or thoughtless. Your loved one may have a brain that's literally working against them. That reality makes it harder to hold firm, because compassion pulls you toward bending.

Family roles are deeply ingrained. If you've spent years as the caretaker, the fixer, the one who holds everything together, changing that pattern feels like abandoning your identity. Your family may pressure you to stay in that role because it's familiar.

Culture and religion may complicate things. Some cultural backgrounds teach that family sacrifice is unconditional and that setting limits on family is disloyal. If that's your background, boundary-setting can feel like betraying your values. It's worth considering: what serves your family better in the long run - sacrificing yourself until you break, or building sustainable patterns that allow everyone to heal?

Fear of the worst-case scenario. "What if I set a boundary and they die?" This fear is real and valid. But consider the alternative: what if you never set a boundary and they die anyway, while you've also destroyed your own health, finances, and other relationships? Boundaries don't increase risk - they change the dynamic in ways that often motivate change (Foote et al., 2014).

Types of Boundaries (With Examples)

Boundaries aren't one-size-fits-all. Here are the main categories, with specific examples for families dealing with substance use and mental health challenges.

Financial Boundaries

Money is one of the most common pressure points. A person with a substance use disorder can burn through money at an alarming rate, and families often feel obligated to fill the gap.

Examples: - "I will not give you cash directly. If you need groceries, I'll go with you to the store or order delivery." - "I will not co-sign loans or take on debt related to consequences of your substance use." - "I will not pay your rent if you're spending your own income on substances. I will help you find financial counseling or connect you with treatment programs." - "I will contribute to treatment costs, but not to expenses that replace money spent on substances."

Emotional Boundaries

These protect your mental health and prevent the relationship from becoming entirely one-directional.

Examples: - "I love you and want to hear about your life, but I can't be your only source of emotional support. I need you to also talk to a therapist or counselor." - "I won't engage in arguments when you're under the influence. I'm happy to talk when you're sober." - "I won't accept being screamed at, called names, or threatened. If that happens, I'll leave the room or the house, and we can try again later." - "I'm not going to pretend this isn't happening. I'll be honest with you about what I observe, even when it's uncomfortable."

Physical Boundaries

These address your living space and physical safety.

Examples: - "You are welcome in my home, but substances are not. If I find substances in my house, they will be disposed of." - "If you come to my home intoxicated, I'll ask you to leave. I'll call you a cab or a rideshare, but you can't stay." - "I will not allow illegal activity in my home. Period." - "I will not get in a car

with you if you've been drinking or using."

Communication Boundaries

These define how and when you'll engage.

Examples: - "I won't answer the phone after midnight unless it's a genuine emergency." - "I'm not going to discuss this with you over text. If you want to talk about your treatment or recovery, let's do it in person or on a call." - "I need you to be honest with me. If I find out you've lied to me, I'll need some time before I can engage again." - "I'm not going to keep secrets about your substance use from other family members. Secrets keep us all sick."

Relational Boundaries

These protect other relationships and family dynamics.

Examples: - "I won't make excuses for your behavior to other family members. I love you, and I'll also be honest." - "The kids will not be left alone with you when you've been using." - "I won't cancel plans with friends or other family members to manage a crisis you've created." - "I want you at family events. If you come intoxicated, I'll ask you to leave quietly, and we'll welcome you back at the next one."

Scripts for Hard Conversations

Knowing what to say in the moment makes all the difference. Here are scripts you can adapt:

When they ask for money: "I love you and I want to help you. I'm not going to give you money right now because I don't think it's helping you - I think it's making it easier for you to avoid getting the help you need. If you want to talk about treatment options, I'll drop everything and help you with that today."

When they're angry about a boundary: "I understand you're upset, and I get why. This is hard for me too. I'm not doing this to punish you. I'm doing this because I love you and I need to be okay so I can keep being in your life. I'm not going anywhere - but I do need this."

When other family members pressure you to back down: "I know this looks harsh from the outside. I've

thought about it a lot, and I've talked to [counselor/support group/therapist] about it. I believe this is what's best for [loved one] and for me right now. I need your support, even if you don't fully agree."

****When they threaten to cut you off:**** "That would hurt me a lot, and I hope you don't choose that. But even if you do, this boundary stays. And whenever you want to reconnect, I'll be here."

****When they say "If you really loved me, you wouldn't do this":**** "I do love you. That's exactly why I'm doing this. If I didn't love you, I'd just let things keep going the way they are because it would be easier for me."

****When they're in crisis and you've set a boundary about crisis management:**** Take a breath. Assess whether this is a genuine safety emergency or a pattern of manufactured urgency. If they are in immediate danger of harming themselves or others, call 911 or 988. Your boundary doesn't apply to genuine life-or-death situations. But if this is the third "crisis" this week that conveniently requires you to break your boundary, hold steady and offer the appropriate resource: "I hear you, and that sounds really hard. I think you should call [therapist/sponsor/crisis line]. I can text you the number right now."

Dealing with Guilt

Let's be direct about guilt, because it's the thing that will undermine every boundary you set if you don't address it.

Guilt is a normal response. It means you're a compassionate person who cares deeply. But guilt is not always an accurate guide to what's right.

****Common guilt thoughts and reframes:****

"I'm being selfish." Reframe: "I'm being sustainable. If I burn out, I can't help anyone, including the person I'm worried about."

"A good parent/partner/sibling wouldn't do this." Reframe: "A good family member helps someone face reality. Protecting them from consequences isn't helping - it's prolonging the problem."

"What if something terrible happens because of my boundary?" Reframe: "Something terrible might happen regardless of my boundary. The question is whether I'll be standing when it does."

"They're going to hate me." Reframe: "They may be angry right now. That's different from hate. And their anger at my boundary is healthier than my participation in their destruction."

NAMI's Family-to-Family program teaches that family members often need to develop what they call "radical acceptance" - the ability to accept the current reality, including the things you cannot change, without approval. You don't have to approve of the situation to accept that it's real and respond accordingly.

Guilt fades when you see boundaries working. And boundaries do work - not always immediately, and not always in the way you expect, but the CRAFT research consistently shows that families who learn healthy boundary-setting and positive reinforcement help their loved ones enter treatment at dramatically higher rates than families who continue enabling patterns (Smith & Meyers, 2004).

When Boundaries Get Tested

Every boundary gets tested. This is not a sign of failure - it's a predictable part of the process. The person you love is used to the old pattern, and they'll push to restore it. Here's what to expect:

****Escalation.**** The behavior may get worse before it gets better. This is actually a sign that the boundary is working - the old pattern is being disrupted, and the person is pushing harder to restore it. Hold steady.

****Emotional appeals.**** Tears, apologies, promises to change. These may be genuine - and they still don't mean you should drop the boundary. Change is demonstrated over time, not promised in a moment.

****Triangulation.**** They may try to get other family members to pressure you. "Mom said she won't give me money. Can you talk to her?" Be prepared for this and communicate with your family about presenting a united front.

****Testing the exact limit.**** "You said I can't come over drunk, but I only had two beers." If you give ground here, the boundary dissolves. Be specific in your language and hold to the specifics.

****The response that matters most: consistency.**** When you set a boundary, follow through every time. Inconsistent enforcement teaches the person that if they push hard enough, you'll bend. It actually makes things worse than having no boundary at all.

Boundaries and the OATH Journey

Boundaries are an act of Authenticity in the OATH framework. You are being honest about what you need, what you can sustain, and what you will accept. That honesty - even when it's uncomfortable - creates space for Togetherness that's real, not performative. And it protects the relationship so that Healing remains possible.

A family without boundaries is a family running on fear and obligation. A family with boundaries is a family choosing honesty, sustainability, and genuine love.

Resources

- **Beyond Addiction (book):** by Foote, Wilkens, Kosanke, and Higgs - the best book on CRAFT for families - **NAMI Family-to-Family:** nami.org/support-education - free 8-session course for family members - **Al-Anon Family Groups:** al-anon.org - peer support and boundary-setting wisdom - **CRAFT Resources:** robertjmeyersphd.com/craft.html - **SAMHSA National Helpline:** 1-800-662-4357 (free, confidential, 24/7) - **988 Suicide & Crisis Lifeline:** Call or text 988 (24/7) - **Crisis Text Line:** Text HELLO to 741741 - **Sam's OATH:** samsoath.org - community, resources, and connection for families navigating substance use and mental health

Sources

1. Beyond Addiction: How Science and Kindness Help People Change (Foote, Wilkens, Kosanke, Higgs, 2014)
2. CRAFT Method (Smith & Meyers, 2004)
3. NAMI Family-to-Family Education Program
4. Cloud & Townsend, Boundaries (1992)
5. SAMHSA TIP 39: Substance Use Treatment and Family Therapy

If You or Someone You Know Needs Help Now

988 Suicide & Crisis Lifeline

Call or Text 988

Free, confidential support 24/7 for anyone in suicidal crisis or emotional distress.

Crisis Text Line

Text HOME to 741741

Free, 24/7 crisis support via text message with a trained crisis counselor.

SAMHSA National Helpline

Call 1-800-662-4357

Free, confidential, 24/7 treatment referral and information service.

Emergency Services

Call 911

If someone is in immediate danger, call 911 or go to the nearest emergency room.

You are not alone. Help is always available.

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