

TRANSFORMATIONS:
THE SPIRITUAL DIMENSION OF LEARNING RECOVERY FROM
ADDICTIONS

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ABSTRACT

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Spirituality has been largely unexplored as a factor in recovery from addictions. This research investigates the recovery experiences of professionals and volunteers who work in the area of recovery services in order to explore the role of spirituality in the learning processes that transformed them from substance abusers into individuals who abstain from using their drug of choice. The participants in this study are former addicts who now serve as outreach workers, mentors, peer and professional counsellors to people with addictions.

This study explores the questions of how powerlessness and surrender translate into sustained recovery as well as how helping others assists in maintaining one's own abstinence from drugs and alcohol. The primary research question is: What can this study tell us about the role of spirituality in the learning process of recovery from addictions?

The research methodology included in-depth semi-structured interviews, informal conversations and self study. Through exploring the participants' stories and further examination of the literature, this study deepens understanding of the role of spirituality in recovery from addictions and presents spirituality as the catalyst that influenced the participants to compassionate service with people still in active addiction.

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CHAPTER ONE

Introduction

In 2000, a series of local newspaper articles focused public and media attention on the prevalence of substance abuse in the Downtown Eastside of Vancouver. In response, the Vancouver Richmond Health Board (later called the Vancouver Coastal Health Authority), the City of Vancouver, and the grassroots Alcohol and Drug Working Group of Community Directions, each developed plans and strategies to address the problem. These strategies are in varying stages of adoption, implementation and, in the latter case, dismissal. Before this flood of attention, there were individuals, in recovery themselves, who kept quietly and continuously working as outreach workers, mentors, and peer and professional counsellors to people with addictions. Their efforts continue as the media and public attention has subsided and been replaced by other issues as “the flavour of the month.”

Spirituality has been largely unexplored as a factor in recovery from addictions. The purpose of this research is to investigate the recovery experiences of some of these professionals and volunteers to explore the role of spirituality in the learning processes that transformed them from substance abusers into individuals who abstain from using their drug of choice. By spirituality, I do not mean a particular or set group of religious doctrines although I do use three spiritual traditions to illustrate certain common philosophies. Powerlessness and surrender are often spoken of as key to recovery from addiction. Therefore, another element of the study was to explore the participants’ views on how powerlessness and surrender helped them sustain a clean and sober lifestyle.

The primary research question is: What can this study tell us about the role of spirituality in the process of recovery from addictions? The subsidiary questions prompted by this overarching question are:

- What were the experiences of the participants that led to their addiction and what experiences that led to their recovery? What are the differences and similarities between the participants' experiences of addiction and recovery? How do the experiences of the participants compare with the literature?
- What part did spirituality play in their experience of recovery? Do the participants present themselves as changed? What changed them?
- What are some of the factors that motivated the participants to volunteer and/or work helping others?

In other words, through this study, I sought to understand what brought people to do the work of helping people struggling with addiction. In addition I wanted to know what sustained them in this often frustrating work. In summary, I sought to discover from the participants' perspective, what life events or experiences transformed them from substance abusers into individuals who not only abstain from using their drug of choice but become supports for others in recovery. Thirteen participants agreed to be interviewed for this study. Including myself, there were 11 women and 2 men. Our stories of recovery unfold as a process of ongoing transformation.

Because recovery from addiction is inherently a transformation, the literature on identity transformation appeared to be promising for studying the process of recovery. Researchers from several disciplines have contributed to knowledge on identity transformation, including health, sociology, education and addictions research. Brown (1991) examines the pre-professional socialization of recovering addicts who become counsellors. Hardesty and Black (1999) explore how the role of mother among Puerto Rican women serves as motivation to stop using drugs. Baker (2000) focuses "on the relationship between identity transformation and the social context within which those

transformations take place” by exploring “women’s narratives of recovery in relation to the social context of gender-sensitive treatment using a feminist approach” (p. 865). Lave and Wenger (1991) explore how practicing alcoholic newcomers become recovering sober alcoholic old-timers. For example, in A.A., learning to tell appropriate personal stories is part of the recovery process. Lave and Wenger (p. 79) also discuss the “fashioning of identity” whereby a social stigma, addiction, is transformed into a badge of honour by those recovering from addiction. McIntosh and McKeganey (2000) explore the narratives of their participants’ recovery from dependent drug use as “the process by which they sought to construct a non-addict identity for themselves” (p. 1503). In another study, McIntosh and McKeganey (2001) explore the relationship between an addict’s perception of his or her ‘spoiled identity’, a desire to reform that identity, and recovery from drug abuse (p. 50).

With the exception of Anderson (1994), who explores how both micro and macro factors contribute to transforming identities that accompany movement into addiction and then into recovery, the concept of transformation connotes a positive change. By this I mean that there is a lacuna in the literature regarding the transformation into addiction. This is a crucial lack because I argue that addiction is often a learned response to dealing with painful experiences. Therefore, I suggest that looking at the factors involved in the transformation into addiction is vital to the transformation out of addiction. There has also been little in-depth study of recovery as a learning process, except for Lave and Wenger (1991) and Baker (2000) who touch on learning in Alcohol Anonymous and in two women’s residential treatment centres, respectively.

A 2001 report by the National Center on Addiction and Substance Abuse at Columbia University (CASA) explores the connection between spiritual and religious practices in lowering the risk of substance abuse. The clergy, physicians and treatment providers are the intended audience for this report. The significance of this study is that it is an in-depth exploration of the relationship between spiritual beliefs and the risk of substance abuse. The CASA study states, "At least one study has shown that, the more affirming and positive one's childhood religion, the stronger one's spirituality in recovery" (The National Center on Addiction and Substance Abuse at Columbia University, 2001, p. 27). May (1994), on the other hand, explains how dogmatic religion can be an impediment to spiritual growth and asserts that in some cases individuals must revise or discard the doctrinaire aspects of their religion to heal spiritually.

Patients I have had who are over 50 years old - especially Roman Catholics and Southern Baptists - are prone to attribute their shame from addictive behavior to their violation of church dogma. Moreover, they tend to believe that alcoholism and drug addiction are moral weaknesses to be punished by God. Their sense of "unworthiness" makes it all the more difficult for them at times to stop using (p. 4).

Several of the participants in this study, including myself, come from families where one or both parents were substance abusers. In addition, some of the participants acknowledge their struggles with addiction and parenting. DiLorenzo, Johnson and Bussey (2001) examine the role of spirituality in the recovery process to discover ways to help parents develop healthy parenting skills and drug and alcohol free lifestyles.

Addicted parents of maltreated children can be described as having reached a spiritual dead-end—a spiritual void that contributes to the risk to the individual becoming totally lost. This void provides the context for why and how addicted parents can be either terribly cruel or totally neglectful toward their children. Although this state does not provide an excuse for such behavior, it does help to explain sometimes unspeakable maltreatment (p. 259).

DiLorenzo and colleagues (2001) give one of the most succinct descriptions of spirituality that I have come across thus far. They state, the “notion of spirituality involves a complexity of feelings, thoughts, and attitudes about oneself in the world” (p. 259). One could interpret this description as being broad enough to reflect the difficulty in defining spirituality. However, this definition fails to convey the intentionality that, as this study demonstrates, is part of spirituality.

Before describing the general layout of this work, I present an overview of my attitude about myself in the world and how I have arrived at this research project. I begin with a discussion of the experiences that help form my perspective as a researcher and practitioner, particularly my orientation towards social justice.

The Theological Foundation of My Work in Social Justice

In one of my classes, I had to give a presentation on theory. During the presentation, I ventured to voice my concern about being accused of doing theology and not theory by giving the spiritual foundation of my theoretical position. One of my classmates stated that, “theology is theory.” This may or may not be so, but if theology is the intellectual expression of what is heartfelt and internalized, then it is bound to influence one’s theoretical perspectives. Therefore, in this section, I present my theological outlook as the lens through which I view theory.

I am an African-American (Canadian) Catholic woman and a member of the Franciscan Sisters of Joy, an ecumenical religious community of women. My social location contains several points of marginality within the Catholic Church as well as in the larger society. The Church as a whole is admittedly patriarchal and in North America is a

predominately white institution. The community of sisters to which I belong is marginal within the church because of our stance on living without property as individuals and as a community. More importantly, our Form of Life¹ explicitly states that we not only live among the poor but that we give away what we do not need to sustain ourselves in a simple and modest lifestyle.

The concept of social justice has a long but uncelebrated history within the Roman Catholic Church. Along with those who accept the status quo of the wider society, there have been individuals and movements whose works have challenged the prevailing attitudes in the church and in society. Saint Francis of Assisi did so in the middle ages, and in the 1960s, liberation theology began to gain momentum and adherents.

The two theological traditions that influence my research interests are the Franciscan Movement initiated by Francis of Assisi and the Catholic Worker Movement founded by Dorothy Day and Peter Maurin in the 1930s. These movements share philosophical egalitarian perspectives concretely expressed in that each practiced, as much as possible for their time, equality between the sexes and an absence of race-based exclusion. Although I have only recently become familiar with Franciscan history, I have always been deeply influenced by the spiritual tradition of Saints Francis and Clare of Assisi, usually referred to as Franciscan spirituality.

Spirituality, according to Perrin and McDermott (1997) is “an individual’s philosophy, value, and meaning of life” (p. 1). Of significance here is the concept of spirituality as the basic value around which all other values are focused, the central

¹ A religious community’s Form of Life is like the set of by-laws which distinguishes that particular community from other communities that may follow a common founder or common rule/constitution.

philosophy of life that guides a person's conduct (p. 7). One tenet of Franciscan spirituality is that even if we are marginalized, we are all challenged to become the person God has called us to be and to help others to do the same. It was in this context of theology and spirituality that I became aware of issues of social justice. Hence, my motivation in working for social justice is theologically based.

Like Zarowny (1992), who suggests that we use our own Canadian breaches of justice as the focus and basis for our social justice efforts, I recognize the need for a homemade theology of liberation. Similarly, feminist standpoint theory advises that feminist theorizing cannot and should not be done as if coming from one location. These two streams of thought, feminist standpoint theory and a theology of liberation, advocate that one's work should contribute to positive societal change. Further, change is brought about by the identification and acknowledgement of the unfair distribution of power in society. Then efforts to reduce the power differential should include *working in solidarity with* rather than *doing research on* those relegated to the periphery of mainstream society. In this context, I see no contradiction between feminist thought and a theology of liberation. I situate myself as being influenced by both perspectives in the choice of research project. For me, a theology of liberation occurs at the confluence of the Catholic Worker Movement and Franciscan spirituality. My position may be clarified by the following brief description of the Catholic Worker Movement and my participation in it.

The Catholic Worker Movement was founded by Dorothy Day and Peter Maurin in 1933. Dorothy Day was a journalist involved in the women's suffrage movement. She was influenced by Communist philosophy. Day was a pacifist and a supporter of workers' rights. Day's common law husband abandoned her when she had their daughter baptized.

Soon after, she converted to Roman Catholicism. In 1933, she met Peter Maurin, who introduced her to Catholic social teachings. Maurin advocated “roundtable discussions for the clarification of thought”; “houses of hospitality,” an idea based on early and medieval Christian hospices; and “agronomic universities” or farming communes where workers could learn and professors could work (Ellis, 1988). These three ideals became the foundation of the Catholic Worker Movement. At the same time, the Catholic Worker Movement is dedicated to the social justice interpretation of the Hebrew and Christian scriptures² and the social teaching of the Roman Catholic Church. The Catholic Worker tradition emphasizes orthopraxy (right practice or right actions) as the expression of orthodoxy (right belief). The members of this movement are not necessarily Catholic or Christian. Hence, orthodoxy here means the belief that everyone deserves respect because of the imprint of the Creator on all of creation. For Dorothy Day and Peter Maurin, the reason to get involved is love. Therefore, the solutions to social problems must be rooted in love.

I am a founding and resident member of the Vancouver Catholic Worker. The Vancouver Catholic Worker, in keeping with Catholic Worker tradition, offers hospitality—in the form of food, clothing, shelter and friendship—to those who need it, holds roundtable discussions, and has an urban communal “farm” in lieu of an agronomic university.

Smith (2001) compares the Catholic Worker movement and liberation theology stating, “liberation theology speaks of freedom for the oppressed; the Catholic Worker calls us to voluntary poverty, service and work” (p. 163). Smith is suggesting that liberation

² The Bible, Old and New Testaments

theology appeals to the have-nots whereas the Catholic Worker Movement appeals to those with more material wealth. Smith's comparison needs modification in that not all adherents of liberation theology are oppressed nor are all Catholic Workers poor voluntarily. Despite Smith's generalization, his suggestion remains applicable. He suggests that those in the first world who appreciate liberation theology and would like to become involved need look no further than their local Catholic Worker community (p. 164).

Dorothy Day and Peter Maurin were greatly influenced by Saint Francis of Assisi. Before his conversion, Francis found lepers abhorrent and went out of his way to avoid them. Shortly after his conversion, Francis encountered a leper who was begging for alms. He braced himself, determined to treat the leper as the suffering Christ personified, and gave the leper not just money but the kiss of peace. Francis describes the experience in these words: "that which seemed bitter to me was changed into sweetness of soul and body" (Assisi and Assisi, 1982, p. 154). I relate this story because it illustrates the fundamental aim of the Catholic Worker Movement and Franciscan spirituality, which is to learn how to sincerely embrace the leper.

Those with a history of substance abuse, who participate in the sex trade, or are otherwise marginalized by extreme poverty and homelessness, are the "lepers" of modern, mainstream society. As one who has a history of substance abuse, in addition to being a woman of African descent, marginalization is not foreign territory to me. Franciscan spirituality, the Catholic Worker Movement, and liberation theology build on and reinforce each other, resulting in a radical theological perspective that challenges the comfortable in the Church, and society in general. My research is informed by and in agreement with a

radical theology of liberation and feminist theory. The passion that I feel for issues of social justice is rooted in theology influenced by feminist thought.

Key to my work and identity is the notion of ‘otherness.’ It is a concept or social location central to this investigation of recovery and so I now turn to an exploration of this notion. In the next section I argue that ‘otherness’ is a concept and process constructed and perpetuated by dominant group members and imposed on non-members of that group. Non dominant group members are forced to justify their actions and humanity in a way that is not required of the dominant group since dominant group members are considered the norm by which everyone else and their experiences are compared and measured.

The Other

In contrast to the researcher who is white, Anglo-Saxon, male and Protestant, I am Black, born in the United States, Canadian, Roman Catholic and female. I have been engaged in community development research and evaluation for the past year in a depressed area of Vancouver, British Columbia in Canada. This area is not an ethnic or racial ghetto but an area where poverty is the common denominator among diverse ethnic groups. This research climate calls for me to take a reflexive look at my position as researcher in the examination of points of difference and homogeneity as well as issues of inclusion and exclusion. The purpose of this section is to look at how otherness is perceived and represented and to look at intersectionality as a framework for examining intermarginal research where there is asymmetry of peripheral positions between the researcher and the researched as well as a way to look at research where the researcher is a member of a marginal group and the research participants are not.

I begin with a brief exploration of the differences in perception between the self perception of one designated as Other and a perceiver from the dominant group. Next some of the issues in representation of other(ed) group members are presented. This is followed by a discussion of practices in the academy, which are unselfconsciously exclusionary. The result of these practices can lead to internal conflict for members of marginalized groups who seek academic success.

I'm Not Other To Me

Certain statuses we have are innate and others are acquired. Still they cannot be treated as items that can be simply added or subtracted from one's identity. Different positions or points of intersection become more significant depending on the context and/or the coalitions that are being attempted. According to Arber (2000), recent literature suggests that the nature of positioning is "something strategic, a coalition, a way of resistance, a precursor of agency." Yet, it is simultaneously, "something relational and contingent, mediated by, and mediating, a criss-crossing of understandings and ways of doing" (p. 46). As a member of 'othered' groups, there is often conflict between how I perceive myself and the perception that others, especially members of the dominant group, may have of me. The following anecdote is used as one example of this conflict.

In 1993, I presented a paper at a Graduate Studies conference in Saskatoon concerning the separation of Black or African American studies from the mainstream social sciences of anthropology and sociology in the study of North American people. During a break in the presentations, one of the sociology professors at the University of Saskatchewan asked me if it was difficult for me to learn a new culture when I started school. I was already familiar with the European Canadian assumption that if one is Black,

she or he must be from somewhere other than North America. I told him that all my family members were born in the United States. He repeated the question. I asked him what he meant and he again restated the question. Truly perplexed by the question, I asked in exasperation if he was asking me this because my family liked the New York Yankees instead of the Brooklyn Dodgers. It wasn't until later that I realized that because I am African American, he assumed that until I started school, my socialization had been in a totally separate culture. In reality, I grew up in a working class, racially and ethnically mixed neighbourhood and went to the local Catholic school, where I was the only African American for my first six years there. I watched the same cartoons, wanted the same toys, and had the same aspirations as any other child brought up in downtown Brooklyn in the late 1940s and early 1950s. There was one exception. As the Civil Rights movement moved into full swing and gained coverage in the northern news media, I became painfully aware that certain doors were closed to me. However, this did not mean that I didn't want the opportunity to open and go through those doors.

I relate the story above to introduce two interrelated issues. The first is the possible difference between an individual's perception of their position and the reinterpretation of that position by an observer who is differently situated. The second is how easily the voice of one who is 'othered' is ignored or dismissed. For example, the main point of the paper I had presented was that sociological and anthropological studies of, for and by African Americans should not have to be excluded from mainstream sociology and anthropology. It appears that studies of African Americans that are present in the anthropological or sociological literature deal with some form of social pathology while studies that deal with non-pathological phenomena are found in the Black Studies literature. Further, as Johnson-

Bailey (2002) suggests, when the poor and undereducated are the focus of the discourse, what is absent in the discussion is the privileged group with whom the disenfranchised are being compared. She states, “[r]esearchers often present data on one group and represent the other group in silent absentia” (p. 41). Absentia representation suggests that the attributes of the absent group are the norm and need not be presented. Thus the production of the literature itself may contribute to the formation of certain perceptions, which become fixed. For instance, as early as 1903, W.E.B. DuBois wrote:

They approach me in a half-hesitant sort of way, eye me curiously or compassionately, and then, instead of saying directly, How does it feel to be a problem? They say, I know an excellent colored man in my town; or, I fought at Mechanicsville; or, Do not these Southern outrages make your blood boil? At these I smile, or am interested, or reduce the boiling to a simmer, as the occasion may require. To the real question, How [sic] does it feel to be a problem? I answer seldom a word. And yet, being a problem is a strange experience, — peculiar even for one who has never been anything else, save perhaps in babyhood (p. 178).

More recently, duCille’s (1994) writing suggests the perception of Black women has changed little since 1903. She states,

I am alternately pleased, puzzled, perturbed—bewitched, bothered and bewildered—by this, by the alterity that is perpetually thrust upon African American women, by the production of black women as infinitely deconstructable “othered” matter. Why are black women always already Other? I wonder. To myself, of course, I am not Other; to me it is the white women and men so intent on theorizing my difference who are the Other (pp. 591-2).

(Mis)Representation

Television news media are also complicit in contributing to and perpetuating myths of the Other. In Vancouver, persons of African descent are scattered throughout the city. There is no Black ghetto as exists in some large American cities. Less than one percent of the population of Vancouver is of African descent. Yet, one December, a news feature about the Christmas Bureau— an organization that helps poor families during the pre-Christmas

season—showed a Black woman and her child waiting in line to be served. My reaction, and I think it was justified, was how long did they have to wait to get *that* picture. In a similar vein, Williams (1997) relates a short exchange between a reporter and a homeless person that illustrates the assumptions made based on perceptions from the privileged view.

The one time a reporter talked to a homeless person, the exchange was direct. “Why would you rather sleep on the street than go to a city shelter?” asked the reporter. The old man snapped back: “Don’t put words in my mouth! I don’t want to sleep on the street; I’d rather be sleeping in a penthouse on Fifth Avenue overlooking the park with a maid and a chauffeur and a cook who could make me a dinner of lamb chops. What’s *your* address?” (p. 37).

In other instances, individual members of categories designated as Other are expected to be the spokespersons for the entire group. This ‘on the spot’ position happens with the media and in social as well as academic settings. Bowers (1996) points out

one person or group cannot represent all people who are African American or all people who are women; however, the public expects univocal oppressed groups, assuming that anyone who fits the general definition functions like all others in that category—a faulty premise” (p. 502).

This tactical device renders what is said meaningless under the guise of giving voice or the opportunity to speak.

Because of the formulaic template through which marginalized persons are perceived, silence, censure, and erasure continue to be painful and potentially spirit-killing issues for minority group members, including those who have been privileged, on the surface, through academic credentialing (Washington and Harris, 2001, p. 80). The credentialing process itself is complicit in the silencing and erasure. Peters (1991), a white woman who identifies herself as from a poor background, relates the futility of trying to find herself in the literature.

I couldn't find courses about poverty. I didn't read myself in the text. I found myself being taught the sociology of the status quo. When I did read about class struggle, with few exceptions... it was from the "Peace Corps" perspective, those from privilege using their advantages to empower those without, a gift from the patrons of the poor (p. 247).

Peters discusses how her search took her outside of mainstream sociology to look at literature by and about women and to discover the "thoughts of persons of color." She states, "My poverty background helped me identify with many of the things they had to say" (Peters, 1991, p. 247). Peters acknowledges that the things she learned in class broadened her perspective but it wasn't enough to make her feel she belonged or was being heard (p. 247).

Just as those who are other may not find themselves in the literature, Sarris (1993) describes the process through which the view from the margins is obscured in the teaching and learning process. He discusses how the concept of critical thinking itself is socially constructed and how it serves as yet another exclusionary device.

Teachers and students are led to believe that some people think critically while others do not, so that those who have critical thinking must teach it to those who do not have it. What is taught is more likely to be a set of cultural norms associated with modes of a specific and culturally based type of critical thought, and the subjects examined are those within a given knowledge base established and maintained in very specific ways. We get caught in and perpetuate a kind of vicious circle where those students who don't think the way we do reinforce for us, in their inability to think in a manner we call rational, the need for us to teach them. Intentionally or not, critical thinking is taught as a normalizing device. All that could engender strong sense critical thinking—that which would challenge given assumptions and enable students and teachers "to see beyond the world views that distort their perception and impede their inability to reason clearly"—has been effectively excluded (p. 153).

Sarris (1993) suggests that "cultural biases influence interpretive acts" (p. 152).

Hence, when texts are substituted for actual experiential knowledge of actual people, the result can only be reified bright ideas. For example, Collins (1998) proposes the idea that

texts have been used in place of interaction with persons designated as other. She discusses how the work of Black women writers is used as a substitute for any sustained social or political relationships with black people” by the institutions of the dominant groups.

This treatment of Black women’s texts enables members of privileged groups who cannot deal with *actual people* who are constructed as different under hierarchical power relations to substitute the *idea* of difference for conflict-ridden interpersonal contact” (p. 55-56).

Self versus Self

The desire to be accepted and for one’s work to be taken seriously by the mainstream may contribute to self-silencing. The quest for acceptance and/or to have a voice is not limited to people of colour. For example, according to Peters (1991) “[s]ometimes the voices of the women of color saying important and vital things can silence the voices of white women who have shared some of the experiences of being poor, rural, disabled, treated as ‘less than,’ and so forth” (p. 250). While this may be true, I suggest the desire to belong to the mainstream also plays a part, as Peters also discusses in the following situation:

Those of us who have found our way from the margins of poverty to and through doctoral programs have a unique voice that can be in danger of being quelled for more than one reason. First, poverty is not exactly like a hometown. It is not a place to which we particularly want to return. We may silence ourselves by trying to eliminate the traces of our backgrounds as we move through the university system.... Second, we do not read ourselves in the text. Rather than speaking with ‘our’ voice, we learn to become the status quo through the silencing of being disciplined, learning to speak in terms that are ‘familiar and comfortable’ to those of more traditional backgrounds. When we acquire the academic language that doesn’t ‘fit’ the poverty experience, we suppress the experience rather than use the language that does ‘fit’ because we want to be REAL [sic] sociologists (p. 251).

Certain factors and experiences cannot be suppressed. Racial minority status is one that can’t be masked by language style. Collins (1998) coined the term ‘outsider-within,’ at first, to describe “individuals who found themselves in marginal locations between groups

of varying power” (p. 5). She later expanded the definition to “describe social locations or border spaces occupied by groups of unequal power” (p. 5).

Individuals gain or lose identities as ‘outsiders within’ by their placement in these social locations. Outsider-within spaces are riddled with contradictions. From the perspective of members of dominant groups such as the White girls in my high school, individuals like me who occupy outsider-within locations appear to belong, because we possess both the credentials for admittance and the rights of formal membership.... Formal citizenship rights do not automatically translate into substantive citizenship rights (pp. 5-6).

In addition to the outsider within situation, there is what Sarris (1993) calls “an insider coming back from the outside” (p. 69). This position includes those who have gone away from the group and expanded their horizons through university education. Sarris refers to himself as “an insider coming back from the outside” in his study of the Kashaya group of Native Americans. He voices his concern that his work could have unintended consequences, such as compromising his Kashaya family members or revealing private information. Sarris states that, “as an ethnographer, I am positioned as both participant and observer (and the observed) of certain cultural practices among my people” (p. 174). He expresses the need to “mediate not only between different purposes regarding the study of American Indian culture and texts but at the same time between different modes of discourse about those different purposes” (p. 69).

Intersectionality and its limits

The differences in perception, the practices of erasure, silencing and misrepresentation are factors that are particularly significant to me as a researcher. For example, if I leave my racial and ethnic group status unstated, the default would be assumed. It is unfortunate, but

there are defaults for race and class, namely white and middle-class respectively³. In addition, because my work is not with the African (North) American community, I worry about the double bind of being ignored by mainstream research community because I'm African American and by African American scholars because my work is not with African Americans. So, in trying to find and define my position, I am trying to quell these fears. Yet in the end, it is as Arber (2000) suggests, positionality is more than stepping into predefined identities because identity "is always slipping, always in the process of becoming" (p. 60).

At every turn, I add layers and layers of complexity. And still—and still—and still, I want to write, there is so much more to say— and less. These intuitive awarenesses of positioning— one of solidity, of concreteness of definitive understanding of who we are and where we are placed; the other of increasing complexity, of fragmentation, of change, of being something more or less than— work together as I struggle to define who it is I am. If I am to define positioning, then I must begin by recognising and explaining both these solidnesses and fragments, these more thans and less thans and just the same as, these choosings and absolute powerlessnesses (p. 47).

Our position in a stratified society influences what we perceive, the phenomena that attract our attention, and therefore the questions we ask. In addition, geographic difference often determines which groups are considered as minority and the positioned response to that consideration. Johnson-Bailey (2002) discusses this in relation to different sections of the United States.

The group designated as minority varies according to the critical mass in a geographical area. For instance, when educators in Texas talk about minority concerns, the minority in question are Mexicanas(nos), and in Oklahoma they are referring to Native Americans. As a hierarchical society, we rank-order groups according to their alleged contributions and participation in maintaining society (pp. 40-41).

³ Gender can usually be determined from the researcher's name.

I suggest Johnson-Bailey's perspective also applies to differences between the United States and Canada as well as differences in geographical locations within Canada. For example, there are more reports of racism against people of African descent in Toronto, where there is a large Black population, than there are in Vancouver, which has a relatively small number of Black people.

My professional research projects have been conducted mainly in the inner-city section of Vancouver known as the Downtown Eastside-Strathcona. Those who live in the Downtown Eastside are considered lower class, 'no good,' while those who live in Strathcona are considered working and lower middle class. Yet, the middle and upper middle class business community is claiming more and more of the Downtown Eastside as part of Strathcona. In reality the boundaries have become quite blurred. To blur things even more, this area is home to the largest Chinatown in North America after San Francisco. The Downtown Eastside-Strathcona area is composed of those working toward improving the quality of life of the neighbourhood, those who are trying to escape the pain of their lives through substance abuse and prostitution, and those who are there because the area is tolerant of people suffering from mental illness. These groups are not mutually exclusive. The socio-economic origins of the groups are diverse. The racial or ethnic groupings in the area seem to fall into Aboriginal⁴, Chinese, Hispanic and 'Everybody Else.' Those in the 'Everybody Else' category come together to form different interest-based alliances, split apart on other issues, then reform for yet other issues. Many of these alliances include the Hispanic and Aboriginal groups and on rare occasions the Chinese community as well. Group membership and therefore, insider status, is not a clear-cut,

⁴ I used the term "Aboriginal" as inclusive of all groups of indigenous peoples of Canada.

discrete entity but an example of Crenshaw's (1995b) assertion, "the organized identity groups in which we find ourselves are in fact coalitions, or at least potential coalitions waiting to be formed" (1995b, p. 377).

The literature suggests that most studies involve a researcher who is a member of the dominant group in society or a researcher with racialized marginal group membership, studying his or her own group (Brayboy and Deyhle, 2000; Johnson-Bailey, 1999; Kanuha, 2000; Limon, 1991). I have not come across a study in which a member of one racially marginalized group is doing research with members of the dominant society or with racialized groups of which s/he is not a member. In addition, as Crenshaw (1995a) suggests, "ignoring difference *within* groups contributes to tension *among* groups...." (1995b, p. 357, emphasis in original). Intersectionality provides a basis for exploring intermarginal research where asymmetry of peripheral locations exists between the researcher and the participants of the research.

Navigating intermarginality is a continuous personal challenge in working in the Downtown Eastside of Vancouver. However, in this study, 11 out of 13 people who agreed to participate are white and from middle or working class families. In this instance, the concept of intersectionality became even more useful, especially as proposed by Staunaes (2003) who puts forward a discussion of intersectionality that goes beyond the usual intersections of minority statuses by suggesting the concept of a "majority-inclusive approach." She proposes that, "social categories such as ethnicity, gender and age are not perceived as special minority issues" (p. 105). Staunaes clarifies what she means by this as follows:

I mean a view of ethnicity, gender and age as categories that are not the prerogative of certain actors but rather as categories that are produced, sustained and subverted in relation to one another. Categories are broader issues situated in the relations between actors and between different distributions of power. Social categories do not count only for the Others, the non-powerful and the non-privileged: they also count as conditions for the more privileged and powerful people (p. 105).

Reconceptualizing intersectionality as Staunaes suggests would render all under study visible, including the usually invisible groups/individuals held as the norm against whom all others are compared. It has the potential of revolutionizing what is considered the norm by exposing 'actual' as opposed to 'understood' realities.

Moving beyond difference (with its assumed question, difference from what?) to the conceptual terrain of intersectionality creates new conceptual space. By jettisoning the implicit assumption of a normative center needed for both oppositional difference and reconstructive postmodern tolerance for difference, intersectionality provides a conceptual framework for studying the complexities within historically constructed groups as well as those characterizing relationships among such groups (P. H. Collins, 1998, p. 153).

Conversely, Collins (1998) also warns that using intersectionality at the level of the individual dampens its critical edge. Collins maintains that "when examining structural power relations, intersectionality functions better as a conceptual framework or heuristic device describing what kinds of things to consider than as one describing any actual patterns of social organization" (p, 208).

Stacey (1996) suggests that feminist scholars and critical ethnographers "bring to their work an awareness that ethnographic writing is not cultural reportage, but cultural construction" (p. 93). For me, this includes being aware of and honest about the internal tension between self-perception and my perception of how others view me and of being both insider and outsider. For researchers on and of the periphery, vigilance with regard to

exclusionary and silencing strategies— including those that originate from self—is imperative.

My present work and research interests call for a framework that will allow me to analyze and reflect upon my relationship with research participants who are differently marginalized than myself and participants who are differently privileged. This project demonstrates that center and periphery, marginal and mainstream are not static but mutable positions.

In this section, I have attempted to make my motivations and perspectives transparent. Research, however, is about discovery. So in the next chapter I consider the literature from several disciplines in order to identify where this project can contribute to the expansion of knowledge on addiction, recovery and spirituality as learning processes. Before going to chapter two, the organization of this report is outlined in the following section.

Organization

Chapter Two is a review of the literature, which begins with a look at the relationship between societal conditions that contribute to substance abuse and make recovery resources less accessible for some segments of society. The literature on the role of identity reconstruction in recovery from addiction is discussed as a means to explore who is missing from this study and possible explanations for this. The Twelve Steps of Alcoholics Anonymous as a program of recovery leads in to the discussion of the literature on spirituality and addiction.

Chapter Three presents the research methodology, in which I discuss how the data was collected, the demographic information on the participants and a description of the analytical process.

In Chapter Four, the childhood experiences of the participants are presented. This chapter explores the relationship between adverse experiences in childhood and substance abuse in the lives of the participants as suggested in the literature. Some of the participants imply the connection between unmet needs in childhood and addiction. Throughout this chapter the participants' experiences are compared with the literature.

In Chapter Five, the participants' experiences of recovery are examined. For example, from their stories, it is evident that the participants attribute spirituality with playing a significant part in their experience of recovery. The 12-Step program, the 16-Step Program of Dr. Kasl and the participants' narratives form the basis of a cyclical concept of the recovery process. The cycles are simultaneously learning and teaching experiences, which promote growth in recovery and spirituality. For example, the participants discuss the paradox of how admitting powerlessness and surrendering resulted in having the power to stop using drugs or alcohol, when so many other self-willed avenues had failed.

In Chapter Six, I argue that helping others is an outward expression of the spiritual growth that takes place in recovery. The value of the social support found in step groups is briefly examined, especially in how it relates to developing care and concern for others.

In Chapter Seven, I revisit the research questions and present how the research findings respond to the questions. This work concludes with a presentation of some of the questions and possibilities for future research that were raised by this project.

CHAPTER TWO: LITERATURE REVIEW

The purpose of this chapter is twofold. The first is to demonstrate that there is a lacuna in the literature on the journey into *and* out of addiction, especially the role of spirituality in the recovery process. The second is to explore possible explanations for the lack of people of colour in the study. Addiction has both micro and macro contributing factors. I explore the macro or societal factors by looking at marginalization and examining the disruptive influence of a market driven society on the social supports that tempered societal demands on the individual in earlier times. Then I look at marginalization not as an homogenous condition, but at how groups and individuals are differently marginalized. The framework of a relational understanding of intersectionality and intermarginality can contribute to a better understanding of marginality. This discussion is not one of what groups are more oppressed than others but a look at the consequences of and remedies to marginalization that have been suggested in the literature. Next I explore the literature on the importance of identity reconstruction in recovery from addictions. Racism and its intergenerational effects are discussed with an eye to the possibility that racism, cumulative or repetitive trauma, and the lack of culturally sensitive recovery resources may account for the lack of participants of colour in this project. The last two topics in this chapter look at the 12-Step influence on recovery from addiction and addiction programs and the literature on spirituality and sobriety.

Marginalization As Dislocation

Alexander (2001) uses the term ‘dislocation’ to describe the alienation produced by a free market society. Alexander argues that dislocation is the underlying cause of addiction,

which he defines as “a harmful lifestyle, which may or may not involve drugs” (2001, p. 19). He posits that when people are dislocated from intimate social relationships—“from the family to the spiritual community”—they adopt a compulsive lifestyle as a desperate substitute. Alexander uses the term “psychosocial integration” to describe the sense of belonging and the sense of purpose that is strived for by establishing and maintaining close relationships. When people cannot achieve psychosocial integration they develop substitute lifestyles. These lifestyles include “excessive habits including—but not restricted to—drug use, and social relationships that are not sufficiently close, stable, or culturally acceptable” (2001, p. 1).

Alexander (2001) argues that all members of modern western societies have to participate in a free market system that controls labour, land, money and consumer goods. Participants in free markets must don the role of “individual economic actors”, who are unhampered by family and friendship obligations, clan loyalties, community responsibilities, charitable feelings, their values, or their religion, ethnic group, or nation (p. 4). There is a certain congruence between Alexander’s free market society concept and Beck’s (1999) ‘risk society’. In risk society,

[t]he individual is turned... into the bearer of rights (and duties) – but only as an individual. The opportunities, hazards and ambivalences of biography which once could be coped with in the family unit, in the village community, and by recourse to the social class or group, increasingly have to be grasped, interpreted and dealt with by the individual alone. (p. 75).

Jansen and Wildemeersch (1998) suggest that the pressure to make permanent personal choices — including choices that affect one’s future life course—coincide with two conditions that jeopardize the development of a stable and self-determined personality. First, in contemporary society there is a precariousness to social and personal life that

renders nothing as certain and solid: “In the risk society nothing is certain and solid: the well-considered choice of today may prove to be the miscalculation of tomorrow” (p. 3). Second, issues of identity become disconnected from the public domain and are seen as the responsibility of the individual.

It [risk society] burdens the individual with the task of building continuity into his or her own biography, amidst the bewildering changes and options experienced in the different, often contradicting, social and cultural contexts in which he or she is situated (p. 3).

Jansen and Wildemeersch suggest individualization has had a positive emancipatory effect, but it has also contributed to growing social inequities. Alexander (2001) emphasizes the necessity to combat the dislocation and marginalization caused by free market society. The key to controlling addiction requires creating and maintaining a society “in which psychosocial integration is attainable by the great majority of people. People need to belong within their society, not just trade in its markets” (Alexander, 2001, p. 20). I believe that the general commodification of almost everything in modern life exacerbates the dislocation that afflicts our society. I concur with Alexander’s suggestion that fundamental political and economic changes are necessary to adequately address the problem of addiction. According to him, the starting point for political change “is a realistic discussion of addiction that recognizes that addiction is mass-produced in free market society, and that society, as well as individuals, must change” (p. 2).

Marginalization is often discussed as something that happens to individuals or groups belonging to certain economic, racial and/or social classes. Alienation is written of as something to which those who are dissatisfied with or cannot compete in the progress-, specialization-, conspicuous consumption-minded values of market driven society fall prey. What is not discussed, as Collins (1998) suggests, is that the center/margin metaphor that

had once been an important site of resistance has been “increasingly distanced from its initial grounding in structural, group-based power relations” (p. 129). Therefore conceptions of power such as tops and bottoms have been “recast as flattened geographies of centers and margins” (p. 129).

Once decontextualized in this fashion, because all groups now occupied a flattened theoretical space of shifting centers and margins, decentering as a strategy could be more easily appropriated by groups situated anywhere within real-world hierarchical power relations. Decentering as a resistance strategy was no longer reserved for those actually oppressed within hierarchical power relations of race, class, and gender. Instead, decentering could now serve as a loose cannon/canon that could be aimed in any direction on this newly flattened center/margin power landscape (p. 129).

Multiculturalism and the discourse of difference have been used to soften the blow or deflect the impact of the reality of social exclusion. Collins (1998) describes multiculturalism as a state construct for the purpose of homogenizing minority collectivities.

Over time, historically situated differences between oppressed groups become collapsed into and trivialized within an identity politics of unmeltable minorities characterized by essential differences. The power of the seemingly homogeneous majority remains intact, whereas the groups on the bottom compete with one another to receive increasingly smaller portions of the fixed segment of societal resources reserved for them.... Justice becomes conceptualized as a bundle of static things, often in scarce supply, that are distributed to the most worthy (pp. 52-53.).

Collins (1998) further suggests that the discourse of difference separates stories of difference from their ethical or political contexts and minimizes the significance of differences that are forced on groups with “readily identifiable biological markers such as race, sex and age” (p. 149). The discourses of social exclusion and social inclusion provide a way— along with an intersectionalist framework— that can help unpack the notion of marginalization.

Social exclusion is a term that has entered British policy debate, which their government defines as, “a shorthand term for what can happen when people or areas suffer from a combination of linked problems such as unemployment, poor skills, low incomes, poor housing, high crime, bad health and family breakdown” (SEU, 2001, p. 10). It is a “deliberately flexible definition” because it includes characteristics that are “linked and mutually reinforcing and can combine to create a complex and fast-moving vicious cycle” (p. 10). The key characteristics and the key risk factors are one and the same. They include: low income; family conflict; being in care; school problems; being an ex-prisoner; being from an ethnic minority; living in a deprived neighbourhood in urban and rural areas; mental health problems; age and disability (p. 11). The Canadian researcher Saloojee cites Walker and Walker’s definition of social exclusion as,

a comprehensive formulation, which refers to the dynamic process of being shut out, fully or partially, from any of the social, economic, political or cultural systems which determine the social integration of a person in a society. Social exclusion may therefore be seen as the denial (non-realization) of the civil, political and social rights of citizenship (Walker and Walker 1997, p. 8 in Saloojee, 2003, p. 2).

Britain’s Social Exclusion Unit (SEU) noted that people from minority ethnic communities were more likely to suffer the effects and conditions of social exclusion and that racial discrimination plays a key role. Social inclusion is seen as the remedy for social exclusion. However, there are several perspectives on social inclusion. For example, the Laidlaw Foundation published several reports on social inclusion based on the premise that there are five cornerstones— valued recognition, opportunities for human development, involvement and engagement, proximity, and material well-being— that are key to social inclusion, which they suggest “is about making sure that all children and adults are able to

participate as valued, respected and contributing members of their communities and society” (Luxton, 2002, pp. x-xi).

Viswanathan, Shkir, Tang, and Ramos (2003) suggest that grassroots level groups in racialized communities have been under-represented among those engaged in exploring social exclusion. They argue that in the literature, the role of racism as key to structural inequalities is not given the significance it deserves. According to Viswanathan and colleagues, we must advance beyond discourse on the definition of social inclusion and of the barriers reinforcing social exclusion to a politicized discourse on social inclusion (p. 7). Viswanathan and colleagues argue that “[w]hat is still lacking in the social inclusion discourse is a discussion on the processes by which inclusive policy could be achieved and how this could involve developing processes of ‘political inclusion’” (p. 9). Collins (2003) points out that social inclusion is not to be confused with ‘equivalent outcomes for citizens’ because it does not focus on the relative disadvantage between groups but on the absolute disadvantage of a particular group in society (p. 7).

The objective is not some notion of equality of welfare, but one of securing a minimum level of welfare for every citizen. Its typical targets are ‘child poverty’, ‘unemployed youth’, or ‘racial minorities in deprived neighbourhoods’, not a more general equalisation of Welfare.... There is a perfectionist element in the idea of social inclusion, in that there is a conception of the essential elements of ‘well-being’. These essential elements of ‘well-being’ include material goods such as food and shelter, but also include opportunities to participate in meaningful ways in social life. These nonmaterial goods include a fulfilling level of education, participation in politics, cultural activities, and work. Individuals should be able to pursue their chosen goals in relation to these non-material goods in order to achieve a state of ‘well-being’. Thus ‘well-being’ combines subjectivist and objectivist notions of welfare (p. 8).

Helgason, (2002) points out who and what is doing the excluding needs to be explored before the attempt to apply social inclusion strategies. He emphasizes the role of choice and argues that “choice is necessary; choice in who sets the agenda and the right to

choose whether or not inclusion is an objective” (n.p.). Saloojee (2003) argues that “contemporary discourse on social exclusion is too narrowly focused on poverty and integration into the paid labour market, and it potentially obscures a bigger debate about exploitation and the extent to which racism creates a dual labour market that leads to the super-exploitation of workers of colour” (p. 3). She explains how racism is both an ideology and a set of practices, stating,

As an ideology racism seeks to both legitimate the inequality faced by racialized groups and proclaim the superiority of the racial group that constitutes the status quo. Racism also consists of a set of mechanisms to ensure sociopolitical domination over a racial group (or groups). And racism involves discriminatory practices, which work to constantly exclude, marginalize and disadvantage the subordinate racialized groups (Saloojee, 2003, pp. 3-4).

For an individual who is a life-long target of racism’s arrows, the effects can be invisible yet devastating because they sting our sense of self, our identity. In the next section, the literature on identity transformation is explored. What has been implied in the previous discussion is made more explicit in the next section as I argue that the construction or reclamation of a positive self-image can be hampered by negative self images as a result of internalized racism.

Identity Reconstruction and Recovery

Identity transformation appears to be an essential element in the process of recovery from addiction. Baker (2000, p. 864) states, “This can be done by reverting to an old identity, extending an identity present during addiction, or creating a new, emergent identity”. Baker is concerned with filling the gaps in the literature regarding, “a focus on the relationship between identity transformation and the social context within which those

transformations take place” by exploring “women’s narratives of recovery in relation to the social context of gender-sensitive treatment using a feminist approach” (p. 865).

Baker (2000) interviewed women from two women-centered residential substance-abuse recovery programs. “The aims of the programs are to provide effective treatment for substance abuse as well as to address issues like sexual and physical abuse, psychiatric illness, and parenting skills” (p. 865). Baker found the women used the term ‘discovery’ to describe what they were learning about themselves and their “addict lifestyle, emotional well-being, and parenting” (p. 866). Similar to the findings of Hardesty and Black (1999), Baker found the identity of good mother was important to the women and that their children were important to them and their treatment.

Snow and Anderson (1987) use the term “identity work” to conceptualize the range of activities used to create, present, and sustain personal identities that support one’s self-concept (p. 1348). One of the activities involved in identity work is verbal construction and assertion of personal identities, which Snow and Anderson refer to as “identity talk” (p. 1348). In exploring identity talk, they found that people on the lower and lowest rungs of the economic ladder have the same dreams and aspirations as the middle-class, but have unequal means and opportunities to bring them to fruition (p. 1365).

Lave and Wenger (1991) state “Cain (n.d.) argues that the main business of A.A. is the reconstruction of identity, through the process of constructing personal life stories, and with them the meaning of the teller’s past and future action in the world” (p. 80). For Lave and Wenger, story telling in A.A. has a dual purpose:

Participants engage in the work of staying sober and they do so through gradual construction of an identity. Telling the personal story is a tool of diagnosis and reinterpretation. Its communal use is essential to the

fashioning of an identity as a recovered alcoholic, and thus to remaining sober (Lave and Wenger, 1991, p. 84).

McIntosh and McKeganey (2000) examined the recovery narratives of 70 recovering addicts. They studied the process by which their participants sought to construct a non-addict identity (p. 1503). McIntosh and McKeganey suggest there are three ways recovering addicts' narratives work to construct a new, non-addict identity. First, they reinterpret aspects of their drug-using lifestyle. For example, one of their respondents made a distinction between the synthetic confidence associated with drug use, "it was all false," and the authentic confidence gained in association with recovery. The second way is for individuals to reconstruct their sense of self. For example, the participants' recovery narrative would involve differentiating between the following images of self: self before drug use, the person they became with drug use, and the self they aspired to be (p. 1505). The third way addicts' narratives work to construct a new, non-addict identity is providing convincing explanations for recovery.

In another study, McIntosh and McKeganey (2001) explore the relationship between an addict's perception of his or her "spoiled identity", a desire to reform that identity, and recovery from drug abuse. They suggest the events that give rise to their participants' review of their identities can be either negative or positive. They state negative experiences and events present the individual with the damage to their identity. On the other hand, positive experiences and events provide the possibility of "an alternative future" and reinforce the advantages of a drug free lifestyle (p. 53).

McIntosh and McKeganey (2001) suggest that the recognition of one's identity as tarnished and the desire to change were not enough by themselves to effect change in one's drug use. They conclude, "two things seem to be important for a successful decision to

stop using drugs: (1) a motivation to stop which is based upon a desire to restore a spoiled identity and (2) a sense of a future that is potentially different from the present” (p. 57). Unfortunately, I know from my own experience as a member of a racialized group that racism, if internalized, can result in an individual seeing their identity as tainted. Even when negative self-conceptions are overcome, the tenacity of racism does not instill in those who are continuously injured by it the vision of a future that is different than the past.

Racism: Is There a Future That is Potentially Different from the Present?

The Anglican Archdiocese of New Westminster, which includes Vancouver, conducted a study a few years ago to determine what was needed most in terms of drug treatment facilities for the Downtown Eastside. In addition to finding that treatment and recovery resources were insufficient, the task force found “the client group in greatest need of recovery facilities is single aboriginal women aged 18 to 25 years” (Downtown Eastside Working Group, 1998, n.p.). Despite this lack of treatment resources, there are several Alcoholics Anonymous groups whose members are First Nations women and men with long-term sobriety. Therefore, one of the issues that has plagued me since the completion of data collection is why almost all of those who agreed to participate in my study were white. One reason is that some potential participants of colour were tired of being researched, that is, of being treated as tokens or representatives of their particular group. This led me to ask is it possible that there are obstacles to recovery for certain groups. If, as McIntosh and McKeganey (2001, p. 57) suggest, “a desire to restore a spoiled identity and a sense of a future that is potentially different from the present” are key factors in successful identity transformation and recovery from addiction, racism is an impediment to both of these factors. For example, in discussing the impact of minority status on success

in school, Ogbu (1992) argues that one reason for the poor school performance of “involuntary minorities” is their distrust of “White people (or their minority representatives) who control [schools and] other societal institutions” (p. 291). Ogbu defines voluntary minorities as those who immigrated in search of a better life. Involuntary minorities are those groups who were colonized or those who are the descendents of slaves. These groups include Native Americans/First Nations and African Canadians/Americans, those who have no other homeland. He suggests that voluntary minority group members are more successful in school than those from involuntary minority groups.

One between-group difference is the percentage of strategies any given minority group has that enhance school success. Those groups with a high percentage of success enhancing strategies have more choices that lead to success. Those groups with a lower percentage have fewer choices that lead to success (p. 292).

Involuntary minority groups have had to deal with institutional racism as an historically entrenched reality. The psychological effects of systemic racism are intergenerational. Apprey (1998) uses the term “transgenerational haunting” to describe how the negative psychological effects of institutional racism change as they pass from one generation to the next.

Under the rubric of transgenerational haunting, we come to the transfer of destructive aggression from one generation to the next. In such a transfer we may witness a shift from suicide in one generation, murder in the next, followed by, let us say incest or physical abuse in a subsequent generation, and so on and so forth. It is as if the injured group has accepted the message that they do not deserve to live and therefore must die in one form or another. At the very least that injured group may exist in a reduced form such as living but living a most unproductive life. Here the motor of ambush toward one's death remains the same but the license plate, that is, the form of reducing oneself to nothingness, changes from one generation to the next (n.p.).

In addition to the legacy just described, there are what Gooding (2003) terms microaggressions, which describe the day-to-day racism people face, “the kind of thing that

happens when you step into a lift and the [white] woman inside pulls her bag slightly closer to her” (p. 5). There’s nothing the Black person can do. “It happens every day—it’s these acts that change the way you view yourself and the world around you” (p. 5). It is interesting to note that in the original Gooding uses simply the word ‘woman’ as if accepting the unstated ‘white’ as normative. The next section affirms my contention that these microaggressions cause traumatic and cumulative stress. I omit the term ‘post’ because for members of visible minorities, the traumatic experiences recur continually and are therefore never ‘post’.

Several researchers agree that people are traumatized when they face uncontrollable life events and are helpless to affect the outcome of those events (Lindemann 1944 in Dayton, 2000, p. 5). Individuals may be traumatized by the experience of growing up in a home where addiction, chronic physical, sexual or emotional abuse, or neglect are present. Middleton-Moz (1989) posits that children who have faced cumulative traumas

might never remember what really happened, yet the buried feelings and emotional reactions to these experiences may direct the course of their lives. As adults these individuals may suffer from panic attacks, bulimia, chronic depression, antisocial behavior, compulsive behavioral problems and addictions (p. 4).

She acknowledges that pathology is not inescapable but cautions,

Some children of trauma may eventually become leaders of corporations, doctors, psychologists, artists or poets. The pain and sensitivity of past experiences may help them create gifts to the world, yet many will treat themselves with disdain and neglect through workaholism, extreme perfectionism (p. 5).

Racism and discrimination are sources of cumulative trauma. Middleton-Moz (1989) tells the story of an Inuit boy, Danny, who was with his parents in a department store, “running his hand gently across the face a blond white-skinned doll” while within earshot the father of a white boy chastises his son, saying ‘Damn it, son.... Get up off that

floor; you look like a drunk, squattin' Indian!' In response, Danny's parents look away and silently lead him from the store" (p. 4). She states that the lesson Danny may learn from instances like this could lead to the internalization of self-hate. According to Milora (2000) "a negative sense of self derives, at least in part, from one imagining being perceived in a less-than-positive light by others. Cultural racism assaults victims with *real* experiences of being perceived as less-than-human" (p. 44, italics in original). The accumulation of racist incidents over time is devastating to a child's self-concept. Middleton-Moz explains:

The trauma in this case is the continual erosion of self-esteem faced by ethnic and cultural minorities in a world where they are seen as lesser than others. The belief may develop early in these children's lives that their families lack power in the majority culture. Cultural and ethnic self-hate leads to a sense, deep in the core of the self, that "there is nothing I can do to make up for the lacking in myself and the awareness that I am deeply and profoundly unlovable."

This shame is frequently multigenerational. The child not only receives continual cues of his lack of power and lovability from the real world outside the family but may also feel it deeply from his parents whenever they have contact with the broader community (p. 10).

Researchers agree that trauma victims try to control their inner turmoil and their struggles with the outside world by self medicating with drugs, alcohol, over-eating or other addictive behaviours (Davis, 1997; Dayton, 2000; Fullilove and Lown, 1992; Kaslow, Thompson, Price, Young, Bender, Wyckoff, Twomey, Goldin, and Parker, 2002; Middleton-Moz, 1989; Milora, 2000; Price and Simmel, 2002). Dayton (2000) asserts that unresolved childhood trauma may result in the onset of post-traumatic stress disorder symptoms in adulthood, "which can and often do lead to addiction" (Dayton, 2000, p. xxi).

When the self-medicating substance wears off, the person is again overwhelmed by the pain, which now has further isolation, shame and unresolved pain added to it. Hence, the need for a substance to assuage a stormy inner world becomes even more pressing. Thus, the trauma victim enters a vicious circle: *emotional and psychological pain—self-medication with drugs, alcohol, food, sex, etc.—sobering up—reemerging of*

unresolved pain—more medication, and so on (Dayton, 2000, p. 18 emphasis in original).

According to Lowery (1998), alcoholism among Native Americans is primarily a crisis of spirit. “The sense of coherence of an entire people was shattered at the turn of the century. There was no lawfulness, no cultural explanation, no magic, and no predictability. The world truly went upside down” (p. 4). Lowery suggests the generic substance abuse treatment of the dominant society is insufficient to heal, “the devastation to the spirit that American Indians addicted to drugs and alcohol suffer” (p. 5). She suggests that although Aboriginal populations are often seen as powerless, they are not. Rather, it is that the powers they possess are not valued in the dominant society. Lowery states,

Their cultural teachings of interdependence—obligation and caretaking, the sharing of power, the recognition of the spirit in all things, the responsibility given by the Creator to preserve Mother Earth, and acknowledgment of those who have come before them and those who will come after them—are all part of who American Indians are. These teaching[s] provide the strength from which Indian peoples come (p. 5).

Lowery (1998) argues that we must acknowledge the interconnectedness of all living things and “that human beings are only a part of this total ecology” (p. 5). We must acknowledge that alcoholism is a crisis of the spirit, which requires a healing of the spirit, of the mind, and of the body within a larger framework of existence (p. 5). The 12-Steps of Alcoholics Anonymous (AA) attempts to bridge the connection between body and spirit and relationship with others in their recovery program. Since many recovery and treatment programs are based on or at least influenced by AA’s 12-Steps, in next section the strengths and weaknesses of the 12-Steps are briefly examined followed by a brief look at several alternative programs. Some of the members of these alternative programs attend AA as well as the alternative while others only attend the alternative.

Twelve-Step Influence

Narcotics Anonymous, Cocaine Anonymous, Overeaters Anonymous, Al-Anon, and Adult Children of Alcoholics are just some of the groups that are based on the 12-Steps of AA, a program based on abstinence from alcohol and peer support. AA advises the only way for an alcoholic to stay sober is to help other alcoholics. The program of AA consists of 12 steps (Alcoholics Anonymous World Services Inc., 1976, pp. 59-60).

- 1. We admitted we were powerless over alcohol - that our lives had become unmanageable.*
- 2. Came to believe that a Power greater than ourselves could restore us to sanity.*
- 3. Made a decision to turn our will and our lives over to the care of God as we understood Him.*
- 4. Made a searching and fearless moral inventory of ourselves.*
- 5. Admitted to God, to ourselves and to another human being the exact nature of our wrongs.*
- 6. Were entirely ready to have God remove all these defects of character.*
- 7. Humbly asked Him to remove our shortcomings.*
- 8. Made a list of all persons we had harmed, and became willing to make amends to them all.*
- 9. Made direct amends to such people wherever possible, except when to do so would injure them or others.*
- 10. Continued to take personal inventory and when we were wrong promptly admitted it.*
- 11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.*
- 12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.*

The 12 steps of AA have become a template for other support groups that deal with addictions as diverse as food, sex, tobacco, narcotics and other substances. These groups are generically called 12-Step groups. AA and other groups based on the 12 steps suggest that following these steps will lead to sobriety or abstinence from a harmful behaviour.

However, three issues arise from this: (1) some people have been unable to remain sober through the AA or similar programs and fellowships; (2) others have achieved sobriety without these programs; and (3) although there is an atmosphere of fellowship and support, 12-Step programs focus solely on the individual and ignore sociological factors. For example, Fletcher (2001) found that some people did quite well without AA and that for some faith-based programs are not enough. She states,

There's no question that AA has saved countless lives. In researching a book I was writing, I heard many AA success stories. But I also heard from scores of people who overcame their drinking problems in other ways: through Secular Organizations for Sobriety, Women for Sobriety, SMART Recovery, and Moderation Management --all respected programs that have philosophies very different from those of AA. Many other people who contacted me quit drinking completely on their own (p. 44).

Young (1997) offers further criticism of the 12-Steps model. She criticizes treatment methods that employ what she terms the 'confessional' model first developed in Alcoholics Anonymous because they focus on the individual and are apolitical. Young suggests the 12-Step or confession model enlists

the patient's own complicity in her adjustment to existing institutions and relations of privilege and oppression, by encouraging her to construct herself, or at best her family, as the source of her pain and her problems. This self-reflective exercise diverts her from locating her life in the context of wider social institutions and problems and also discourages her from forming dialogic bonds with others in relations of solidarity and resistance. The solution to each addict's problems lies solely or primarily in herself, in her ability to develop coping skills, skills for managing her reaction and those around her to the dangers and disturbances that may surround her (pp. 88-89)

I agree that AA is not for everyone, as stated above some people get clean and sober without AA and others try AA but do not achieve long-term sobriety. I find, however, that Young's critique is flawed. Young fails to take into account that a woman may need to achieve a self-defined feeling of wholeness (healthiness) before she can begin

or feels ready to consider political and institutional issues of oppression. It may also be as Narayan (1989) suggests: “sometimes one sort of suffering may simply harden individuals to other sorts or leave them without energy to take any interest in the problems of other groups” (p. 264). In this instance, other groups include those without addictions to drugs or alcohol.

In Young’s (1997) criticism of 12-Step models, she makes a distinction between what she calls confessional talk, which is monologic, and consciousness-raising, which is dialogic. She misses the point when she argues that confessional talk in 12-Step programs needs other people whose main function is to encourage the confession, bear witness and absolve (p. 91). Having a chance to speak without being interrupted is empowering to people who are used to being ignored, cut off, or spoken for. The function of telling one’s story is not to seek absolution nor to have others bear witness to the telling, but to encourage others by sharing stories of personal experience, strength and hope. In addition, gaining confidence through being able to speak and be heard can empower a woman to express herself in other settings. For example, before joining AA I felt reluctant to participate in class discussions at university even though I had something to contribute. At AA meetings, I was also reluctant to speak at first. However, once I felt I had something to say, I began to share. The confidence to voice an opinion that I gained in AA enabled me to actively participate in the university seminars. I would characterize the format of an AA meeting as more that of a First Nations’ healing or talking circle than that of the confessional. Viewing sharing meetings in this way takes into consideration that before an individual feels ready to work collectively, he or she must feel healthy enough physically, mentally and emotionally to do so. Conversely, the compassion and encouragement of the

group works to nurture the individual in becoming physically, mentally and emotionally well enough to begin to participate in collective efforts.

Notwithstanding this criticism, Young's (1997) concepts of the transformative use of power and empowerment as the development of a sense of collective influence over the social conditions of one's life are especially helpful. According to Young,

In a transformative use of power, the superior exercises power over the subordinate in such a way that the subordinate agent learns certain skills that undercut the power differential between her and the dominant agent. The transformative use of power seeks to bring about its own obsolescence by means of the empowerment of the subordinate agent (p. 90).

In my experience with AA, I have met the AA fanatics and those who have turned attendance at meetings and other AA functions into another addiction. I have attended meetings in New York, Salt Spring Island in British Columbia, Inuvik in the Northwest Territories and various meetings in the greater Vancouver area. In one meeting, which I have been attending for 14 years, the people with long term recovery usually: (1) are involved in the community, usually through volunteering; (2) are involved in some form of spiritual growth process and (3) attend meetings not only for their own recovery but to be there for people who are just starting their recovery journey. One of the sayings in AA is, "I am responsible. When anyone, anywhere reaches out for help, I want the hand of AA to be there and for that I am responsible." For some AA is the path by which they enter the ever expanding choices in roads to continuing growth, while continuing to support newcomers by their presence at meetings. In a secular sense, this is called peer support or peer counselling. In religious terms, this would be termed a ministry of presence, in which one ministers to others by simply being there and listening to those who need to be heard. As previously stated, however, AA is not for everyone. During the course of this project, I encountered several programs for people who found AA was not right for them:

- the 16-Step program created by Charlotte Kasl
- the Recovery Medicine Wheel of Kip Coggins
- Secular Organizations for Sobriety
- LifeRing Secular Recovery
- Women for Sobriety
- SMART Recovery
- Moderation Management, and
- the meta-recovery program of Dr. Anne Bewley.

The first is a 16-Step program created by Charlotte Kasl in 1992. Kasl, who has worked extensively on women and addiction issues, argues that the “basic assumptions about addiction and addicted people are based on observations, made over 50 years ago, of *100 white, primarily upper middle class, professional men who were alcoholic*” (2003, n.p.). Kasl calls into question the sufficiency of the 12-Step approach to be effective “for a multitude of other addictions and problems, and presented routinely to people of different races and social strata as the *one and only way to overcome addiction*” (n.p.). This 16-Step model is discussed in more detail later.

My former co-worker, Sr. Dorothy Bob, a Sister of Saint Ann from the Lillooet First Nation, introduced me to another alternative program, the Recovery Medicine Wheel. This model was initiated by Native American social worker Kip Coggins. It is based on the medicine wheel traditions of North America’s first peoples and follows the four directions of the medicine wheel. North relates to the physical realm. East is the realm of knowledge and enlightenment. South is associated with the spiritual realm and the West is the realm of introspective thought. Coggins (1990) asserts,

Although it is based in Native American culture and tradition, the Recovery Medicine Wheel takes a balanced approach to the task of recovery from addiction and addictive ways of living that will appeal to people of diverse cultural backgrounds and spiritual traditions. It has been used successfully at AA (Alcohol Anonymous) meetings for over a decade (p. ix).

The next program is the Secular Organizations for Sobriety (SOS) informally named “Save Our Selves,” which presents itself as an alternative to AA and Narcotics Anonymous (NA) that

takes the approach that sobriety is a separate issue from religion or spirituality. SOS credits the individual for achieving and maintaining his or her own sobriety, without reliance on any “*Higher Power*.”...Although sobriety is an individual responsibility, life does not have to be faced alone. The support of other alcoholics and addicts is a vital adjunct to recovery. In SOS, members share experiences, insights, information, strength, and encouragement in friendly, honest, anonymous, and supportive group meetings (Christopher, 2004).

LifeRing Secular Recovery (LifeRing) appears to have broken away from SOS after a 1999 lawsuit concerning the use of the name, Secular Organizations for Sobriety. LifeRing became an autonomous organization in 2000. They advocate the following, referred to as the 3S’s.

- Sobriety: I don’t drink or use no matter what
- Secularity: I participate in a network of support
- Self-Help: I am the architect of my own recovery (N, 2004).

The next program was started in 1973 by Dr. Jean Kirkpatrick and was called the New Life Program. In 1975, the name was changed to Women for Sobriety (WFS). WFS focuses on women with addictions and the gender specific issues, concerns and challenges that women have with recovery, such as the need for feelings of self-value and self-worth, and the need to overcome feelings of guilt and humiliation. The program is “based on positive thinking, metaphysics, meditation, group dynamics, and pursuit of health through nutrition” (Women For Sobriety, 2004, n.p.). WFP suggests an ideal group size of six to 10 women to ensure that every one has a chance to be involved in the discussions (n.p.). When a woman is about to share, it is suggested that she state, “My name is _____ and I am a competent woman.” (n.p.). Whereas, in AA, a speaker introduces

herself or himself by stating, “My name is _____ and I am an alcoholic.” Both statements are intended to engender something positive in the speaker. The former aims to build self-confidence and self-esteem. The latter is to foster acceptance and honesty. Each statement works for some women but not for others. In my case, I think the two would complement each other.

The next program is called SMART Recovery (Self-Management and Recovery Training), formerly called Rational Recovery. It is based on “cognitive-behavioral therapy (CBT), and particularly from Rational Emotive Behavior Therapy, as developed by Albert Ellis, Ph.D. In general, CBT views addictive behavior more as a complex maladaptive behavior than as a disease” (SMART Recovery, 2004, n.p.).

At SMART we believe that each individual finds his own path to recovery. For some that may include traditional 12-step programs like Alcoholics Anonymous (AA) or Narcotics Anonymous (NA). While the SMART approach differs from AA and NA, it does not exclude them. Some SMART participants choose to attend AA or NA meetings when they cannot attend a SMART meeting. Some find that what they hear at AA or NA meetings helps them on their path to permanent recovery (n.p.).

The SMART recovery program is used at Dual Diagnosis, a Vancouver program for people with mental illness and addiction, in conjunction with traditional 12-Step programs.

Moderation Management (MM) is aimed at the problem drinker, who is worried about their alcohol use and may or may not be an alcoholic.

MM empowers individuals to accept personal responsibility for choosing and maintaining their own path, whether moderation or abstinence. MM promotes early self-recognition of risky drinking behavior, when moderate drinking is a more easily achievable goal (Moderation Management Network, 2004, n.p.).

MM suggests that women who drink more than 3 drinks per day or more than 9 drinks per week and men who drink more than 4 drinks a day or more than 14 drinks per week, may be drinking at harmful levels. MM is the only one of the alternatives to AA that would

have been of little or no benefit to the participants in this study for two reasons. First, the participants who only used alcohol began drinking alcoholically very early after being introduced to alcohol. Second, the program only deals with problem use of alcohol.

The final program was one initiated by Dr. Anne Bewley (1995), who found the spirituality of the 12-Step program did not go far enough. She states that her participants had integrated the steps of AA into their daily lives but most wanted something more spiritually than AA could give them (p. 9). Dr. Bewley's program was based on the results of her 1993 study of eight women in recovery. The criteria for inclusion in this study were, in part,

that the participants be at least 25 years old; have at least three years abstinence from alcohol and other drugs of abuse (excluding caffeine and nicotine); not be taking antidepressants, tranquilizers, lithium or other psychotropic medications; be a member of AA (Bewley, 1993, p. 61).

The women met for eight weeks in a 'psychoeducational' group called, *After Awakening: Crossroads in Recovery* (p. 66). From the study of this group, Bewley formulates the concept of meta-recovery. Later Bewley (1995) hones the notion of meta-recovery, which she describes as follows:

Briefly, the theory of meta-recovery states that there are, within the dynamic of addiction and recovery, two parts of the self: the addict subpersonality and the recovering subpersonality.... The process of meta-recovery is threefold (1) identifying the ways in which the recovering subpersonality feels too small; (2) returning to the addict subpersonality and negotiating the release of his or her gifts to the personality without a return to addictive behavior; and, (3) integrating the best of both parts of the personality into a third, more inclusive way of being in the world. As "meta" means "beyond" or "transcending," meta-recovery is growing beyond that recovery. It is, in essence, a process of "recovery from recovery" (pp. 2-3).

The participants in Bewley's (1995) study named several qualities which they associated with their involvement with meta-recovery. These included "wholeness, self-acceptance, courage, trust, satisfaction, responsibility, expansion, flexibility, inner

guidance, creativity, power, independence, and freedom” (p. 7). Bewley acknowledges that these qualities were experienced by their involvement in AA but qualifies it by stating they were “experienced minimally” (p. 7). Bewley suggests,

In my opinion, most of those who respond well to the AA program of recovery and who are able to engage in the fellowship and use the tools of the program are candidates for meta-recovery should they experience a desire for ongoing growth and a willingness to challenge the status quo (p.13).

She also acknowledges,

While there are many reasons why AA might not “work” for a given individual..., when AA does work, one can assume that the individual has the intellectual and social skills and strengths necessary to assume responsibility for his or her own recovery. When AA works, there is always the potential for the desire for ongoing recovery to arise. ... For those with solid recovery, a strong sense of self, and the courage to grow, it may be possible to move beyond the process of recovery into being recovered (p. 13).

In summary, all of these programs were influenced by the AA model either negatively, positively or they exist in a stance of peaceful coexistence. Each program recognizes the value of group support. Spirituality is part of the most popular or well-known of the programs namely, Women for Sobriety, the 12-Step and 16-Step Programs. It is significant that only the two programs with ‘secular’ as part of their name explicitly reject spirituality as part of their program. Several researchers have explored the relationship between spirituality and recovery. This literature is reviewed in the next section, using the 12-Step model as a starting point.

Spirituality and Sobriety

The last two of the twelve steps concern spirituality and service. It is widely held among members of A.A. that spirituality and service are absolutely essential to achieving and maintaining sobriety. These factors have recently come to the attention of the research

community. For example, in a more general way, McGuire (1993) discusses the current widespread trend of relinking spirituality and health. She suggests that the specialization and compartmentalization that have taken place in Western health care are being questioned. McGuire further suggests that a more holistic approach, which includes the whole person, including the spiritual aspect, is being sought (p. 1). Green, Fullilove, and Fullilove (1998) narrow the focus of the discussion to explore the role spirituality plays in sustained recovery from addiction. They examine their participants' stories of 'spiritual awakenings' to gain insight into how this led to their recovery from substance abuse.

Green, Fullilove, and Fullilove (1998) state that spirituality is recognized by participants and observers alike as a key ingredient of the 12-Step process. Yet, little research has been done to describe the ways in which it plays a role in the recovery process (p. 326). One aspect of spirituality in 12-Step programs is the lack of dogma and doctrine. One of the traditions in AA states that the only requirement for membership is a desire to stop drinking and another states that AA is not allied with any sect, denomination or outside enterprise. Therefore any religious dogma or doctrine would be contrary to AA principles. Green and colleagues report that one of their participants stated, "Who am I to say that your God is not as great as my God if we both got through this day without using" (p. 328). They also found that their participants felt it necessary, after being clean and sober for a time, to believe in a spiritual higher power. Green and colleagues relate, "In the beginning it was justifiable to have faith in whatever kept them from using, but further into recovery they had to develop a working relationship with their own spiritual Higher Power" (p. 329).

Green and colleagues state their data indicates that a transformation takes place with people as a result of their willingness to embrace a Higher Power. Their findings suggest that the spirituality and fellowship of 12-Step programs provide for psychosocial (re)integration and relocation. They state their participants agreed that their change in character, from a self-centered, self-destructive individual to a loving, altruistic person, was an important part of the spiritual journey (p. 330).

In this chapter, I have explored the literature, which demonstrates that the answer to what causes addiction is not simple. Social, psychological, and perhaps spiritual factors come together in various ways that may or may not result in addiction. I also sought to discover possible explanations for the fact that the diversity of the local community was not reflected by those who agreed to participate in the study. Several recovery programs in addition to AA were reviewed as well as the literature that reported on a possible relationship between spirituality and recovery. Before introducing the participants in the study and describing the data collection and analysis methodology, the next chapter begins with a brief summary of the possible reasons for the almost homogenous complexion of the study participants.

CHAPTER THREE: METHODOLOGY

In this chapter, I discuss data collection and data analysis. The data collection section begins with the possible reasons that the majority of the participants in the study are of European ancestry despite my efforts to attract participants from diverse cultural and ethnic backgrounds. Next, the demographic information on the individuals that did agree to participate is presented before discussing the interviews and issues that arose during the interview process. The chapter concludes with a discussion on the method of analysis, that is, a presentation of how the content driven recurrent comparison method was used to analyze the data. The issues regarding the data collection begin in the next section.

Data Collection

In this section, I present a brief discussion on the lack of racial diversity in the study before describing the recruitment of participants and the methods used to collect and analyze the data. Given the racialized population in the Downtown Eastside, I have sought to understand the lack of minority participants in this project. I have tried to do this in a fashion that does not blame the victim.

Marginalization and social exclusion make access to opportunities that are taken for granted by a society's dominant group difficult or impossible for members of excluded groups. Hence I suggest there are four possible explanations for the lack of people of colour in this project. The first is people are tired of being interviewed as the token person for their group. The second is the daily micro-aggressions of racism contribute to a distrust of researchers as representatives of racist institutions. People of colour are less likely to be participants in a research project whether the research is about cancer, what newspaper one

reads, or a study such as this one. The third reason is that to try to tell the story of personal pain and perhaps have to look at the reality of a future that may well be very much like the present is too sensitive to share with a third party. The last reason is the lack of culturally sensitive recovery resources, especially the lack of access to traditional spiritual and healing processes. The Coming Home Society was founded as result of the study done by the Anglicans to open The Recovery House, which has a culturally sensitive recovery program. One of their explicitly stated objectives is “to provide an environment where clients may grow spiritually according to the their traditions and desires” (The Coming Home Society, nd, p. 9). The addition of this 16-bed facility helps but the need for such resources remains enormous.

When I look more closely at these possible explanations, it becomes abundantly clear that there is a lack of trust in researchers in general as far as participating in a research process as well as a lack of trust in institutions that have repeatedly betrayed or excluded people of colour. Therefore, I may at another time try to do research specifically with participants of colour using participatory methods, which would be built on mutual trust. However, for the purpose of this project I must work with the data obtained from those who were willing to be interviewed.

Before discussing the recruitment of the participants, I want to make it clear that there is long term sobriety within the minority communities and that the above discussion concerns the lack of resources available rather than a lack within members of these communities. There are AA and NA groups that are exclusively Spanish-speaking or mostly attended by First Nations people or meetings that are attended by lesbian, gay and

transsexual individuals. I used the term ‘mostly’ because most AA and Narcotics Anonymous (NA) meetings don’t turn anyone away.

To recruit participants, I sent out letters and bulletin board posters to several service agencies and volunteer organizations that serve people in recovery. Several of the places that I contacted served specific racial/ethnic groups, while others had a more universal clientele. I received no replies from any individuals involved in these organizations. Through networking and my previous work, I made contact with other potential participants. I was successful in recruiting twelve people willing to participate. Including myself, there were eleven women and two men. All of the participants had a history of substance abuse and recovery. All the participants held Canadian citizenship. Annie and I have dual (American/Canadian) citizenship. Ten were European Canadian. One is of aboriginal and European descent and I’m African Canadian (American). The participants were varied in religious affiliation, length of substance abuse, length of recovery, education and current employment/economic status. At the time of the interviews, their ages ranged from 30 to 69 years of age. Five participants come from middle-class families of origin and eight have working-class origins.

Two of the women are single, one is widowed, four are divorced, two are separated and two are married and living with their spouses. One of the men is single and one is divorced and remarried.

Two of the women never finished high school. One of the men and four women have some post-secondary education. One man and three of the women finished undergraduate degrees. Including myself, the remaining two women have graduate degrees. All of the participants live in the greater Vancouver area and have or have had

connection to the Downtown Eastside. See the Table 1 on the next page for a demographic overview of the participants.

When I planned the study, I was aware that there was a potential risk of triggering buried or deep emotions. Talking about past—and possibly present—pain is always fraught with this possibility. However, my previous experience as a pastoral assistant provided me with enough counselling skills to recognize when serious emotions or distress have been triggered. Pastoral work also put me in contact with the resource persons, such as counsellors and mental health professionals, of several service agencies and service providers. Therefore, I felt confident that I would be able to make an appropriate referral to one of the local resources in the event of a participant becoming distressed. However, the need to make use of these resources never arose.

Once the participants met with me for the interview, they seemed to be at ease. They knew from the recruitment letters and consent forms that I was also in recovery and a member of AA. However, once I actually verbalized it, there seemed to be even more of a rapport. There is an assumption with AA members that certain experiences— and the terms used to describe those experiences— will be automatically understood. This is partly attributed to the way meetings are conducted. For example, in a study on the words used in finishing one's turn to speak at an AA meeting, Arminen (2001) states:

The closing words of AA members' turns of talk display the members' orientation to acknowledging in their own turn the nature of the occasion, which is their idea of giving and receiving mutual help. As such, this moral embeddedness of the closings of interactions is not specific to AA meetings (p. 213)... All the closings of AA turns convey participants' gratefulness to AA for the resolution of their personal problems. Furthermore, speakers recurrently emphasize the reciprocity of mutual help, to give and receive relief and, in so doing, convey both their gratitude and also point out their own contribution in helping others (p. 214).

Table 1: Table of Participant Demographics

#	Years Sober	Pseudonym	Birth Year	Sex	Children	Ethnicity	Education	Marital Status
1	16	<i>Annie</i>	1950	F	0	Russian Jewish	Graduate degree	single
2	8	<i>Barbarita</i>	1953	F	3	English	University degree	married
3	9	<i>BiCO</i>	1952	M	0	Irish	Some post secondary	single
4	20	<i>Goodie</i>	1934	F	2	Irish/English	Less than high school	widowed
5	21	<i>Kunkle</i>	1948	M	4	English	University degree	married
6	2.5	<i>Lienee</i>	1955	F	2	Scots/German/Irish	Some post secondary	divorced
7	7	<i>Lynn</i>	1973	F	2	English/Norwegian	University degree	married
8	11	<i>Micha</i>	1946	F	1	French/Ukrainian	Some post secondary	divorced
9	16	<i>Mildred</i>	1952	F	0	Scots/Welsh	Some post secondary	single
10	6	<i>Nikki</i>	1960	F	3	Dutch	Some post secondary	separated
11	8.5	<i>Olivera</i>	1946	F	2	Icelandic/Irish	University degree	divorced
12	8.75	<i>Shirley</i>	1951	F	2	Cree/Scots/English	Less than high school	separated
13	13	<i>Vikki</i>	1945	F	0	African-Amer/Cdn	Graduate degree	divorced

All of the respondents saw their participation in this study as a way to directly help others struggling with addiction. They viewed their participation as an extension of mutual help. The participants expressed that they were glad to tell their story because it might help someone else.

Each participant was interviewed using a semi-structured interview schedule (see Appendix C). All except two interviews were tape recorded and transcribed. Of the interviews that were not recorded, one participant was sent a copy of the questions, which she answered in writing. The cause of the unrecorded and partially unrecorded interviews was a defective microphone, which I ceased to use after the second recording mishap.

Despite the recording mishaps, I still took very few notes because I felt it was more important to listen respectfully and attentively to the people sharing their private lives with me. During the interviews, laughter and unspoken mutual understanding assuaged some of the emotional impact of the storytelling and the story-listening. However, during the transcription, I found listening to the stories painful.

To obtain the data on myself, I wrote the answers to the questions before I interviewed the other participants. I found that I was not as forthcoming as the participants, not out of a need for secrecy but rather, out of a need not to not remember certain childhood experiences. However, as the next chapter will show, I do relate them once it becomes clear to me that I have left out a significant experience of my own that is similar to the experiences of some of the participants. Even though I had not consciously withheld the experience, I felt it was unfair to ask of others what I was unwilling to do myself.

Most of the interviews took between 60 and 90 minutes. After all the interviews were transcribed and initial coding of the data completed, each participant was sent a copy of his or her transcribed interview with a covering letter stating in part (see Appendix D):

I have completed the transcription of all the interviews and a transcript of your interview is attached along with a copy of the research questions. I will not be conducting a second interview but if there is anything that you would like to add, clarify or remove, please feel free to contact me....

Two of the participants submitted minor changes. Once all the revisions were completed, I again used Atlas-ti to code the data.

Coding: Preliminary Analysis

The coded data was then sorted into five larger thematic groups: childhood, addiction, recovery, social awareness and spirituality. Some codes apply to more than one group. For example, the code ‘husband’ might be relevant to addiction, recovery and spirituality or social awareness.

Mothers, fathers, siblings, family of origin and childhood caregivers other than parents, such as grandparents, foster parents or adoptive parents are categories or codes that one would expect to find under the childhood theme. In addition to these, there are other items that fall under this theme, such as the following:

Actual and perceived threats as a child: Actual and perceived threats experience by a child, usually physical but could include things such as fear of abandonment.

Defense/escape mechanisms: Ways in which an individual tries to avoid tense, painful or stressful situations at home.

Emotional/psychological abuse: Words or actions that belittle a person or are injurious to a person’s conception of self.

Escape metaphors: Description of images or daydreams of escape from one’s current situation.

Feelings of abandonment or alienation: Feelings or fear of being excluded from a group that is important to the individual and/or feeling that one doesn’t belong or fit in to a group that is important to the individual.

Isolation (actual): Being physically or emotionally isolated from one's family or group.

Marginalization: Excluded from mainstream society.

Physical abuse: Intentionally causing physical, bodily harm or causing physical bodily harm that one's culture deems abusive.

Religious background: Religion of one's family of origin or the religion of one's childhood or reference to religious background in the literature.

Sexual abuse: The abuse of a position of power by engaging in sexual acts with a person who is powerless to refuse or is unaware of their right or ability to refuse.

Unstable home life in childhood: A home life in which a child experienced feelings of not being safe, neglect, fear of abandonment or being unloved.

The factors that respondents and/or the literature indicate as contributing to the addictive use of controlled substances, are explored under the addiction theme. This theme also includes the length of the participants' addiction, their favourite or drug of choice. Any behaviour that participants reported, which indicated to them evidence of their addiction, such as denial of overuse of drugs or alcohol, lying about use and stealing to obtain their drug of choice, falls under this theme. The main focus in this thematic section is on what may have contributed to the addiction and to discover if there is a discernable pattern between the participants' life experiences and addiction.

The recovery part of the participants' stories is broken up into four thematic groups, surrender, self-assessment, willingness to change and non-complacency. Spirituality is interwoven through each theme. That is, it was difficult to separate out certain narratives

of their experiences as distinctly recovery or distinctly spiritual. It also appears that social awareness or more correctly, social connectedness was intimately linked with spirituality and recovery. The codes that were grouped into this section include, length of time in recovery at the time of the interview and the following:

Factors contributing to cessation: The factors the respondents indicated as contributing to the consideration of ceasing to use drug and/or alcohol.

12-Steps: The 12-Steps used by Alcoholics Anonymous, which were also adopted and adapted by other addiction anonymous groups.

Recovery program other than 12-Step: Recovery programs that do not use Alcoholics Anonymous as the basis for their programs or programs that have adapted the AA program in ways that are not just a rewording of the 12 Steps to accommodate other addictive behaviours, such as 16-Step Program of Dr. Charlotte Kasl (2003), which was mentioned earlier in this report.

Family – Current: Current family life.

Change in outlook, life: Change in one's perception or beliefs about oneself, others and worldview.

Spirituality is one of those concepts that mean different things to different people. For example, some people viewed religion and spirituality as the same thing. Others saw spirituality as distinct from religion. For spirituality, I have used the definitions or descriptions given by the participants. In order to keep the two ideas discrete, religion is clarified under the code 'religious affiliation.' I define religious affiliation as pertaining to participation in the religious activities of a formal community of believers, whose activities

usually take place in a church, temple, mosque, synagogue or some place dedicated and designated as a place of worship. However, religious affiliation and the following codes were grouped under the theme, spirituality.

Higher Power: This term was used to refer to God, Supreme Being, the Divine and other names or expressions suggesting the existence of or referring to a supernatural entity or energy.

Philosophical outlook refers to a worldview or how an individual believes they should act towards self, others, creation, Higher Power.

Power is defined as having control over a situation, person, place or thing.

Powerlessness is having no control over situations, persons, places or things.

Spiritual perspectives refers to the views of the participants about spirituality, that is, what it is and what it isn't.

Spiritual practices include, but are not limited to church or group worship; meditation, prayer, smudging, and artistic expression. Liturgical dance, writing icons and drumming are examples of spiritual artistic expression. 'Writing' is the term used for painting in iconography.

I make the case that inner growth has outward signs, one of which is the recognition of injustice and working to eliminate it. Therefore, I use the code 'growing social or sociological awareness' to indicate that in addition to personal responsibility, the participant is becoming aware of the social context in which she or he and others are situated. By that I mean that the participant is becoming aware of the sociological factors at work in their lives and the lives of others such as institutional racism or privilege,

poverty, class and gender. I have also included in that category awareness of local issues that motivated them to serve others, the contributions they make by serving others, and the personal satisfaction they receive for their service.

Analysis: Content Driven Recurrent Comparison

The analysis of the data was based on Boeije's (2002) approach to the constant comparative method. In that study, Boeije used a five-step analysis procedure: (1) comparison within a single interview; (2) comparison between interviews within the same group; (3) comparison of interviews from different groups; (4) comparison in pairs at the level of the couple; and (5) comparing couples (p. 395). Boeije states "the number of steps as such is not important, because that depends on the kind of material that is involved" (pp. 394-395). This section describes the way in which constant comparison was used to analyze the data for this specific study.

Atlas-ti was used to initially code the data. In subsequent data analysis, the input for analysis was informed by literature, informal talks, my own experiences, and interview narratives. The coded data was repeatedly compared within and between interview narratives. The specific codes were manually grouped to form larger themes. The literature was revisited with the insights of the themes. The themes subsequently influenced the direction for examining new literature. The literature was examined and reexamined thematically from the patterns that arose from the coded data. Comparison between the literature and the coded data revealed perspectives that were not present in the literature. Informal talks with people in recovery, but who were not participants, and my own experiences often triggered moments of insight and clarity for data analysis. The themes were refined using the new insights gained from the literature and the gaps within

it. The interview transcripts were examined again in light of the revised themes. In essence the analysis process was content driven recurrent comparison.

An example of content driven recurrent comparison can be demonstrated by the preliminary analysis of the data in which I looked at the responses to the question, “What do you see as the cause of your addiction?” The most common responses to that question given by the participants were ‘coping’ and ‘genetics’. The following table shows the response of each participant.

Table 2: Cause of addiction given by respondent

Respondents	Cause of addiction given by respondent
1. Annie	began with prescription drugs for physical pain
2. Lynn	can't really pinpoint
3. Goodie	coping
4. Vikki	coping
5. Nikki	coping, overcome shyness
6. Lienee	coping with loss
7. Olivera	emotional pain
8. Bico	genetics
9. Kunkle	genetics
10. Micha	genetics
11. Mildred	genetics
12. Shirley	genetics, coping
13. Barbarita	overprotective parents

During the interviews the participants were asked to tell me about their childhood. Details of the participants’ childhood experiences were also present in their responses to other questions and throughout the interview. Therefore, segments of the interviews that related to childhood experiences were woven together to form a coherent narrative. The

wording and content of the narrative strictly adheres to the transcribed wording and content except that word whispers, such as ah, eh, um, were omitted. When the interviews and coded data were reviewed, the factors contributing to the addiction of the participants began to broaden and form an enhanced picture, such as revealing the prevalence of adverse childhood experiences (ACE) in the participants' histories.

I used graphic devices such as tables to help me to visually interpret data patterns. For example, in the case of adverse childhood experiences (ACE), I plotted their occurrence by participant, gender and experience category. From this table, I derived the incidence of each coded experience among the participants and the number of experiences for each participant. In this way, I could determine that only one participant was free of ACEs, the remaining participants experienced between 2 and 6 of the ten possible ACEs and the most frequently present ACE was emotional neglect.

The path of the analysis begins with childhood, and then examines what led to addiction and what led to recovery, as well as recovery itself and how it is being maintained. In this chapter, I have described the particulars of the data collection process from the recruitment of participants to the coding of the interview data. I have also described how I used content driven recurrent comparison method of analysis in the preliminary and subsequent analysis phases of this project. The next chapter begins with a look at the childhood experiences of the participants and explores how their experiences may have contributed to their later substance abuse.

CHAPTER FOUR: NARRATIVES OF CHILDHOOD

In this chapter, I introduce the participants and explore their childhood experiences in the family of origin. The stories are presented in their own words. Their stories add texture to the body of literature that examines childhood experiences that predispose individuals to addictions. For example, there has been quantitative research done on the relationship between childhood experiences and substance abuse. Dube, Felitti, Dong, Chapman, Giles, and Anda (2003) have identified 10 adverse childhood experiences (ACE) that put individuals at risk for substance abuse. The ACEs are: abuse (physical, emotional, or sexual); neglect (physical or emotional); growing up with household substance abuse; criminality of household members; mental illness among household members; parental discord; and illicit drug use (p. 565). Rossow and Lauritzen (2001) suggest that substance abuse and suicidal behavior may be an outcome of disadvantageous childhood experiences, such as unstable relations and parental neglect, victimization from violent and sexual assaults, parental alcoholism, parental physical abuse, broken homes and their own mental health problems at an early age (p. 228). Although the participants comprise a small sample, their stories complement and add the voice of human experience to the statistical findings of previous research in this area. In addition to the ACEs identified by Dube and colleagues and Rossow and Lauritzen the data show that there are two more key ACEs: actual isolation and feelings of abandonment and alienation.

Middleton-Moz (1989) offers a caution that is a significant one for someone engaged in research such as this. It serves as a beacon to be attentive to keeping empathy from becoming projection and more importantly to refrain from falling into the self-righteous mindset which objectifies and/or dismisses people. She writes:

We frequently see ourselves or others as an alcoholic, an overeater, a bulimic or an adult child of alcoholic parents. In this way we fail to see or hear that the many symptoms of trauma are truly attempts at mastery, self-protection and survival. Human beings are more than their behaviors.... When we categorize, we dehumanize, even with the best of intentions. When we see others through our own experiences, rather than paying attention to what they see through theirs, we miss understanding the unique pain of the child inside them (pp. 17-18).

Therefore, it is my intention to tell the stories of the participants with respect while exploring the answers to the questions that prompted this study. I am grateful and honoured that the participants trusted me enough to share with me their pain, challenges and triumphs. Some of the participants spoke at length on certain questions and briefly on others. It was part of our agreement with each other that they could tell me as much or as little as they wished.

The Participants: Revisiting Childhood

Annie

Annie is single, 53, and works as an addictions counsellor. She is of Russian Jewish ancestry and lives and works in the Downtown Eastside. Annie gives the following description of her family of origin.

I have an older brother, just the two of us. We're not really close. He's older than me by 4 years. My parents were high school sweethearts who probably never should have gotten married who didn't like each other that much. It really showed in the family. It was really difficult. They were both academics, they both got degrees. That was really highly valued. What my brother did with that, he was very bright, he quite happily flunked himself out of university. I recently went back for my masters, finished it three years ago.

We moved around all the time. I think I was in 12 or 15 different schools. The longest we stayed was a couple of years and the shortest was 6 weeks. We thought we were staying, unpacked everything then packed it all up. I still don't know why but I have some theories. One is that my parents were in competition with each other. They were in the same field, had the same education level. My father got his doctors first. My mother was absolutely brilliant. My father was bright but he

wasn't brilliant not like she was. She was like a genius. I think they were in a competition with each other. She kept getting promoted and he didn't.

I had a lot of emotional and verbal abuse from my mother. That's been a hard one to deal with. I'm a lot better now. My parents split up then got back together a few times. They finally divorced when I was 16. It was very awful. At that point my brother stopped having anything to do with my father and I was the only one who had contact with the whole family. It really created a lot of strife for me, a heavy burden. My mother lives her life in her head, won't go down into her feelings very often. And that's what I value most, so we don't have anything really in common. If I met either my mother or my brother at a party, they wouldn't be the people I'd gravitate towards or develop friendships with, and I think it's the same for them with me. It's really interesting for me. My father was a sweet, gentle man. As I got healthy I saw how sick he was in his life. He was a smoker, developed lung cancer, and died a few years ago. He's gone. My brother wouldn't say good-bye to him. My mother wouldn't either. They hadn't spoken to each other in 25 years. One of my mother's favourite things as I was growing up was, "What's the matter with you?" I grew up thinking there must be something the matter with me. She kept asking me what's the matter with me.

Mildred

Mildred worked for several years at an emergency shelter. She is an artist and is now pursuing her creative talents but still does volunteer work in the Downtown Eastside. She is 51, of Scots and Welsh ancestry, and has some university education.

I'm an incest survivor. Was sexually abused by my father. My mother stayed married to my father until her death. My mother was an alcoholic; my father was a rage-oholic as well as a sex offender. I don't remember most of my childhood. A lot of my memories came back when I started doing therapy. We were taught to believe that we were some kind of different, special, well off better than everyone else on the block people. When it really comes down to it, we weren't. We were just poor, like everybody else. I knew there was something wrong with my childhood because I couldn't remember most of it. But I didn't realize until I got into therapy that it was sex abuse. That is a memory that came back to me in recovery that I didn't have before I stopped drinking. At the time that I went through that it seemed like there was nothing else I could do at the time. At that point my fear and hatred of men became known. I didn't think that I would ever be able to work again or even function again in a society that wasn't just of women. I could imagine working in a women's shelter or women's drop in center with other women. All I could talk about was the abuse and how it affected my life. All the women I knew at that point were all sexual abuse survivors, alcoholics or addicts in recovery and that's all we talked about were those issues. At that time it felt like I would never move past that. When I'm working with a woman who is on the street, who you just know is a survivor of child sexual abuse, I know how monumental it is

for her to undertake that step into recovery. She is self-medicating, drugging, prostituting there is something that is even scarier than that for her, which is incest, cause that's pretty scary stuff. There were times that I wanted to pick up a bottle of pills or someway or something whether it was take a drink or some how get myself out of it, there were times that I felt suicidal too... those feelings. I would have. I was guided through, there were people who were put in my life.

I asked Midred if she thought her mother knew of the abuse and she replied:

I have a feeling that my mom knew but she was an alcoholic. I don't think that I was the only person that my father was sexual with. I think my father was sexual every time he had the opportunity. I think that in some way my mom knew.

I told Mildred that she didn't have to talk about this topic if it was difficult for her. I remembered a conversation that Mildred and I had on another occasion in which she had stated that she felt she was never good enough for her mother and that perhaps now she could understand that it wasn't her. She seemed to be visibly relieved and had one of those 'aha' looks as she said:

No, I hadn't thought about it in those terms but when you phrase it like that it's kind of neat. I always thought that there was something wrong with me that I had to try a bit harder. I didn't do anything well enough. I always felt it was me that talked too much or got too dirty. I needed to change some part of me.

Goodie

At 69, Goodie was the oldest of the participants and one of two who did not finish high school. Her ethnic background is Irish and English. She is widowed, retired and volunteers at a Downtown Eastside women's drop-in centre. Goodie owns the home in Strathcona where she lives.

My mother was an immigrant from Northern Ireland. She'd come to Canada when she was only 18. Not with her direct family, she came with cousins close to her age and their father who was my mother's uncle by marriage. There had been a TB epidemic in Northern Ireland. My mother's aunt had died. That was the reason for coming to Canada. I know now that she had a child out of wedlock when she was 22. She lived with the family and the child for a few years then she went out on her own. She met my father (who was six years younger than she was) in Toronto. My father was very young, only 19. He got my mother pregnant. My sister was born, three years later I was born, 18 months later my brother was born.

I was a typical middle child. I always felt I wasn't noticed. Later I thought I really wasn't wanted, my mother wanted a boy. My mother was very cold. Now that I know she had to give up a child, it's not for me to judge why she was cold. It seems that the boy was very special to her. Not that she was easy on any of us.

My father was pretty easy-going. He worked a lot of hours. He wasn't home a lot. When he was, he was always asleep on the couch. He worked nights. That made him more of a presence: the fact that he was sleeping on the couch. My father was funny and would play jokes.

My mother was always angry with us. She used the strap on us sometimes. I think she was very fearful of her role as a parent.... In my own experiences of raising my daughter on my own, I think now, I was afraid that my daughter would find out that I had absolutely no power over her whatsoever. It seemed easier to always say no. I hated my mother. I was convinced that she was a stepmother. As soon as I could get up to the tallest cupboard I was going to get up there and find my adoption papers.

When we adopted my son, I came to realize why the differences – maybe it wasn't until I was sober – I think a mother has more expectations of a daughter to be like I am. I never have that expectation of a son. My daughter is so completely unlike me in so many ways except she was an alcoholic. (joke: she got it from her father) I think that's a big part of the mother-son.... It's not having that expectation.

I asked Goodie if she got along with her brother and sister, to which she replied:

Not once I hit my teens, I didn't get along with anybody. Prior to that, my brother and I were playmates. Even though I was only a year and a half older than he was, I defended him, looked after him. My sister is three years older. She skipped a grade in school. That made her four years ahead in school. She seemed quite separate until I reached teenage and she was still a teenager. We shared a bedroom. I stole her clothes.

Kunkle

Kunkle is 55 and one of the two male participants in the study. He half jokingly self identifies as a 'WASP.' He works as a counsellor at a Downtown Eastside non-profit organization. He has recently married for the second time and has custody of his two minor daughters.

So I have three sisters that are older. Actually my family is broken down into three sub-families. My two older sisters, Kerry and Kathy, were born prior to the war [World War II]. Kerry went through the bombing of London with my mom. My dad was in the army. After the war, my parents moved to Ontario and my dad was eligible for Veteran's Land Grant thing. So they came to Ontario. The emigrated from England and came to Ontario about 1946. Then my sister Klara was born. In

1948, I was born. So that's almost two families because we're divided by a major historical event and our childhood experiences are different and there's a ten-year gap between me and them. So, I was born here but my parents immediately returned back to England because my dad was very active in the ETU—the Electrical Trade Union—which was, and I guess still is, an extremely left-wing union. And then we traveled around the world and Dad was working as a Trade Union organizer. Then we came back to Canada in about 1952 and settled in Richmond Hill, Ontario [30 miles north of Toronto]. That's when I started school and went to elementary school for 8 years there.

My father was very angry. His childhood experience was quite negative in that, he'd gone from a choirboy in the Church of England to an atheist very, very quickly. My grandfather came back from the First World War having been gassed, a lot of coincidences in my family tree. He was a medic in the army. He was gassed in the First World War and sent home to die because his lungs were so badly damaged by the gas. And it took him until 1929 to die. My father claims that neither the army, nor the government, nor the health profession did anything for the family or for my grandfather, nor the Church. So he left the Church and joined the Communist Party, a very reactive thing. But the Communist Party was very popular in England in the '30s because of the depression. So he had a radical life change and was changed by the experience of his father dying. I don't think he ever got over it. He never got over the anger. So that when I was a child, I had a very angry father, who was unpredictable, and a very cold and distant intellectual mother. So my childhood experience, although I didn't want for anything in terms of food or clothing or shelter, was fear producing and not very nurturing.

In public school, I know now, I had attention deficit hyperactivity disorder and that's evidenced by the comments on my report card: Kunkle can't sit still, Kunkle can't concentrate, Kunkle's always daydreaming out the window, Kunkle! Kunkle! Kunkle! Kunkle! They couldn't figure out, the basic question during my youth was, "what's wrong with Kunkle?" What was wrong with Kunkle was that he had ADHD. So they began testing me. They tested my IQ and they discovered I was one of the smarter people in the province of Ontario, one of the smarter kids. I think in the top .2 percentile or something in terms of IQ. And so they thought oh well, he's just bored. So they started bumping me up grades and I'd still be restless, irritable and discontent, and didn't do any work. So they'd bump me back a grade. So I was all over the map in public school while everyone was trying to figure out what is wrong with Kunkle. When I was 12, I was sent to a psychiatrist because they figured I must be mentally ill. I mean I was just coasting through school, for the most part passing. And then the psychiatrist met me a couple of times and he said, "there's nothing wrong with you, send your parents in." So that was the end of the psychiatric experience, I didn't go back and my parents didn't go.

Then high school was pretty much a repeat except I was a very big kid and so I'm very athletic. So I was put into a lot of the intramural teams. You could only be on those teams provided you were passing. There was an intercollegiate rule. So I always got 51% in high school. So I always got enough marks to pass high school

and I graduated. My high school major was drinking and women and playing pool. Unfortunately, I didn't get any credits for either one of those.

I asked Kunkle how he came to the diagnosis of ADHD. He was diagnosed after he had stopped drinking while he was attending university. This was of particular interest to me from a personal perspective because I had just been diagnosed with ADHD at the age of 56.

Vikki

Vikki, the researcher, is 58 of African descent, I became a nun after my divorce. I attend university and live and work in the Downtown Eastside/Strathcona.

The earliest I can remember is living with my aunt, my mother's older sister, until she became too ill to take care of me. Then when I was about three, I went to live with my paternal grandparents. It wasn't until quite recently that I pieced together the reasons why I wasn't with my mother. Until I was 10, I thought that my mother didn't want me. During that time, my grandfather was the one adult I could depend on. I never knew when my grandmother would get mad at something I did, didn't do, should have or shouldn't have done. My grandfather was always straight with me.

When my mother and father came to visit at the same time, and especially if my aunt was there, there would always be drinking and there would always be arguing or fighting. To my childish mind, I was the cause of all this. My memories of Thanksgiving and Christmas are mainly of good food in between bouts of drinking and arguing. I had two escapes, one was school and the other was my imagination. I remember we had a coal stove in the kitchen. At the back of the stove there was a gap between the stove and the wall. I used to imagine that in this gap lay a secret passageway to Coney Island⁵ through which I could escape. In a way, I think alcohol took the place of that gap for me. Although school could be lonely, I knew what to expect there. I knew the rules. This wasn't so at home.

My mother and father were not married. My mother was engaged to Charles, a man in the Navy when she met my father. When I was about 4, my mother went to Ohio to get married to Charles. When she was pregnant with their child, Charles was killed in an auto accident. My mother returned home and moved in with us, my paternal grandparents. My mother's mother died when my mother was 16. My brother was born in 1950 and when he was about 2 years old, my mother moved and took my brother with her. Although I didn't want to go with her, I felt

⁵ An amusement park and beach area in Brooklyn, New York.

abandoned. My grandmother encouraged that feeling. She used to say, "nobody wants you but me and granddaddy."

My grandmother was Baptist and my grandfather a Muslim, from Indonesia. I specify 'from Indonesia' to clarify that, in fact, he is not a Black Muslim. My mother's side of the family is Catholic. It was at my mother's insistence that I came to attend Catholic schools. I joke and tell friends from my grandmother's religion I learned more about the Bible than most Catholics and from my mother's religion I learned God was white.

My mother used to come and visit at least once a week. She also paid my tuition at school and bought my uniforms and later, back-to-school clothes. At about age 10, I started walking my mother to the bus stop when she left my grandparent's house. It was during these walks that my mother and I began to really know each other. Our relationship grew and at age 14, I finally went to live with her and my brother.

*I always refer to my brother rather than my half-brother because we couldn't have been closer. In spite of the usual older sister / younger brother aggravations to the older sister, I loved him and was protective towards him. I still remember taking him to see *The Fly with Vincent Price*. I think one of the things that made us so close is the absence of our fathers. We once had a conversation in which we made mutual discoveries. I discovered that he envied me because my father was alive and I envied him because his father had married our mother and would have been present if he was alive. Together we mourned our actual and virtual loss.*

When I went to live with my mother, I began a tug of war between my mother and grandmother with me as the rope. I think part of the decision to leave for Canada was to escape both of them. Escape and dreaming of escape seems to have been a key part of my childhood.

At the time that I answered the interview questions I didn't include the incidents of sexual abuse that I experienced. I usually block them from memory, but I feel it would be dishonorable of me to ask these painful questions of the participants while withholding my own experience. While living with my grandmother, I was abused by a male baby-sitter. He was 18 at the time and I was six. Then between the ages of nine and ten, my grandparents took in a boarder and he abused me until my grandparents found out about the abuse. My grandparents kicked him out as soon as they found out, but I always felt that my grandmother blamed me.

Lienee

Lienee is 48 and of Scots, German, Irish ancestry. She does volunteer work for a non-profit organization. She has some university education and worked as a nurse before becoming addicted to crack.

I am the youngest of 7 children. I have 4 older sisters and 2 brothers. I was born in Prince Edward Island. I had a wonderful childhood and my family still lives in PEI and we are still close.

I had a great childhood. There were seven: four older sisters, two older brothers. I remember my dad telling me that my mom was sick after she had me so he used to take me in a picnic basket to work at Canada Packers. He worked graveyard shift. I grew up being daddy's girl. When my mom got out of the hospital three months later, I would bawl and cry every time she picked me up. Every time my dad picked me up I was fine. He had to take me to work with him for quite a while. Then my German grandmother. I wanted to go live with her because I figured mom and dad had enough kids. I had a really good childhood. I still get along really good with my family even though they are back east. They were all behind me when I was in recovery. They wanted me to go back home and be in recovery there. But I was too embarrassed because I grew up with all those people. I told them, "Don't worry, I'll do it." Now they're really proud of me.

Micha

Micha has been working in the Downtown Eastside for several years. She is 57. Micha was born a male and has been married twice. Of her first marriage she says, "*My first marriage was very unsuccessful. It was awful and just didn't work. There was a pregnancy and different things.*" Micha has a daughter from her first marriage. Her second marriage was happier but also ended in divorce.

We had this 14-year marriage that was awesome. Unfortunately, I was unable to keep up my end of the bargain, things got in the way, mostly drugs. I always knew, I had this sort of thingy that wasn't fitting right. And you didn't discuss it with anybody.

Micha lives in the Downtown Eastside. Although the physical disabilities that have plagued her since childhood are becoming worse, she works to improve the lot of others who are still in their addiction.

I came into this world premature. I was a very sick baby also and I had a lot of colic. I had a lot of things wrong, different things. I kind of squeaked at coming into this world period and that's a whole other story. But anyway somebody saved my life through nursing me where nothing else was working. That was after I guess a couple of months in the hospital. So I've sort of been this child that wasn't supposed to make it. But I had lots of difficulties, I had permanent disabilities and yet I seemed like a bright young child. But I had lots of ear infections, lots of ear trouble.

So they used to call my parents' house the galloping house with the bouncing roof because everybody partied and stuff. And I guess, I was this really cranky little baby. So, I'm sure my parents put my father's alcohol in my bottles, especially when we'd get going at those parties and I'd hear them talk about how when he would come through the door with a case of beer, I knew what it was at 2 years old, so he gave me my first full beer. So there was always lots of parties and I'd sit behind a couch or somewhere sneaking drinks or drinking and taking them to the basement and different things. By the time I was 13-14, I drank very regularly, you know, stuff like that. I had lots of money. Then you get bootleggers because you can only drink a little bit at home. Right? So you had to get bootleggers.

School was horrible. I never passed a grade in my life. I never read a book in my life. I just kept getting pushed on and it was brutal. I had lots of friends because I had lots of money [mild laughter]. You know, I had friends and I got along pretty good with kids but there was the bullies used to beat me up a lot and stuff. There were the tough kids but I got along more with the middle-of-the-road or the geeks. The cool ones, a couple of the boys used to beat me up pretty badly sometimes, so I used to have to watch how I went home in high school sometimes and stuff. So I didn't fit in that well and of course I was like 14 years old, still in elementary school. So it was kind of tough. I remember getting into high school and phew, it was scary. But again, by the time I got to high school within a year I had my driver's license, legally to drive, I used to get to take my car to school. So I always had a lot of friends there too. Things got a little better then because people protected me. Some of the tough guys protected me because I could drive them around and always had alcohol and we could have parties at my place and so I got protected after that. Then there was Ladysmith was a weird place. I had to go to school there for a year and that didn't work very well because the people who used to protect me weren't at that school. So I had some skirmishes there, had the boots put to me a couple of times there, fought back, went through a window one time with one of the big guys, and just about got thrown out but didn't.

So there were a whole lot of things to overcome and it worked so but I had that other part of me that knew I could do it. I was blessed with strength. My whole life I've had to deal with adversities, big adversities. I was fortunate enough to have a mother who was a heavy drinker not a functioning alcoholic, who really, really always supported me and really, really encouraged me.

We touched on marriage and things and I've had to struggle. I've lived both sides of the coin. I was brought into this world as a male and of course, live in this world

as a completed female nowadays. So it becomes very difficult sometimes, it's very painful to have to live this. Because people are homophobic out there too. But I understand it, my life didn't happen overnight. It was years, I was in my 30s before I really started to lose control. That was when my mother passed away. Down deep I guess, I thought I'd never do anything until she— But I never thought I'd have the courage. It was only really sort of an hallucination I used to think of but it was an amazing thing when I was told that my mother passed away. It was like an exorcism almost, I could feel my guts churning and wasn't that my mother died. I was going to miss her and I loved her but it was almost instant that those thoughts had been there all my life and they just became incredible instantly and a very weird situation. So for the next seven years until my father passed away, six years I guess. It took a couple of years but things kept being put into my space that and down the path I went. And finally, I was seeing a psychiatrist, I knew I was going to wait and finally I was on hormones. So that part of my life is still stuff that I live with. I've been total Micha for 17 years.

Olivera

Olivera is a 57 year old retired school teacher who volunteers at a drop-in center for women. She is a certified addictions counsellor and lifestyle coach. She is divorced and the mother of two grown children.

I was born here in Vancouver. My parents lived in Pine Falls, Manitoba, which was a small Abitibi Company town. But it was 1946 and there wasn't housing. They had each lived in separate single apartments. And when they got married there was no married housing available. My dad's brother and his wife and his mum were out here in British Columbia. So my mum came here to live until I was born. And then, there was still no housing. We moved back to Manitoba to Selkirk, where her family was. That's how I spent my first two years. So then finally we moved into a house in Pine Falls.

I was an only child. My father was a shift worker, a paper maker at the mill. My mother had been a school teacher. When I was in kindergarten, they asked her to come back and teach. So, she became my grade one teacher. I think she just taught those two years, the year I was in kindergarten and the year I was in grade one. I was an intelligent child, an only child, quite doted on and looked after. But my memories of my life at home, my mother, I think all her life has suffered from some form of mental illness. It made her behaviours and her moods quite unpredictable. My father's father had died the town drunk in this town. He [her father] didn't drink but he was a compulsive gambler. So there was tremendous amount of tension and mostly how it was handled is they didn't talk to each other.

I remember when I was younger, 5, 6, 7, 8, and I have pictures that we had a family life, there were Christmases. My mother, I do recall never felt comfortable with her family who lived Selkirk. Roads weren't very good in the North, so it was a 5 hour train trip away. But she felt quite isolated from them. And she always had grudges.

She always felt a victim and everybody was against her. And she isolated a lot and drank a fair bit. She was hospitalized a few times. One suicide attempt that I recall when I was about 13—10, 11, 12, 13—somewhere in there. I'm not sure just what age, I just remember that she was naked on the bed and the bed was all wet because my father I tried throwing cold water all over her and the doctor came. She was hospitalized for a while then. I then sought a social life outside the home. I made sure that I was involved in some sort of community activity every night of the week. I played in school band. I belonged to a church group and I sang in the choir. I'd baby sit and as soon as I could, I got a job. I just stayed out of the house and out of their way as much as possible. I was a simple outgoing person, so people were always kind to me and nice to me. I achieved, I was first in the class and president of the class and ran the social council as I got older.

Then my mother took a job teaching at a school that was going to open in another Manitoba or inter-lake community. I forget just which one. I know I was in grade 7. So she left to take this job and my father's mother came to look after me. I was already drinking. I was drinking with friends on weekends and I began acting out. I was 12 going on 13, and I acted out and made my grandmother's life quite miserable. They may have gone on for two years. Yes, that went on while I was in grade 6. My drinking increased in grade 7. In grade 8, my grandmother said, after two years, that she couldn't look after me anymore. So I went with my mother to this school. It was close enough to my cousins who lived in Selkirk that I was able to spend most of my weekends with my cousins and continue to drink. I had a cousin who was my age and she didn't drink as much as me. I could drink more than most girls. I continued to drink and hang out with very unsavory bad people. Her dad was the mayor of the town but it didn't make any difference. They lived in the north end of the town. And we all know, especially in American cities, that if you live north and east, you live in the slum. It doesn't matter what city you're in, south and west is always better than north and east. So they lived in the northeast. He was the mayor but there were many interesting characters. We had one friend who was known as a prostitute, lots of native people, lots of alcohol, lots of freedom. We were these nice little Icelandic kids but it didn't matter. I remember one time, I was about 12 riding around in some car and sitting on some guy's knee and someone said to me I should be really careful because that guy had just got out of jail for rape, so I should really be careful. We went to bootleggers and you know all that sort of exciting stuff.

It upset my dad because he knew what was going on. I don't know what happened but anyway the next year, my mother and I came back. She didn't teach anymore and so we were all back home but nobody talked to each other. We had two cats, we all talked to the cats. My dad and I talked to each other but my mother didn't talk to us. We didn't take our meals together. My father worked shift work. So when he was around, he and I would eat meals. My mother didn't cook meals. We ate mostly frozen TV dinners and she sat in front of the television and we avoided her.

I was going steady with this one guy because it was easier to go steady than not. It was safer for me. So, I spent a lot of time with his family, a very nice family. My

teenage years were spent with him and his friends, continuing to do extremely well at school. My drinking was only on the weekend. I still was very active in school, head of my class and valedictorian and you know. I lived sort of, two lives.

My boyfriend was about two years older. He went off and joined the Air Force and I broke up with him. So my grade 12, I didn't have a boyfriend and I just continued to drink with all the other kids. I found my mother in bed with the next door neighbour one night. It upset me a great deal. And of course, I hated her for that for a long time.

A girlfriend of mine, her boyfriend brought this guy from Winnipeg out to curl. He and I started seeing each other. Within a year, we were married. So I was nineteen, married and going to university. So that was kind of the end of my childhood. Oh and he drank more than I did.

When I quit drinking, [mother] again stopped talking to me. Her pattern of not talking to me has been a pattern all my life. When I got married, she stopped talking to me until after my son was born because I was pregnant when I got married. I did that on purpose because my fiancé was worried that if I went to university—he was six years older—that I would find somebody else. I said no. I'll get pregnant. I'll show you. So she stopped talking to me then and started talking to me again after Sean was born. Then when I sobered up, she stopped talking to me because how could I possibly do that to her.

Lynn

At 30 years old, Lynn is the youngest of the participants. Lynn has a university degree and is the Executive Director of a non-profit organization that offers lifestyle change support to street-involved women in the sex trade.

I was raised Jehovah's Witness. I had chronic asthma my first four years of life. We lived in Fort St. John and the doctors told my parents I wouldn't go to school because my asthma was so bad. So we moved to the Okanagan and my asthma wasn't too bad for a couple of years. My early years were spent in the hospital by myself pretty much. So I think that affected my relationships to family and feeling connected to the world because I was really alone as a small child. And I have a couple of siblings and there was a lot of violence in our home. Both my brothers are older. One brother is 18 months older. The other one is four years older than I am.

When I was about six my brothers and I made a pact not to fight with each other anymore. And we really became our own little family unit. Because I was raised Jehovah's Witness, we were not allowed to have friends outside the religion. My mom was quite strict even in things totally unrelated to Jehovah's Witnesses too. We weren't allowed to eat sugar or watch TV. We didn't have a TV in our house. So those things really affected me and my brothers.

I was a very shy child. In grade one, I hid in the shrubs at school on the recesses and lunch and I wouldn't come out. I remember looking at the school fence thinking I was in jail till three. I never really was a social person. It's not that I didn't like people. I just didn't feel okay around people. I remember my brother, my oldest brother, he's four years older than me, him and one of the friends that he had took me under her wing and pulled me out of the shrubs.

When I was 11 my parents broke up and I had a role reversal with both my parents. It was quite a traumatic break because my mother had a nervous breakdown. And Jehovah's Witnesses, I was disassociated at that time, so I lost all my friends because we weren't allowed to have friends outside. I went and lived with my mother and my brothers stayed with my dad. So there was a real, because my brothers, we were our family. I've had some recent conversations with my mom and realize I'm trying to regain some memories from my childhood, how mixed-up I have a few things. Like I have the years all wrong or a lot of times I'm younger than I thought I was when things happened. And the role reversals, my mom, I didn't realize how severe it had been. Like I was telling her when to shower and have a bath and I was cooking all the meals, cleaning the house, deciding what we were going to eat, I really was care-taking for her.

Then I started drinking at eleven, kind of sporadic at first. By 14 I wasn't coming home until 1 or 2 in the morning. I really don't remember that but my mom's telling me now. Like what was I doing but I had a really hard time when my mom got in another relationship. Like the closeness that we felt, I'd never felt that before with my mother. Talking to my mother now, she says we weren't close when I was little. My mom was a broken person herself. So she didn't know herself to be able to have a relationship with us really.

When she got in a new relationship and she got better. So she was going to be the parent again. That transition was really hard. I got really angry and I think I was acting out sexually at 12 and was promiscuous. There was so much stuff happening. Actually, I just reverted there. I guess my mom started being a mom again when I was about 15, 14, 15. I was so angry, like who-do-you-think-you-are kind of stuff. I've been taking care of you, I was just very angry. The Ministry of Children and Families apprehended me, which was news to me because I had always thought my mom had given me up. So, at 15 I was in foster care short term. Then I tried correspondence [school] in that time period and dropped out of high school. I then I got the delivering pizza. Then I decided I really needed to get my grade 12. So I applied to Okanagan College and got a whole bunch of letters from old teachers saying and principals saying to let me go. So at 16, I went and got my grade 12, which is funny because I graduated a year ahead even though I took a year off because I skipped grade 10 and did 11. Then in the summer months I took one course, quick. Then in the fall I did grade 12. In the summer, I got a job working in construction in Vancouver. So after I graduated from college, I came to Vancouver and got a job in construction. And that's pretty much my family of origin story.

I mentioned that I'm trying to get my memories back. Like I know I was sexually abused when I was a child and have some of my memories but don't have the whole thing. So that's what we're trying to get back. I'm pretty sure I know by who. When I was 15, I guess, 14 or 15, I kind of blew the top off of it. I talked to a school counsellor and then the police got involved and the social workers and it felt totally out of control for me. I didn't have enough time to process what was happening or what it was I really wanted. It got really scary, the whole prospect of somebody getting in trouble and just the self doubt and my mom saying that, minimizing it like "oh, it's not really sexual abuse," or "it's not that bad," or "other people have it worse," like that kind of, or "it's your fault," like that.

I have a hard time talking about it still because I have enough memories to know my dad sexually abused me but there's things that a, like I have symptoms of deeper sexual abuse but no memories to go with it. So I don't want to necessarily say it was my dad because maybe.... I spent a lot of time in the hospital alone. Like I don't know maybe it was a nurse or a doctor, like I don't know right. I also have that difficulty. It would be so nice to know if it was him then I could just get right on with the healing. Just with the family dynamics, it's so hard to say that something happened. Like I know stuff did happen because I have memories of stuff but just, it's hard with the family dynamic.

Because I was concerned I asked Lynn if she was getting counselling and she responded that she was. During this part of the interview with Lynn she was quite composed and we even laughed together a couple of times. Later in the interview, when discussing an incident that took place at her wedding, which was completely beyond her control, she broke down in tears. It struck me that perhaps subconsciously there is a connection between her reaction to being held at fault for another's actions and Lynn's mother's dismissive attitude towards the abuse Lynn suffered.

Nikki

Nikki is 43, separated and has joint custody of her three children. She lives in greater Vancouver and has volunteered at a non-profit agency.

My dad was an alcoholic addict. My parents were both Dutch and by the time I was 11 we had moved 10 times. There was no love and affection in my home. My dad was abusive towards my mom and he made my mom hit us. He was always getting in trouble at work. He was always having affairs. And that's why we had to move so much because his company wanted to keep the family together and they would just ship him off every time he got in trouble. So we would always constantly

have to move. He was very strict. I was always searching for his love and his approval and all those kinds of things and all he did was put me down, put me down. So I just, I'm one that keeps everything inside. My anger goes inside and I get depressed. So I always was depressed, quiet, little girl, who didn't speak and stayed in her room. I had two brothers. My younger brother used to get beat by him because he was one that was more active. He used to get beat.

I wanted to be saved. I still remember I always wanted to be saved. And I'd always go to a dark place in my mind. And that dark place was in the bush somewhere and drinking and just dying there. I wanted any knight in shining armor to save me. I did. I wanted someone to save me. So I was always very sad and everyday was cruel. My dad never took us out. We never went to parks. We never went on trips because he was too busy being a teenager and picking up girls and having three kids was not good for that. So when we went out with him, if we ever did, he would sit separately from us. So I thought that was really okay. I didn't think there was something wrong with that. But I was getting the message that I'm a failure, I'm never good enough, and all those negative messages. So I just continued with all those negative things. Still today, it's the first thing that comes. I make up excuses for him. But if I look at the real picture, I didn't get what a child needed.

So my childhood was very sad. I was hidden and continued to behave that way for a long time. I became a mean person, the other woman, constantly staying in trouble and hurting myself and hurting other people.

The interviews with Nikki and Lynn were the first ones that were conducted. These interviews made me realize that the biggest challenge was going to be working through the pain—the participants' and my own. As adults we can look back and understand that our care-givers may have had their own issues and insecurities to deal with but that understanding cannot retroactively eliminate the pain and its consequences. The cause of the pain may be something perceived, imagined, or the limits of a child's perspective but whether the cause is real or perceived, the pain is real.

Shirley

Shirley is of Cree, Scots and English heritage. She is 52, separated and has two grown daughters. She has less than a high school education but has founded and is Director of a halfway house for women. Shirley's achievement is remarkable considering her humble origins in a family of twelve children.

Six boys, six girls, Mom and Dad. My Dad had a grade 3 education. My Mom had a grade 10, I think, but all she did was have kids. My dad worked. We were very poor. We would share Christmas gifts between two girls and two boys would share. My brothers had to share a pair of skis once. My sister and I often had to share a doll. I would take the head off and play baseball with it, shave the head and you know and she'd get the bald head back, one eyeball popped in or out, no hair. She was always kind of feminine and she would be really upset. So we didn't get along well sharing our toys.

You know it was happy. I look at it as happy. We were close. I know some of my brothers and sisters don't see it that way. There's a lot of pain and hurt there somehow but I don't think it was too bad at all. I think they taught us love but not by showing it. There was too many kids to give love to but somehow we knew that you fit in. We had things like lard sandwiches to take to school. I can remember lying about them when somebody picked up my sandwich and told me it was honey. I can remember feeling that kind of shame. No new clothes, of course, they were all hand-me-downs and second-hand clothes from the Sally Ann. Christmas, sometimes, was only what we got from Sally Ann, things like that.

My dad was always the apple of my eye. I had no idea that he had molested my sisters. I had no idea for many years. It was only six years ago that I found out that he had. My sister, my older sister rescued me at the time when I guess it happened to her. She wanted to make sure that it wouldn't happen to me. She took me to her place in a little town called Swan River, Manitoba. Where my uncle molested me. So it happened anyway only not with my dad. So my uncle came to visit my sister and he sexually assaulted me, abused me.

By the time I came home from my sister's, I came home unexpectedly in the middle of the school term, because my little brother died. He was shot accidentally. He was six years old. Of course Mom and Dad gathered the whole family together for that. By the time I got home, I went from a skinny little eleven year old to 110 pound little ball of chubbiness. And my Dad made comments to me. I can remember being very hurt by them but I think that might have been the saviour for me. At that time, he was abusing my little sister or apparently he was. So my sister did save me but for my uncle as it turned out.

But I've come to realize that unless you're a true pedophile, you kind of do what you've learned. And my Dad came from a large family and they were kind of like hillbillies in northern Manitoba. I think that probably went on a lot in their family. I've come to understand a lot more about pedophiles and sexual abuse issues and things through my own healing and learning and also through working with the women in this house because a large majority of them, of course, have gone through the same time of thing. It's an understanding of the sickness, I guess, and the power because that's what it is about. Just last night lying on my bed, I was thinking about it and thinking about what makes people do that. It's not only control and power but very low self-esteem. When I look at the people whom I know who did abuse, they don't really wear the pants in the family. My Dad never wore the pants in the family. My mom did. The same with my uncle, his wife was

the boss. I don't know whether that's true or not but I've noticed that kind of thing running through it all, where, I don't know, maybe it's something to make them feel more powerful and more manly or something. I kind of have been able to let it go that way. That was then, this is now. No one's ever going to do that to me again.

The one thing that did happen after that was and – I don't know how much of that was because of the sexual abuse and how much was because my Dad hurt my feelings – I became really tough. I became the captain of the boys' soccer team. I beat the crap out of my little brother all the time until he turned 16 and whooped me good. Then we were best friends after that. It was like I was a brute and that continued throughout my life until I turned—I don't know. How old am I now [laughter]? I'm still working on it.

But even in my early recovery, the things I did to my counsellor and my priest were pretty brutal. If he gave me some straight truth and it happened to touch on a sore spot, he wore it. Like I made sure he was in pain as well. So that kind of letting go has only happened, oh probably, in the last two years where I've become more gentle and more able to understand where the pain is coming from and not attack the person, to look at what's going on inside of me. But there's been a lot of work that had to be done on me to get to this point even. It seems exciting to realize what's going to happen in the next ten years if I live that long, the healing that will occur and who Shirley might end up to be that kind of thing.

So I became a real tomboy, did things totally different than my sisters. And maybe subconsciously or something I knew what was going on with them. I don't know. To this day, I don't know. But I know I didn't want to be like them. I didn't want to have the sexual interest of men and it's not because I'm gay. It's because I never liked that kind of attention. It's embarrassing for me and that I guess comes from the sexual abuse and that kind of thing that's happened to me.

I was out of school in grade 8. The principal was going to give me the strap. I think it was the second to last year that the strap could be used in school. They caught me smoking and they sent me to the office and he told me he was going to give me the strap and I said, "oh, no you're not." And I walked out. I didn't go back for a lot of years because of the image I had, I guess. I never wanted to be feminine. I never wanted to be taken advantage of or someone to think that I was stupid. So I took it to the extreme. I was more like Bertha Butt than anything else. If I did dress sexually, it was a power thing. It wasn't to attract men. It was to put them down. I did that a lot.

Got married when I was twenty years old. I was pregnant with my first daughter. That lasted only a couple of years. He was an abuser. He beat me, put me in the hospital. Then I divorced him and met my second husband about two years later. But in that two year period, I took a little bit of counselling and they told me I needed more counselling or I would fall into the same pattern and choose another abuser. What I found is that is exactly what I did but he wasn't a physical abuser. He was an emotional abuser. The only thing that saved me was I could beat him up [laughter]. And I did that—several times. So that kind of chaos continued in my

life. So although I like to think of my childhood as happy, I guess it wasn't. I guess I wore a lot of stuff from that.

Just recently in November, I went to a funeral for my niece. And it was the first time since I started recovery that I had all my family together as one. And I walked away from there shaking my head because out of all 12 kids—there's only 10 alive now—out of all 10 that were there, only my brother and I are in the program and have done any work on themselves. So it was bizarre to say the least, to watch my brothers and sisters, their spouses and their children responses. It was like total chaos—abuse, verbal and emotional abuse going on, wolf-packing against somebody, campaigning against somebody else. It was just like “let me out of this movie, I can't handle this anymore.” I was really shocked when I faced that because I had no idea. I thought I was the one that was so screwed up and I was. There was no doubt about that but to see where it all came from.

Bico

Bico is 51, of Irish background and single. He lives in Vancouver and works as an addictions counsellor in one of the Downtown Eastside non-profit service providing agencies.

I was born in a little town in Ontario. My father was a factory worker. My mother was a stay-at-home mom. I had an older sister. I was the second born. My younger brother, I had a brother who died when he was seven. He was younger than me. There was my sister, then me, then another brother, then the one who died, then the youngest brother. We lived in tenement row housing in a community that was predominately black. My only real memory I have of being really young was when I was going to school when I was five. I was so happy to be going to school with the kids. I don't remember much after that. I know we had harsh winters. There was a lot of snow. There was a lot of sports going on. I didn't become involved in sports though. I tried to play lacrosse for a while but I wasn't very good at it.

I was pretty smart in school. I was blessed with a high IQ but not a lot of brains. I remember when I was about grade four I got kicked out of school for stealing. I ran away to Toronto, which was 120 miles away. I was very young, nine or ten, and I remember walking along the streets of Toronto. I'd hitchhiked down there. I was going into a restaurant trying to get a job as a dishwasher. I had learned about how people work. [Someone] called the cops. I told the cops that I had an uncle and an aunt living in town. I really felt I was going to get a job and live on my own, as a dishwasher. That was the start of it. I ran away a lot with other kids. Whenever I saw authority I was fearful, I ran away, I still do that.

I didn't have to study. The other kids studied and studied and studied. I remember my mother told me this. “You'd get up in the morning. You'd be reading the book as you were going to school.” I'd do the test and get 90%. I'd be gone all the time.... What happened was that they put me in an advanced class, grade 5, 6 and

7, all within two years. I end up in grade nine two years younger than everybody else. Most of the kids had failed a grade or two. Some of them were four years older than me. I was twelve years old. I was out the door. I started hanging around the pool hall with older kids. Then I spend three years in grade nine. That's as far as I got in school until I was in the penitentiary and got my GED. That's what my childhood was like.

There were lots of people who were fishers and hunters. My dad wasn't into that stuff. If he went down by the river it was to drink beer. He wasn't fishing. I never did any fishing but I used to try to. There was never enough money for that kind of stuff. The excuse for that was my brothers' illness. On top of that my father was a boozer. He drank every day. That had something to do with it, too. He was a hard working guy. He'd come home and clean up and drive to the nearest bar, which was 10 miles away. It was the last dry town in Canada. There was a bootlegger on every corner. He'd work all day in the factory and all night in the bar slinging beer. Not saying that my dad was a bad guy. The whole family participated in making sure that he was well groomed. My mother ironed his shirts. I would shine his shoes. We all had supper by ourselves. When he came in, he'd have a few beers, have supper then put on his dress-up clothes and go to work at the bar. It wasn't as hard as some people's lives. I don't see myself as someone who was deprived or abused. For the environment, for the part of town I grew up in, it was a pretty good childhood.

Barbarita

Barbarita is 50 years old, married and currently lives in metropolitan Vancouver area. She has a university degree and is currently working on getting certification as an addictions counsellor.

I grew up as the eldest of three girls. My parents emigrated from England to Canada when I was a baby. My dad worked hard and did well for himself. My mom never worked after they made their first down payment on their first home. They are still in the second home they have ever owned. We grew up going to an Anglican church where we never missed a Sunday. My parents made lots of friends in the community. My parents were very strict when I was growing up about everything – what I wore to school, even high school, where I went, who I went with, etc. I have very few unhappy memories of my childhood. I remember hearing my parents argue sometimes at night when they thought everyone was asleep. We looked like the perfect family. We had nice family vacations together. I guess my sisters and me reflected to the world that mom and dad were good people and had made it. We were picture perfect.

Barbarita's childhood sound idyllic but when asked what she thought contributed to her addiction she stated:

It is very hard to say what the cause of my addiction was. I guess my parents overprotected me. They had high expectations of me. I think there was some 'unfinished business' going on. I was supposed to accomplish all their broken dreams.

The factors the participants perceive as the causes of their addiction are discussed in the next chapter but Barbarita's response is included here because it hints at the pressure she felt she was under during her childhood.

Examining the impact of adverse childhood experiences

As previously stated, Dube and colleagues (2003) identify ten adverse childhood experiences (ACEs): physical, emotional or sexual abuse, physical or emotional neglect, growing up with household substance abuse, criminality of household members, mental illness among household members, parental discord and substance abuse. Rossow and Lauritzen (2001) differentiate "mental illness among household members" from the subject's. They use a separate category for an individual subject's, namely, "own mental health problems at an early age" (p. 228). The data show that mental illness among household members would be described as parental mental illness. Criminality among household members and physical neglect were not reflected in the participants' responses. With the exception of Barbarita and Lienee all the respondents had experienced at least two ACEs.

Table 3: ACEs reported by participants

Pseudonym	Abuse			Emotional Neglect	Parental Mental Illness	Parental Discord	Parental Substance Abuse	Own Mental Illness	Actual Isolation	Feelings of Abandonment and alienation
	Physical	Emotional	Sexual							
WOMEN										
Annie		X				X				
Barbarita										
Goodie		X	X	X						X
Lienee										
Lynn			X	X	X	X			X	X
Micha							X		X	X
Mildred			X	X			X			
Nikki	X	X				X	X		X	
Olivera		X		X	X	X				X
Shirley		X	X				X			X
Vikki		X	X			X	X	X		X
MEN										
Bico				X			X			
Kunkle		X		X				X		

N = 13 - 85% Report ACEs

There was only one participant who experienced physical abuse. I have not classified spankings as physical abuse in the two instances where it was mentioned because the participants did not classify it as abuse. These two participants were from the era before spankings for misbehaving was considered abusive. As one of the two who experienced spanking, in wrestling with this question, I found the corporal punishment for misbehaving much less damaging to my psyche and soul than the emotional abuse. The other, Bico, states *“I wouldn’t say that I came from a real violent home. My father gave me a beating once in awhile when I deserved it.”* Therefore, I don’t feel it necessary to impose or project others’ perspectives on how Bico interprets being spanked. However, when

Nikki recounted that her “*dad was abusive towards my mom and he made my mom hit us*”, the physical abuse is indisputable.

One of the classificatory challenges I encountered was how should emotional abuse be differentiated from emotional neglect. Therefore, words, gestures and behaviours that have been internalized as painful are categorized as emotional abuse. For example,

So when we went out with him [her father], if we ever did, he would sit separately from us. So it was, like I thought that was really okay. I didn't think there was something wrong with that. But I was getting the message that, you know, I'm a failure, I'm never good enough, and all those negative messages (Nikki).

If the participant explicitly stated the experience of emotional abuse, I have kept their categorization.

There was no kind of physical or sexual abuse that other people had to go through. I had a lot of emotional and verbal abuse from my mother. That's been a hard one to deal with. I'm a lot better now (Annie).

I have classified emotional neglect as being physically absent for a large part of family activities or as being emotionally distant, what participants have expressed as ‘cold.’ For example, “*My mother was very cold*” (Goodie) or

I had a very angry father, who was unpredictable, and a very cold and distant intellectual mother. So my childhood experience, although I didn't want for anything in terms of food or clothing or shelter, was fear-producing and not very nurturing (Kunkle).

Emotional abuse was the most prevalent ACE among the participants. Seven of them mentioned emotionally abusive experiences. Five reported emotional neglect. Dayton (2000) states that when our needs for nurturing are not met through our early kinship relationships, “we can develop an emotional hunger that is never met and is characterized by our seeking to redo the past—to meet our early unmet need with the wrong people at the wrong time and place” (p. 17).

Like I got really angry and I think my, like I was acting out sexually at 12 and was promiscuous. There was so much stuff happening (Lynn).

I was going steady with this one guy because it was easier to go steady than not. It was safer for me. So, I spent a lot of time with his family, a very nice family. My teenage years were spent with him and his friends, continuing to do extremely well at school. I never let the drinking interfere with— my drinking was only on the weekend. I still was very active in school, head of my class and valedictorian and you know. I lived sort of, two lives (Olivera).

So my childhood was very sad. I was hidden and continued to behave that way for a long time. I became a mean person, the other woman, constantly staying in trouble and hurting myself and hurting other people (Nikki).

Because I think what part of it is, for me anyway, I didn't want to feel any pain. I didn't want to feel any kind of depression or sadness. So I kept myself at a really high level where all I felt was pleasure from the drugs, not from anything else (Shirley).

Table 4: Frequency of ACEs

Frequency of ACEs	
ACE	Num
Physical Abuse	1
Emotional Abuse	7
Sexual Abuse	5
Emotional Neglect	5
Parental Mental Illness	2
Parental Discord	5
Parental Substance Abuse	6
Own Mental Illness	2
Actual Isolation	3
Feelings of Abandonment and Alienation	6

Five of the eleven women interviewed reported sexual abuse. Among these five women, emotional abuse and/or emotional neglect always co-occurred with sexual abuse. This finding is significant because it suggests that during their childhood, for these women safety and support were not to be found at home. None of the five had close relationships with or felt nurtured by their mothers. Most of the women who experienced sexual abuse discussed it as part of the story of their childhood. Goodie, however, didn't mention it until she was discussing how her outlook on life had changed.

I had so many hates. At the top of the list was I hated religion for no particular reason I don't think. I was sexually abused at age three years old. Because of voices I have heard, I've wondered if maybe the person who sexually abused me may have used Christian things. I'll never know that. I have this bitter, bitter resentful feeling towards organized religion. As soon as I came into recovery, reading the literature, the Big Book (it uses Christian readings), I just let it [resentment, bitterness] go (Goodie).

Parental discord and parental substance abuse were the next most reported ACEs among the participants. Emotional abuse and neglect, parental discord and parental substance abuse came together in several constellations that resulted in the participants' feelings of abandonment and alienation. One exception was in Micha's experience of actual isolation in the form of a lengthy stay in the hospital as an infant, which was combined with parental substance abuse. Lynn was the only other participant who experienced actual isolation in multiple long hospital stays as a young child. However, in Lynn's case there were several other ACEs present including her mother's mental illness. Two of the participants have attention deficit hyperactive disorder (ADHD) which was not diagnosed until adulthood.

There is a strong relationship between ACEs in adults and substance abuse disorders (SUD). Several researchers (Back, Dansky, Coffey, Saladin, Sonne, and Brady, 2000, p. 59; Davis, 1997; Dayton, 2000, and; Ravndal, Lauritzen, Frank, Jansson, and Larsson, 2001, p. 144) suggest that people being treated for SUD should be assessed for post-traumatic stress disorder.

The lack of needed love and attention during vulnerable childhood years is potentially devastating. When this is compounded by family use of substances and traumatic childhood events, emotional pain can be overwhelming. The internal resources of the women in this study were virtually nil, making them greatly vulnerable to the abuse of substances. Feeling good, both physically and emotionally, is basic to the needs inherent in the human experience. Although the use of substances may add even greater pain in the end, the immediate need for relief of the pain is significant (Davis, 1997, p. 12).

As I have shown in this chapter, adverse childhood experiences (ACE) can result in substance abuse in later life. However, what my findings show is that a mother's emotional and mental health or ill-health, emotional closeness or distance, has a significant influence on the child's future well-being. Although it is beyond the scope of this study, the intervention measures presented in the literature on family resilience and family support look promising (Dembo, Shemwell, Guida, Schmeidler, Pacheco, and Seeberger, 1998; Dembo, Shemwell, Pacheco, Seeberger, Rollie, Schmeidler, and Wothke, 2000; Dembo, Wothke, Shemwell, Pacheco, Seeberger, Rollie, Schmeidler, Klein, Hartsfield, and Livingston, 2000; Kirk, 2004; Pahinui, 1999; Put Prevention Into Practice and Minnesota Health Technology Advisory Committee, 2003; Riseberg and Funk, 2000; Seccombe, 2002; Whitney, Kelly, Myers, and Brown, 2003). This literature looks at ways of strengthening families by working from the strengths of their members and facilitating access to supports that are beyond the scope of the particular program. Family support/resilience as presented by Pahinui (1999) and Put Prevention Into Practice and Minnesota Health Technology Advisory Committee (2003) acknowledge the micro and macro, individual and societal aspects of addiction problems.

There is a need to identify enduring solutions that more effectively use available assets, capacities and resources of both families and communities. In particular, families have a capacity for growth and development that traditional service systems do not effectively mobilize. Most families can benefit from assistance that anticipates and provides support children need to meet the challenges of their development tasks (rather than assistance that waits until problems emerge). It is also important to understand the interactional influences among the child, the family, and the community environment (Put Prevention Into Practice and Minnesota Health Technology Advisory Committee, 2003, n.p.).

Knowledge of childhood experiences as recollected by an individual battling addiction is a necessary element in an holistic plan for recovery. Proactive treatment,

however, should be the mandate of teachers and other professionals who work with children to intervene on behalf of at-risk children and adolescents. Unfortunately, the traumatic experiences in children's lives do not always present clearly identifiable symptoms or clues. In looking at the connections between substance abuse and child mistreatment, DiLorenzo and colleagues (2001) suggest that there is a possibility that the substance abuse may actually be due, in part, to the parent's own history of abuse as a child and the fact that the parent may have ongoing, untreated posttraumatic stress disorder. In addition, both the painful feelings stemming from unresolved trauma and the isolation can lead to a loss of spirituality and the inability to adequately parent and maintain an appropriate environment for children (p. 266). The next chapter discusses how the participants have dealt with their painful histories, regained or attained a sense of spirituality and sought to correct their inadequacies as parents.

CHAPTER FIVE: RECOVERY PROCESSES

The previous chapter explored the childhood experiences of the participants in light of the literature on the relationship between these experiences and addiction. In this chapter the recovery part of the story begins. The following excerpts demonstrate that there are some shared views between what the participants view as contributing to their decisions to stop using and the literature, including hitting bottom, wanting to be a better mother and the possibility of a better future. For example, Kunkle gave the following account of hitting his bottom:

Kunkle: *So then December 13th, 1981, I went to the Liquor Store to get my supply of booze for all these parties and things and Christmas Cheer. I don't remember starting to drink but I obviously did. I came to, at various points in there, kind of snapshot memories. I'm not sure now when exactly it was but somewhere around Christmas or New Year's, one of those two days, I was living with a woman. I had no idea why but I came out of a blackout. I have a snapshot memory of her being up off the ground, me holding her by her head in one hand, I was extremely strong, with a machete in the other. And I dropped her and I dropped the machete and went back into a blackout. I came out of the blackout somewhere December 31st or January 1st again with this vision of what had happened and decided, I'm insane. If I have enough strength left, I'll walk down to the Alano Club and they can decide what to do with me. So by the grace of God, I bypassed the Psych Ward. Otherwise, I'd still be a psychiatric patient. I made it down to the Alano Club and sat down. I ran into some guys that I knew from before, ex-drinking people who had disappeared. They were now sober members of AA and they took me to my first meeting, Saturday night, January 2nd. And I've been sober ever since (Kunkle).*

In the next two interview excerpts, Goodie and Barbarita express their desire to be better mothers.

Goodie: *During my drinking, I abandoned my son around age six or seven. I left him and my husband. My husband was not healthy. I felt a desperate need to leave him. I stayed away for three years. My husband died. I went back to Ontario to my son. I knew I had to quit. He was 10 and a half then. It took me three or four years to quit. I think I wanted to be a better mom.*

Barbarita: *I wanted to stop using because I could see that my children were starting to get into drugs and I could say nothing to them, since I was using myself.*

They got to the teen years where I could no longer fool them. I saw them start to hang out with the 'loser' crowd and I was afraid they were headed for a life of crime. It didn't happen that easily though. There was an intervention that started the ball rolling because my family, mother, father etc, now all knew. One day I came home after another near accident in the car. It was getting harder and harder for me to go out into the world at all and I had 3 children. I had to go out for gas, groceries, PTA etc. I was still trying to lead a double life, where nobody on the outside knew what was going on in our house. I had several close brushes in the car in under a week and I was afraid that I could not carry on pretending to be OK anymore. I called my ex-husband and let it all out. I had a bit of cocaine psychosis I think. He was the one who blew the whistle on me and my husband. I was angry at first but very thankful down the road. As a result of his action I had to start attending meetings and had to get a drug and alcohol counsellor. My recovery had begun.

All of us, I believe, want a better future. I argue that in order to attain that goal, the participants' transformation from addiction to recovery rested in their ability to learn how to deal with problems and stress in new ways. I maintain that recovery is a learning process with four components that are spiral in nature: (1) surrender, (2) self-assessment, (3) willingness to change and (4) non-complacency. In the next section, I introduce an interpretation of the spiral nature of learning recovery. Conceptualizing recovery in this way allows for the differences in recovery programs while showing how they work to promote successful and long term abstinence from addictive substances.

This study, based on the words of the participants, demonstrates how the ongoing navigation of the spiral processes of recovery and spirituality works to deepen an individual's spiritual life and life in recovery. In addition, the data show that for the participants in this study, spirituality and recovery are intrinsically interdependent and mutually nurturing.

Learning Recovery

The participants in the study were involved in only two of the recovery models that were mentioned earlier: The 12-Steps and the 16-Steps of Dr. Charlotte Kasl. Therefore,

for this study I concentrated on these two models. The chart below represents how the two recovery models, the respondents' stories and the spiritual journey can be mapped as recurring cycles. Each cycle has four quadrants. Cycles are not merely repeated but are more like a spiral that goes deeper and sheds more unhealthy skins like the peeling of an onion with each pass. There are benchmarks or lessons that are learned in each quadrant. After the initial round, each succeeding journey reinforces, builds on or goes deeper into the lessons of the previous round.

Figure 1: **Spiral of Recovery**



The table below shows which steps are included in each quadrant.

Table 5: Comparison of Recovery Models with Recovery Phases

1. SURRENDER PHASE	
12 Steps of Alcoholics Anonymous	16 Steps of for Discovery and Empowerment (Dr. Charlotte Kasl)
<p>1. We admitted we were powerless over alcohol - that our lives had become unmanageable.</p> <p>2. Came to believe that a Power greater than ourselves could restore us to sanity.</p> <p>3. Made a decision to turn our will and our lives over to the care of God as we understood Him.</p>	<p>1. We affirm we have the power to take charge of our lives and stop being dependent on substances or other people for our self-esteem and security. Alternative: We admit/acknowledge we are out of control with/ powerless over _____ yet have the power to take charge of our lives and stop being dependent on substances or other people for our self-esteem and security.</p> <p>2. We come to believe that God /Goddess/ Universe/ Great Spirit/Higher Power awakens the healing wisdom within us when we open ourselves to that power.</p> <p>3. We make a decision to become our authentic selves and trust in the healing power of the truth.</p>
2. SELF ASSESSMENT	
<p>4. Made a searching and fearless moral inventory of ourselves.</p> <p>5. Admitted to God, to ourselves and to another human being the exact nature of our wrongs.</p>	<p>4. We examine our beliefs, addictions, and dependent behavior in the context of living in a hierarchal, patriarchal culture.</p> <p>5. We share with another human being and the Universe all those things inside of us for which we feel shame and guilt.</p> <p>6. We affirm and enjoy our intelligence, strengths, and creativity, remembering not to hide those qualities from ourselves or others.</p>
3. WILLINGNESS TO CHANGE	
<p>6. Were entirely ready to have God remove all these defects of character.</p> <p>7. Humbly asked Him to remove our shortcomings.</p> <p>8. Made a list of all persons we had harmed, and became willing to make amends to them all.</p> <p>9. Made direct amends to such people wherever possible, except when to do so would injure them or others.</p> <p>10. Continued to take personal inventory and when we were wrong promptly admitted it.</p>	<p>7. We become willing to let go of shame, guilt, and any behavior that keeps us from loving ourselves and others.</p> <p>8. We make a list of people we have harmed and people who have harmed us, and take steps to clear out negative energy by making amends and sharing our grievances in a respectful way.</p> <p>9. We express love and gratitude to others, and increasingly appreciate the wonder of life and the blessings we do have.</p> <p>10. We learn to trust our reality and daily affirm that we see what we see, we know what we know, and we feel what we feel.</p> <p>11. We promptly admit to mistakes and make amends when appropriate, but we do not say we are sorry for things we have not done and we do</p>

	<p>not cover-up, analyze, or take responsibility for the shortcomings of others.</p> <p>12. We seek out situations, jobs, and people that affirm our intelligence, perceptions, and self-worth and avoid situations or people who are hurtful, harmful, or demeaning to us.</p> <p>13. We take steps to heal our physical bodies, organize our lives, reduce stress, and have fun.</p>
4. NON-COMPLACENCY	
<p>11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.</p> <p>12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics and to practice these principles in all our affairs.</p>	<p>14. We seek to find our inward calling and develop the will and wisdom to follow it.</p> <p>15. We accept the ups and downs of life as natural events that can be used as lessons for our growth.</p> <p>16. We grow in awareness that we are sacred beings, interrelated with all living things, and we contribute to restoring peace and balance on the planet.</p>

The 12-Steps of AA were discussed earlier but a little more should be said of the other recovery model. The 16-Steps were devised by Dr. Charlotte Kasl to provide a recovery model that could be more empowering for women than the 12-Step model. One of the major differences is the language used in the 12-Steps that refers to God in the masculine gender only. Two of the participants in my study attend 16-Step meetings. One attends the 16-Step meetings exclusively, the other attends 12-Step meetings as well. It appears that the women go to 16-Step meetings after starting with AA, as Annie relates:

12-Step programmes saved my life. I don't go to them anymore. I work with the 16 steps now, a different model. [Interviewer: Native model?] No, I can show you the steps, by Charlotte Kasl, who's a woman who has about the same amount of time that I do. She realizes that the 12 steps weren't working for her. They are written by two, white, upper middle class Christian males in 1935. The dogma in 12-Step groups is that you don't change the wording of it, you do not change the wording of the steps. It doesn't work anymore for a lot of people. What she did was courageously change the steps and she created a whole new model: much more spiritual and it doesn't have the defects of character, shortcomings, doesn't have 'God as you understand him.' It is much more inclusive and spiritual and beautiful, beautiful. I've been using that for many years.

The 12-Step and 16-Step programs, although set out in a linear fashion in Table 4, are meant to be continuously repeated. Surrender, in the first trip around the spiral is deepened by the growth, experiences and insights gained in completing the first cycle. So it is with each journey through/around the steps. Since this study requires that participants look back over their experience of recovery, we can get a sense of the cyclical nature of these stages of recovery by looking at how they felt at first and how they feel now. In the next section, surrender is looked at as the participants acknowledge their need for help and for change as well as their initial perspectives on the notion of a ‘Higher Power.’

Recovery and Budding Spirituality: The First Trip Around Spiral

Surrender

‘Surrender’ is a term is frequently used in recovery talk and is sometimes misunderstood. Surrender can be seen as an admission of defeat because in the initial stages of recovery, it is an admission of the need for help and the need for change. In Dr. Kasl’s 16-Steps, the need for change is articulated in empowering language rather than the language of powerlessness. Yet the need for change is still quite clear. Surrender in this sense is reflected in the participants’ stories.

Lynn: *When I stopped using cocaine it was about 2 or 3 in the morning. I was sitting on the kitchen floor in the dark waiting for the guy I lived with to come home because he used. It was like I got kicked in the head. I describe it as that because I had all my feelings all of a sudden and I hadn’t felt, I hadn’t felt in a very long time. I’d gotten to a place that a, I couldn’t be there and feel. I’m not being very descriptive. I was living with a pimp and I was doing a lot of things, they were fine for me as long as I wasn’t feeling. So when I got kicked in that head, that experience and had all my feelings, like I was just a, it’s like everything fell apart. Like I just couldn’t go on. That night I was sitting on the kitchen floor and just like whack, I felt that feeling and I saw my life. It was like being outside yourself and inside yourself at the same time because the coke addiction, the double life like working in the day and doing drugs and sex at night, not sleeping, not eating. My health, my resting pulse was like 220, between 180 and 220, it just was total insanity. And then feelings because I hadn’t felt in so long, it was just like getting*

whacked with all your feelings start coming back, just that overwhelming sense of I just can't do it anymore. Not even well I don't want to, none of that stuff— just can't.

Mildred: *When I woke up the next morning and looked in the mirror I had forgotten about the night before and realized that I had cracked off my four front teeth, I had stitches in my mouth (I can't remember if I had stitches in my forehead as well) but my face was black and blue and was the size of a melon. It looked like I had taken a beating and considering how often women get beaten I figured that's what it was. I looked at myself and I have taken beatings. I thought, who gave this beating to you? and I thought, it's me, I did this to myself. This one I couldn't nail the [blame on anyone else]. There was no question once I got the answer. It wasn't anyone else's fault; this one was my own fault. I thought, the person who did this thing to me is me. I'm in a relationship with a violent alcoholic, whatever. This violent alcoholic that I'm in a relationship with is me. The person in me who was the little girl could tell the person who was the alcoholic, "It's over. This relationship is over."*

Sometimes it is difficult to travel the road from the admission of the need for change and actually making a lasting change. It is important to realize that relapse is a part of the recovery process. From attending AA meetings for the last fourteen years, I have come to realize that recovering from addiction on the first try is the exception rather than the rule. The following stories support this perspective.

Bico: *I decided to stop when I was about 30-35 maybe even before that. I didn't get stopped till I was 42. I tried to, I swore off drugs, I ended up in jail, I did a lot of things, where anybody in their right mind would have quit using and drinking. I ended up in Detox one more time. I went in and out of two or three different relationships in my life. I didn't have any relationship until I was in my 20's. I had one that lasted a long time. I got in a couple of shorter ones. They all ended up the same. They ended with me being violent, my being in jail.*

After not drinking for ten days, Bico and his girlfriend went to Hope where they paid for a room for one night before going to the hotel bar. He continues—

We went into the bar.... I was going to have a coffee. Then I decided I'm going to have a couple of beers. Five days later, I was on the street outside the Pennsylvania Hotel on Hastings Street with no money, no clothes. She was gone somewhere. I was just desperate and destitute. I had my arm broken. I didn't know where to go. I was spiritually broken. I couldn't come up with a plan. If I'd been able to cry, if I hadn't been so hardened by my lifestyle, I would have been bawling my eyes out. I had to find the Detox Centre. I had no where to go I had no money and I needed a drink. I was falling apart. I couldn't find a Detox. I didn't intend to get sober. I

didn't make the decision to get sober. I just wanted someplace to get in out of the cold, to lay down. I was so hungry and sick. They let me in. It built on from there. People just kind of guided me. I wasn't able to bounce back. I'd get two or three days in the Detox and I'd have a plan. This time it was months before I stopped shaking. I couldn't read a book. I'd realize I'd read the same line ten times. It was pretty remarkable that I recovered from that state, I think— nothing short of a miracle. People came up to me about a year after I got sober and said, "Where did you get sober?" I'd say, "I used to go to that meeting of AA. You're that guy! Holy cow!" It was that big of a transformation.

Even with nascent spirituality, relapse happens. Spirituality and recovery require more than knowing the step or the rules. There has to be engagement and the willingness to learn, change and grow because in addition to what the individual might possess themselves as far as determination, one needs social support. Moreover, support is more readily accepted when it is offered by someone who has 'been there.'

Shirley: *My decision to stop using drugs wasn't so much, "I don't want to do drugs anymore," I didn't want to get sick anymore. And I felt like I was going to die the last time I did it. I didn't ever want to have to go back there and I didn't want to have to do more jail time. That's what I wanted to stop. If I thought I could do dope today and not lose everything I worked so hard to get, I would do dope today because I like it. To say I didn't would be a lie. I liked it....*

What prompted my decision to stop, my life's unmanageability. And I found, I realized God. I was really sick, in prison, coming off of my heroin and cocaine habit. I weighed 108 pounds. I weigh 200 pounds today. I was really skinny not that I'm slim now but I was really skinny, just skin and bone. They had put my mattress on the floor. They were afraid that I would, in my convulsions, I would fall and break bones. So they made a bed on the floor in my cell and they called the doctor and they called the chaplain. The chaplain came first because he was at work and he prayed over me. That was my conversion experience because what happened it was like, I don't know if you've ever had a child, but when you're finished all your labour pains they give you this nice warm blanket to wrap around to stop the cramping. And that's what it was like, it was like God put his arms around me and everything kind of, I became at peace. I was still sick and I was still vomiting, still diarrhea and still sweats and chills, but there was a peace, something I never felt ever before. And I had no idea what it was. I didn't know if it was God. I just know I could sleep and I slept. One thing about a heroin addict is you don't get to sleep when you're coming off heroin. Your nerves are on fire. You just can't sleep. You feel like ripping out your hair. If there was a way I could have committed suicide at that point, that's what I would have done. That's the depths of the pain and anguish you go through coming off of that stuff. So for all of that to change once Hank prayed over me, it was like whoa. I slept I don't know for how

long but when I woke up, of course I was still sick and I got down on my knees on the cement floor and I started to pray. Every second word was a cuss word because that's how I spoke. I was praying to someone I really didn't believe was there anyway. In fact, I think I mentioned that in my prayer. But it happened again. The peace descended again and I slept more. From that moment on, I was a complete idiot for about a good year I guess, running around with a bible under my arm and preaching, telling everybody I found the answer. Then I was paroled to treatment and even after I left treatment, graduated treatment I went and used again and I carried my bible around with me. I had it sitting in the living room on the coffee table and a friend of my came in. He was up to nine armed robberies at that point and he said, "pass me that book." I said "Greg what book? What do you want the bible for?" And he said, "the Greg you know isn't the only one that I am. Pass me the book. I know this book." And he started flipping through it and I thought it was kind of weird because I thought I was the only one and he looked through it. Then he handed me the bible back. He went on his way and I continued to use for a couple of more days. Then a friend of mine came over and I was starting to get sick again. I had been out about 12 days or so. A friend of mine came over and I bummed some money off him to get me better. He said, "I'll give it to you this time but the next time I'm taking you to detox. Is that a deal?" And I said it was. The very next morning, he came to take me to detox and that was the last time I ever did a drug, 8¾ years ago.

Shirley's experience illustrates the value of social support for a person in early recovery. One of the primary reasons for the existence of AA and other self-help groups is to provide social support. For some individuals the social support found in the group is the only 'Higher Power' they can accept in the beginning. "The spiritual part— at first it was the 12-program but I was able to take it further. I was able to feel God. I had had the obsession lifted and so I was able to feel that" (Micha). Brown (1994) argues that for people in recovery, admitting powerlessness and admitting dependence on a higher power is, paradoxically, empowering. "The work of recovery involves the development of autonomy, grounded in acceptance of one's basic human dependence, and the development of mature interdependent relationships with others" (p. 3-4).

The first thing was for me to believe in myself. I believed in the Program, I believed in the people who were helping me in recovery but I didn't have the belief in myself. Maybe it was there but I didn't know how to bring it out: to put it from the heart and soul and bring it up into the brain. It's like this little trick. You stand in front of the mirror and you have those little stickers on it saying, "I am a good person",

“I’m loved”, “I have this and that”, “I love myself”. To stand in front of the mirror and say that out loud to yourself, you’re thinking who’s this for, who does she think she is? I have a lot in me that I never let out to people. One of the things that brought on my nervous breakdown was keeping everything inside me. Never worrying or thinking I had a problem. Solving the world’s problems but not your own. Never opening up. Believing in a higher power helps me and gives me the strength to help others and help me to go on (Lienee).

The construction or acceptance of a Higher Power is always different from whatever concept— or lack of one—that an individual had in their childhood even if one remains in the same faith that had been practiced as a child or in the family of origin. For example, although admitting I was powerless over many things in life freed me to work on the things that I could change—with help, I still had to reevaluate my understanding of God. The change in one’s understanding of God is articulated with clarity by Goodie.

I met a woman in the program when I was still struggling (I didn’t get sober right away, it took me awhile), after I’d had my last drink, but I was no way grounded in the program. I remember that I thought the Higher Power sat on my shoulder, wagged a finger at me, to tell me when I was wrong. This woman had a difficult time in relationship with her partner. She was telling me that God was always with her. She made a gesture, touching her breast. When she said that, in my own breast, I just had this warmth and fullness. It was a huge spiritual experience for me. When people talk about being empty, having a big hole, once you’ve had that spiritual feeling, it can always stay there. When you asked me the question, I felt the question— the full, warm, I’m okay, the universe is unfolding

On the other hand, not everyone has such a corporeal experience. Annie describes her quest as follows:

The Higher Power, it really took me awhile to get to any understanding about what that was about for me. I wished so much that I was Christian or I was something so that I could attach myself to it. I’m just not any of those things. What I knew was that if I didn’t want the sun to come up tomorrow, oh well, it was going to come up anyways. There was something bigger than me. If I wanted the grass to be purple, it was still going to be green. There was something bigger than me out there. As I started exploring myself spiritually, I started to really feel a connection to something. I don’t know. I don’t have the words to explain it. I just know that there’s something bigger than me that I am a part of.

Feelings of connectedness and belief in a Higher Power are prerequisites for honestly exploring one’s strengths and weaknesses. This stems from the realization that

one cannot control everything but that there are things within one's control. In a sense, recovery depends upon the ability to accept responsibility for one's own actions and the realization that we are powerless to fix or change anyone else's. Responsibility starts with a self-assessment.

Self-Assessment and Responsibility

In the 12 and 16-Step programs, self-assessment entails making “a searching and fearless moral inventory of ourselves” or examining “our beliefs, addictions, and dependent behavior in the context of living in a hierarchal, patriarchal culture.” This self assessment is often a written exercise that is then shared with another person, which is Step 5 of both programs. Everyone comes to this step in their own time. Usually by the time an individual is ready to take this step they have built up trust in and support from their particular group(s). Trust entails having distinguished which people they can trust and having developed trust in the step process itself. Step 5 is the step that most closely resembles ritual confession and in a sense has the same purpose, which is to help the ‘confessee’ to identify what aspects of their lives are keeping them from right relationship with God, themselves and others. This step is not done in a group but between the person and someone they trust, who may or may not be a person in ministry. The main criteria for the person with whom the ‘inventory’ is shared is that they are familiar with the particular step program and are able to direct the person further on the path to self acceptance, self forgiveness and healing. The purpose of sharing this list with another person is to safeguard against the omission of the good points about an individual and to assist the individual to see the underlying pattern of their behaviour or beliefs. It is usually at this point in a person's recovery that their outlook begins to change.

Addiction is an awful way to have to live and to be addicted, you know, that's the whole focus. So especially, when you don't realize what's going on, the energy you have to put in to either hide or get the drugs—hide your use and don't let anyone know and everything that goes in and around it and the destructive behavior. So, I don't have that anymore. I have a good behavior and it's empowered me and given me a life. The fact that I was on my knees and had nowhere else to go but I admitted that. By admitting that I had nowhere else to go and that I didn't want to go into any more destruction further in my destructive behaviour in my life. I was able to have that clarity and know that I didn't and so by doing that and giving that up and honestly seeking help for the first time in my life and it changed my life (Micha).

People actively engaged in their addiction become adept at avoiding responsibility and giving vacuous excuses for their behavior. We delude ourselves into thinking that these excuses for our unreasonable behavior should be accepted. We feel persecuted when others don't believe us or get fed up with us. Gradually, however, we learn to be responsible.

I'm responsible now for myself, becoming more responsible financially, owning my behaviour, the way I treat people and act towards people. When I was three years sober, my mother came out for my cake. I'd been writing home. I got into Detox about ten years before that... penitentiary... history.... I phoned my mother from Detox and said, "Mom" I was almost crying. I was all choked up. "I've got a problem with drugs and alcohol." She went, "Yea." When I got sober here at 42, in the next three years, I knew everybody's birthday, all my cousins, brothers, sisters. When birthdays came along I sent birthday cards to everybody. I phoned my mom all the time and told her how good I was doing.... A friend of mine had an apartment. She [his mother] got to stay for a whole month. During that time, I took my cake. When she left, she said to me, "I see how you live, your rent is paid, you have food in the fridge" I looked in her eyes. I knew the worry I had put people through and how I had affected their lives. There's one thing that I can say that has changed in my outlook on life, it's that I have become aware that I have some responsibility. I've become employable. I'm a pretty good employee. I've got some hopes today (Bico).

During this stage, we come to realize the difference between what we do have power over and what we don't. From my own experience and informal conversations with others in recovery, we have to revisit this realization often. We have to reaffirm the fact that there are people, places and things over which we have no control.

One of the changes that took place in me was, I'm an alcoholic who's virtually homicidal most of the time. I hate injustice. I've always hated injustice probably because I was raised in communist household but today I can accept a lot of things that used to enrage me. It's not that I agree with these things but I can accept that for today, I'm powerless to change these things and work incrementally to produce change, through changing one person at a time, through working in committees, through talking to people. Before I had to change the world through brute force. Revolution came out of the barrel of a gun. So the program has changed me and the concept of being powerless has changed me and given me a more humble opinion of myself (Kunkle).

One of the biggest changes in my outlook on life is that I no longer wallow in self-pity. I have become aware of the emotional, psychological, and social factors that have had an influence on my life but no longer feel impotent to change their effects. In a way it's like the serenity prayer working to change the things I can and accepting the things I can't. For me this means for example, if someone is in a bad mood, it doesn't mean that I'm to blame and it isn't necessary for me to try and change them. They are entitled to their moods. As far as unjust structural or social factors, I can work with others to try and change these (Vikki).

It is during the stage of self-assessment that perspectives on spirituality begin to grow. May's (1994) observation, cited earlier, illustrates certain issues some individuals must wrestle with as part of this growth.

the devout patient must abandon his/her religious dogma before a new spiritual focus may be obtained. Patients I have had who are over 50 years old - especially Roman Catholics and Southern Baptists - are prone to attribute their shame from addictive behavior to their violation of church dogma. Moreover, they tend to believe that alcoholism and drug addiction are moral weaknesses to be punished by God. Their sense of 'unworthiness' makes it all the more difficult for them at times to stop using (p. 4).

Yet, for many alcoholics, religion is an important part of the recovery process and religious orientation, beliefs and practices can change in sobriety. In one study, AA participants considered themselves more religious and showed significant changes in spiritual and religious practice as their recovery progressed (National Council of the Churches of Christ in the U.S.A, 1989, 1993, p. 27).

What is Spirituality?

[A] search for or an acknowledgment of the spiritual in the lives of adult learners is connected to the search for meaning that gives our lives

coherence. For all adults, this is connected to how we create meaning in our relationships with others. It is in our living and loving, in our attempts to move beyond power struggles in personal relationships. It is in the stories we tell to stay connected to those we love. It is in the creativity of artists, as well as in the adult learner sitting by the classroom door. It is in how we struggle for justice, on behalf of ourselves and others, and in the spirituality of our ancestors that inspires us to work against racism and move forward in the world. And for many adults it is connected with how we understand a higher power or a transcendent being (Tisdell, 1999, p. 93).

‘Spirituality’ is one of those words with as many meanings as there are people who use the word. A few themes recur in the participants’ responses such as:

- spirituality as community, relationships or connectedness with others;
- connection, relationship or communication with the Divine;
- God/Spirituality as an energy or force;
- as life; and as freedom.

Ultimately each participant’s definition of spirituality is a conceptual or perceptual snowflake, similar to the others yet unique.

Annie: *I don’t know if there’s a benign being, a god, there certainly is an energy, there certainly is a force, something that has created all of this. I don’t know how all that happened. It’s pretty brilliant. It makes sense to me that whatever god is has just gotten out of the way and allowed us to have free choice. I’m glad about that. I think it’s really important. When something bad happens it’s not god’s fault or god’s will. We created our own reality here. We’ve created—there’s a law of cause and effect on the planet. It’s not that god is a punishing god or a gift giving god it’s that we have the freedom to create and reap whatever consequences we’re going to get from those choices. Knowing that, I guess to be intentional is to be spiritual. My intent would be to know the best of myself and to give the best of myself as much as I can. It feels good to do that. I also because of the effects I get back. I don’t really believe in altruism. I just don’t. Even Mother Teresa felt good about doing what she did. It’s not altruism because she got something from it. That’s really neat. I think that’s right. That’s like being the center of your own universe. She was the center of her own universe, too. [Then you] can give and give and give from that place, from that clean, intentional place. I’m not comparing myself to Mother Teresa. She’s an inspiration, people like that are an inspiration. Jesus is an inspiration, too. I love how a lot of teachers are just so amazing. I love how Jesus got very angry, really, about what was going on. That’s great. It’s an appropriate response to a situation. Just be clean and real and authentic and give from that place, and receive from that place, too. We talk about*

that a lot. Clean giving and clean receiving. Are we giving cleanly? Can we receive cleanly? Especially for people in this field. It's much easier for most people to give than to receive. Learning how to do both... there's so much in spirituality. Being alive. So cool. This is from somebody who wanted to kill herself.

Barbarita: *Spirituality for me personally means I am a follower of the Lord Jesus Christ. He has saved me from out of the mud and put my feet on solid ground. He has put a new song in my heart. I need to keep Him as my first love in my life, because without Him I am nothing. He gives my life meaning. I get to belong to a community of believers (the church) who worship, praise, encourage and support one another.*

Bico: *Spirituality is the gift of being able to help another human being. I think it's an energy, a force. It's a combined energy that the spirits of many people have focused on one primary purpose that can better the world.*

Kunkle: *Spirituality is the art of awakening that spirit that exists within all people and developing it to a state where it communes with God. I think only the spirit is able to commune with God, not the mind. And so we have to develop the spirit within, which in Christian terms is the Holy Spirit.... I think the spirit within us is the breath of God. It's conceived into the flesh without sin and is protected in this shell, the holy seed and through spiritual pursuits we open that up kind of thing. It's protected by God. It's the good part of everybody. Even in Robert Pickton⁶, I'm sure if you could crack through layers and layers and layers of mental illness and trauma and whatever has happened to him in his life to create this monster that we see on TV, inside is this kernel of truth, the God seed, which is waiting to be born.*

Lynn: *It's been a real journey back to faith. One of the things for me, in early recovery I read The Way of the Pilgrim, and I wanted to be a mystic so bad. I wanted that more than anything else and I kind of, quitting drinking became a part of the process for me. I had to quit drinking and it was about quitting drinking but it was also my journey with God. The two for me were together. I love the 12-Steps, for me it was so fitting, just in removing the things for me, that keep me from God. I was going to church, to answer your question. Right now, I'm not but it's not, it's a decision right now but it's quite possible that I'll find a new community to go to. For today, I'm taking a break. I have some things to work out too because I know wherever I go there's going to be people and people aren't healthy. We're all in our varying degrees of growth and the potential for something like that happening again is still there. So it's just, I guess it's just like anything else, choosing life, not letting my fear keep me from what I need in life.*

⁶ Robert Pickton has been charged with 22 counts of murder in the case of over 50 missing women in Vancouver at the time of writing.

Micha: *I don't have a clue. Without my spirituality, without spirituality, I would have nothing. So it means everything to me. It really does. I'm a Christian. I really want to be a Catholic Christian, properly. And so that is very important to me. So my spirituality is Christian. Without it, I certainly could be in trouble very quickly again. This is the freedom. This is the freedom from alcohol and freedom from drugs. This is freedom to live and be productive. So my spirituality means freedom.*

Mildred: *Interconnectedness. There's times that we all experience – I've experienced, that's for sure – when I'm standing there and whatever it is that I'm dealing with - be it a mountain range or a flock of geese or something on a real large scale of what was here before human beings started mucking around with things – something of such soul-stirring beauty that you want to cry or you get shivers up the back of your arms or your neck or whatever. At that time I remember that I am connected that I am a small part of an enormous plan. It's not about what am I going to do in half an hour, can I get a pair of boots, are they going to be on sale next week, where did so and so go and is he going to pay me back that \$20; all the rest of that little stuff. This has been happening to people for centuries, millennium. We stand in awe in recognition of our humanity. Our life has been given to us for this little interval of time. We're like fruit flies on the planet. If you go fast you're going to miss it.*

Nikki: *Once it is felt - you know... but words are hard to find to explain it. It brings feeling of power, joy, fullness and peace - contentment and love. I feel alive to the world- freedom.... and shine with light with a knowing that I am right where I am supposed to be, aware and in the moment with all of the beauty around me - in awe at the miracle of our own existence. Spirituality is self love and acceptance that is inseparable from our love and acceptance from others. Living in tune with the harmony of the spirit within us with honesty and trust... internal personal power. Peace of mind, self-acceptance and the knowledge of God come from the spirit within us...our Holy Middle.*

Olivera: *The most important things in my life are this: one, my sobriety; two my contact with my Higher Power, which is my spirituality; three, my relationship with my family and friends. As long as I remember that's the most important thing in my life, I can stay centered. I can stay in contact and connected: in contact with other people and connected to my Higher Power. If I don't have the sobriety, because I am an addict, I don't have the other. If I don't have the spirituality, I don't have the connection with other people and the connection with the other people is most important. So it goes beyond anything else, beyond any work, any health, any intellectual pursuits, anything. It took me a while, I mean putting my sobriety first, seemed a little odd. Why wouldn't I put my connection with my Higher Power first? But as I watched other people and listened, especially to my friend Mike, who*

talked the talk and was a born-again Christian and a practicing Catholic. I mean the words that came out of them, you think that they walked with God but they couldn't stay sober. So it came to me that I didn't have a spiritual practice or a connection with the Higher Power until I got sober.

Shirley: *Life, it means life to me, total life. There's a thing that has happened in my spiritual growth and what has been happening and still happening is the more I learn about God the less I know. The revelations that God gives me, you know in the Bible it says the lion will lay down with the lamb, well I'm doing some work with the women and I'm doing a group and I'm telling them, "Who are you going to feed? It's up to you. You can feed the lion or you can feed the lamb. So when a person comes in to wholeness, those two parts that are in all of us become at peace and the lion lays down with the lamb." And I went "Holy Shit!" in my own head, I didn't say that to the women but it was like a revelation. One of my heroes is a professor of Islam and I think I told you this before is, one of the favourite sayings that he has is that if you hunger for God and you find him, at the end of your life you will realize God is all that is. Everything you see, everything you feel, everything you hear, touch, everything is God. Even the light through which you see is of God. And I just know that is the truth. Have you got there yet? As soon as I heard it, I knew that it was true and that's the journey that we're on. That is spirituality. That is not religion. Religion is good. Religion is needed to put conformity into non-conformers, people who want to run their own bus. That's the good part about religion but the relationship with God, that is spirituality and relationship with others.*

Vikki: *I think of spirituality as the process of pursuing a connection with God. I think it is distinct from religion, which can separate people. Spirituality connects people to God, to each other, and to creation. Although I am nowhere near this state, I think that the mystics of all religions have reached that closeness and union with God, which goes beyond religion. Religion is where the tools and practices necessary to spirituality may be obtained but it can also serve as anti-spiritual.*

As stated above social supports are an important part of recovery. "Religious and spiritual groups provide an identifiable social network for adults which can serve as a protective factor in both prevention and recovery. These networks can provide a sense of belonging and purpose" (National Council of the Churches of Christ in the U.S.A, 1989, 1993, p. 16). With the support of step groups and worship communities, participants begin to learn to love themselves and become willing to make the changes that are necessary for a healthy lifestyle.

Willingness to change

Change can be a frightening enterprise for people, especially for people who have spent years building up the walls of addiction. For example, drinking and drugging take up a lot of time and novices to recovery have to learn healthy ways to spend the time previously devoted to finding, getting money for and using drugs. However, with the reassurance and example of people who have already trodden the path from addiction to recovery, individuals become willing to change.

I think that one of the things I see, especially within the program, is the fact that if you're not really willing to change your whole life, I mean that's why we have the recidivism and we have the setbacks and barriers is because we only allow ourselves to go so far. We don't want to leave all that because we don't have faith and so, as wonderful as the 12-Step programs are, it gives a little bit of faith. And it gives a little bit of hope, a lot of people still don't really change all their habits or their behaviour. They modify it and that's why we have the relapses, the setbacks. You really have to take another look at yourself, at your life and be willing to do that. It can be scary (Micha).

The changes required are major. One has to give up friends who are still using. Making amends to friends and family for hurtful acts done during active addiction is necessary to rekindle relationships. This is especially hard because one has to be strong enough to accept the fact that their apology may not be accepted. In this case, the recovering person must learn to respect the other's right to refuse to accept the apology and move on. It is sometimes difficult to fully realize the fact that their part has been done and they are not responsible for the other person's attitude or decisions. When an individual tries to make amends and the apology is refused the greatest impediment to moving on is related to the hardest change of all for people who have had adverse childhood experiences: learning to love oneself. Annie, who became addicted to prescription drugs taken initially for pain caused by Crohn's disease, provides the following example.

In a way, the Crohn's has been a real gift for me in a way, as awful as it is. Without doing the inner work, I wouldn't be who I am today. I don't think I'd be me. The most important thing in my life is my self-esteem. If I don't have that I don't have anything. What do I need to do or not do in order to look into the mirror and like who I see. If I don't have that I have nothing. No money can buy it. Nobody can give it to me. There is no way I'm letting go of it cause I've looked too hard for it and I like it too much. I'm not giving it up, it's my drug of choice. I come first in my life today (Annie).

I actually like myself now. Recovery has made me a better person. It's made me like myself. When I went to the Program that really, really helped. That was like a recovery thing, too, going back to school at that age. I thought I couldn't be in school for 13 weeks. I just amazed myself at what I accomplished. I'm proud of myself (Lienee).

I think that, like I never would have guessed before I went through this process that I would end up where I am. Like a, I have a lot of happiness now and there's still some areas in life where I don't really feel like I belong but in general I have a niche and I don't feel so alone. My creativity has come back to life. As a child I was very creative and in my addictions I'd stopped any drawing or painting or any of the things that really feed my spirit. And just a sense of peace and well-being, I think [are] the main things of my recovery (Lynn).

The willingness to change can only be measured retrospectively. In other words, willingness to change is measured by its outcomes. With the respondents, willingness to change and the strength to do it were deeply intertwined with their spiritual outlook and the results included themselves and their relationships. For example,

I am clean and transformed. I am a new creation. I am free to be the person God created me to be. I have hope and joy on a daily basis. Laughter is always close at hand. I have compassion. I am present. I can be there for you without wanting anything in return. I still live with my second husband, who also cleaned up and came to know the Lord. We are happier and more in love than we ever dreamed possible. Our 3 children are mostly grown up and doing well for now. We are active in our church community and beyond. We now take care of our health and try to lead balanced lives. We have learned about boundaries (Barbarita).

Before I was an atheist and I just ran on self will. So, I've learned how to rely on a Higher Power. I did lose my kids and since I've been in recovery, I've got my kids back in my life. Before I was unemployable and today, I can work. I'm healthy and I don't feel like I'm going to die everyday [laughter]. And I'm not in chaos, my life was constant struggle, constant pain. I wanted to die. And today, I know I want to live because even crossing the Lion's Gate Bridge scares me [laughter.] That's a good sign. So everything has changed and I have a lot of good people in my life. I have a purpose. I found a purpose (Nikki).

My outlook on life, my life—period— has changed so much since I've been in recovery. For me it was allowing Jesus into my heart. I can't believe how my life changed and just knowing about myself and different things. Being able to work where I've been able to work and hear other people's pains, which mine is nothing compared to theirs at times, most of the time, although my pain is still legit. I have a life, pretty much now, that I only dreamt about or hallucinated about, you might even say. I kept trying but I never got there (Micha).

I can't believe I'm the same person. How much I was careless of, particularly, my children, my marriage (I'll never know if I could have done it better sober because he died), my respect for other people—I had so many hates. I have this bitter, bitter resentful feeling towards organized religion. As soon as I came into recovery, reading the literature, the Big Book (it uses Christian readings), I just let it go but I turned towards men and decided I hated men. Even before that I was disrespectful. I didn't expect them to treat me other than disrespectfully. When I came into recovery I discovered that men are people, human beings, just like women. Those two things are huge for me. When I looked after my great-granddaughter, I realized how important little lives are. I was really connected to her. I finally realized I had never been connected to my children. My mind was always somewhere else, trying to be somewhere else, trying to be doing something else. It was such a gift to me to have the experience of making that connection and knowing how important that is to a child (Goodie).

From fourteen years of attendance at AA meetings, AA literature and informal conversations with the participants, I can say that one of the essential elements of successful change and sustained recovery is 'the capacity to be honest'⁷. Shirley's description of her change in outlook conveys the type of rigorous honesty that is vital.

There aren't really words to explain the difference within me. The difference on the outside is I don't use drugs. I don't commit crime even something that might be a little shady. At the Board meeting last night, there were talking and I said, "I'm uncomfortable with this you guys. I've got a knot in my belly. I don't want anything to do with it. I have to be straight up and honest." That kind of thing happens all the time where I listen to the genius within and it says, "Don't go there." And I know not to go there. So that has changed before it was cerebral and conning and manipulating and scamming, doing whatever I could to get whatever I needed and today, it's not that way. It's like dark and light. That's what it's like, light and dark. St. Paul, you know the scales dropped from his eyes and for me. That's sort of how things happened in my addiction. Without a word of a lie, it was like a cloud was over me, a fog, a dark dank ugly fog. And when the conversion happened and I started to respond to it, it was like stepping out into a sunlit day. Everything was fresh and crisp and bright and I felt fresh and crisp and bright.

⁷ (A. A. Grapevine Inc., 1995; Alcoholics Anonymous World Services Inc., 1976, 1990, 2001)

That's the difference between then and now. I don't want to go back to feeling that way. That's the reason, if I had drugs to do today, I wouldn't do them (Shirley).

A willingness to be in touch with our feelings, to practice honesty, especially with ourselves, are lessons for which the help of peers and whatever one's concept of the Divine are most critical. The data in this study suggest that spiritual practice and service are key factors in maintaining the honesty and humility that is essential for sustained sobriety.

Non-complacency

As suggested in the literature, the responses from the participants in this study support the premise that prayer or spiritual practice is integral to sobriety (Bewley, 1993, 1995; DiLorenzo et al., 2001; Kaskutas, Turk, Bond, and Weisner, 2003; The National Center on Addiction and Substance Abuse at Columbia University, 2001). Most of the participants participate in a worship community. I use the term 'worship community' instead of church to emphasize that I am speaking of the people who gather together rather than the edifice in which they gather and to emphasize that building a relationship with a Higher Power takes many forms. For example, the term worship community includes people who come together for religious or spiritual purposes whether or not they gather in a building specifically designated as a house of worship, such as a church, temple, synagogue, or mosque and so on. The participants' responses illustrate the diversity and uniqueness of their interpretations of Higher Power and of how to build and have 'a conscious contact with God' (A. A. Grapevine Inc., 1995; Alcoholics Anonymous World Services Inc., 1976, 2001). The spiritual practices of the participants can be said to fall into four categories:

- 1) those who participate regularly in worship communities
- 2) those who participate sporadically

- 3) those who participate in traditional communities of worship plus individual and/or group worship through artistic expression, and
- 4) those who do not participate in a community of worship.

All of the participants practice prayer, meditation and/or other forms of individual daily spiritual practice.

Those who participate regularly in worship communities describe their practice as follows:

Yes I go to church. My personal spiritual practice is not a rigid thing. I spend time with the Lord most mornings. I read some of the Word and pray for the day. My husband and I say the Lord's prayer together most days also. Throughout the day I might also pray as the occasion gives rise. I usually have some Christian reading on the go. Saturdays I try to plan God time into my day in a significant way; I plan for some solitude. I also run 3 mornings a week and I say the Jesus prayer as I run. I try to attend at least one prayer retreat a year (Barbarita).

Yes, I go to church on Sundays at the Holy Rosary Cathedral. I've been there [St. Paul's Church] a few times with Muriel, one of the older native ladies, on craft day. Yes, I meditate a lot and have prayers I can say to myself no matter where I am. I can be walking down the street and go to the beach at Crab Park, I do that a lot in the summer. I sit at the beach. Poetry. Talk to God. Plus I do a lot of meditating at home myself. I'll light my little candles and get my rosary and do my little meditations. I have my little prayers that I say every night before I crawl into the bed on the floor. I was taught when I was young a little prayer that my mom and dad taught me when I was a kid. "God bless mommy and daddy and everybody else in the whole wide world except for the devil." That was my little prayer. It's funny, I still say that. That's my last prayer that I say at night. I'm laying in bed and I giggle to myself. I do a lot of meditation. It's really, really great. I like it. I let everything out. Play my little religious tapes, church music (Lienee).

I wanted to come back to worship, I needed to worship. I needed to go to church. At first I went to First United and would listen to the sermons of Bob Smith and I would go home and think about what he said. Then I started to hear Eucharist and once a month wasn't enough. But I also have a lot of guilt and a lot of shame and especially knowing.... And I'd go to Mass at the beginning and partly maybe because of my own guilt and my own shame, and I didn't want to talk to anybody. It was an unfriendly place to be but I persisted. And of course, Dr. Schuller and the Hour of Power, was one of my saving graces. His positive Christianity, it was Christianity with a Social Credit outlook, you know, free enterprise and that

appealed to me. But whatever it was that appealed, saved my life. I still give a lot of the credit to Robert Schuller, his stuff on Sundays really encouraged me to want to go back to worship. I'm really eager to start taken catechism again and I'm working very hard to memorize my prayers and say the rosary. I try to say the rosary at least twice a week. In my whole life, I need more God, more Jesus (Micha).

I study spiritual awareness and I do a lot of spiritual energy work. I have a teacher that I take classes from. It's real eclectic. She has Christmas services that are absolutely amazing every year, beautiful, spiritual. She's not exclusive or inclusive she's just everything— all together. I have to be in charge of my own energy. Learning how to not have someone else's energy in my space. Learning how to give somebody else's energy back to them. Learning how to create on an energy level, how to destroy (energetically) what I've created if it's not working for me then create something new. Those kinds of things help me have boundaries. How to distinguish between me and you. What she teaches I absolutely believe and that is that we are spirit in a body. We are both body and spirit, and both are equally important. What we need to be able to do, in her language, is to be spirit-senior not body-senior. Bodies are emotional and messy. We can be spirit-senior and work that way and enjoy our bodies. Spirit goes on however it does. Who really knows? We're starting a new class on Monday called Sacred Space. So in that sense, I go to church (Annie).

Yes I do. Every morning when I get up I do the, "I can't. He can. He will if I ask him." I do that before I get out of bed in the morning and it's just become a habit now and that happens no matter what. It's like "Okay, it's another day." I read the Breviary, the morning readings. I try and put myself at peace without the noise. I get up well before the other women usually and have that time alone. I will smudge. Sometimes I smudge in my office and just let the smudge pot burn. I'll go for a walk in the park to become one with nature. Depending on what I need at that time is what I do for my spiritual practice but I do at least pray, I don't know how many times a day. Whenever I'm doing a group, I always pray before and I always pray during because some things will come up and I don't know how to reach that person but God does. And so I ask God to speak through me to tell this girl what she needs to hear and it works. It works really well. We pray at all meals here. We do meditation, Buddhist meditation. I do an imaging thing with the women especially when they first come in, where we might be an eagle or it depends what they need. If they need freedom, then it's an eagle. If they need comfort, well then they're a mother bear with her cubs and that kind of really settles them down and gets them feeling cozy. We use candles for prayer. We discuss God. This is a spiritual house of healing so we discuss through the eyes of a Christian, a Buddhist, a Jew, a Hindu, an Islamic person, and a Native person, Inuit people, we try and look at God through all different lenses and discuss God. The one thing I know about prayer is when you're discussing God, guess what? God is there in a much bigger way, I think sometimes, than saying the Our Father or a lip service kind of

thing. I go to church, not as often as I'd like to or as much as I used to but I do go every Sunday (Shirley).

One of the respondents who attend religious services sporadically stated that she would like to be baptized into a worship community.

Sometimes. [Interviewer: Any specific religion?] No, I don't know enough about it. My parents were atheists. I'm not even baptized but I'd like to. I do meditation. I try to do that everyday and that's how I get closer to God. I pray and I'm grateful and thankful to God throughout the day and that keeps me grounded (Nikki).

Having been on retreats and other religious communal activities with the other two participants who attend sporadically, I can say with certainty that they are searching for a community of worship.

I have a spiritual practice, yes, a daily spiritual practice. It changes somewhat, depending on what I'm reading. Today, I have a copy of the St. Francis Prayer. I have a copy of "Just For Today", it's from Al-Anon. I use the Serenity Prayer and I have readings from the Dalai Lama and I have reading from the Tau Tse, if that's how you say it. That's what I'm reading right now plus I have the Big Book and the Twelve By Twelve and I read bits and pieces of that. I try to do it first thing in the morning. I go through the readings, I also use a prayer that I picked up, a Loving Kindness Mindful Prayer, it's like a little mantra. "May I be at peace. May my heart be opened. May I awaken to the light of my true nature. May I be healed. May I be a source of healing to others." I start with that and then I work through all the people who are in my life who might have some concern about. You know, if somebody has a cold or is suffering in some way and I add them to that mantra. And then the meditation, I either try at that time or at least a couple of times during the day for a few minutes or ten minutes, I try to meditate, to clear my mind. And then again before I go to bed, I try to say at least a couple of prayers and do some meditation because it works for me to empty my head. I also journal. I keep sometimes 3 or 4 different journals. Like a spiritual journey and other issues that I might be working on. I don't necessarily do all of those things every single day but I spend at least 20 minutes every day doing some of those things. When I was in Costa Rica, because I got up early, 5:30 in the morning and the last year I was there I had a telephone, I had a friend also in recovery who lived at the next beach and I would do my reading, whatever I was reading at that time, I've forgotten what they were and then talk to her for few minutes because she was doing the same thing. It was nice. When I'm in real trouble, which I was in Costa Rica, using a gratitude list was an absolute essential. When my life was totally out of control and I had absolutely no power, my money was all tied up, and there was nothing I could do. There was nobody I could call. There was nothing I could do. So making that daily gratitude list was the most important thing to me. I could be grateful if I had

water that day. If I didn't have water, well then that would be my thing for the day was to find out where I could get a bath and where I could get some fresh drinking water (Olivera).

Yes, I pray, I meditate, I write, I smudge, I light candles, I talk to Her. I make images of Her [Our Lady of Guadeloupe⁸] (Mildred).

Only one of the female participants does not belong to a worship community but neither of the male participants report participating in a community of worship. However, they are all just as attentive to their personal spiritual practice.

Yes, I pray, very brief prayers. I don't meditate, Eastern meditation. I tried that; it makes me absolutely crazy. From the beginning of my recovery, I've believed in reading program literature especially in the morning around the time of my morning prayer. Someone told me once that it is meditation to read it and think about it. How does this apply to me? [Interviewer: there's a Latin name for that. It's called Lectio Divina] Even when we meet in groups, read from the literature, and talk about it, that's a form of meditation. That's the extent of my personal practice (Goodie).

Yea, I pray, I have some quiet time. I don't call it meditation—in the morning. I ask God to help me to stay sober, to give me the strength to carry out, everyday, when I wake up. I read from the AA books. I go to 12-Step meetings. I try to help others by phoning a new guy and asking if he wants to go along with me. Losing interest in selfish things and being interested in others comes from the spiritual practices I do (Bico).

Read, pray, meditate (Kunkle).

Lynn and I both participate in mainstream worship communities but also have forms of artistic expression as part of our group and individual spiritual practice.

I think for me my creativity and my spirit are so together, especially when I'm writing icons. When you're writing icons, you get a relationship going with your piece of work and some of the icons that I, how do I describe it? The last icon I finished was 'entry into Jerusalem.' When I was working on that piece, I got

⁸ Our Lady or the Virgin of Guadeloupe is the patroness of the Americas and is especially dear to the indigenous Roman Catholics and Roman Catholics of colour. The Virgin appeared to Juan Diego in the 16th century at Tepayac. Juan was a Nuatl-speaking Aztec Catholic and the Lady spoke to him in his native tongue. She sent him to tell the bishop to build a shrine where she appeared. As a sign to the bishop, she instructed Juan Diego to gather roses that miraculously bloomed (it was December). When he went to give the roses to the bishop, the image of the Virgin appeared on his cloak. The cloak now hangs in the Basilica of Our Lady of Guadeloupe in Mexico City.

involved with the story and because it's a picture, the different aspects the picture begin to have different meanings for you. A lot of iconography is symbols, so you learn a deeper level of the story. You start riding with Christ and you start wondering how he felt when he was riding into Jerusalem like did he know what was ahead for him. When he was looking back at his disciples, in the one that I did he's not looking towards Jerusalem. So you start, it becomes a whole dialogue and it's like reading a parable in the Bible or you ponder its meaning and you reflect on it sometimes takes you to a deeper level of what it means for you. It's a very prayerful experience and oftentimes other students know this like, when I'm, everybody's, when you're writing icons, like I'm lost—nobody's home. [Lynn has been describing the forgoing paragraph with her eyes closed as if returning to a state of contemplation]. I've always had that experience when I do art. The first time I ever meditated the feeling that I had was the feeling I always had when I do art. When I get lost in a painting I'm no longer like there's no conscious thought. It's like you just, your hand just knows what it's doing. You're not thinking, "okay I need red here and I need to fix the lines." It's not an ego. It's not a, it's a knowingness. I mean when you're learning, you master that kind of thing, not all of my days are really good either, like some of my days are like trudge, trudge, why am I doing this. There are lots of moments when you're lost. That's a real part of my spiritual journey. When I'm not doing art, my mood is really affected. I'm irritable and discontent and just angst. Prayer for me is another large part of my spiritual journey. Prayer is really important for me and art and reading. Reading is very important to me. I go through different periods of what I'm doing. Like sometimes, I'm praying other times I'm doing art. It's very neat what happens to you doing art with women. I mean it would be true for anybody but I'm just using women but even just how it builds relationship. If you do an art project together and you talk while you're doing art, and it's as if a sacred space is created. Now that I'm thinking about it, I had an art group in my house, I had a group of women there once a week for a few hours (Lynn).

Yes, I attend Mass on Sundays and during the week when I can but I feel that spiritual practice should not be static but dynamic. I read spiritual works and pray throughout the day. Sometimes when the house is quiet, I get a chance for contemplative prayer. What I have been doing since the summer is praying through making prayer beads, Christian, Muslim and Buddhist. Since I'm a hyper person and find it difficult to be still, I find that by doing artwork or beadwork, I can quiet myself enough to lose myself in prayerful reflection. Drumming is a very important part of my spiritual practice. We have drumming meditation every Sunday at our house and I've begun attending a shamanic drumming circle that meets twice a month (Vikki).

In light of the four quadrants of the recovery cycle, the completion of the first trip around the cycle means that we carry on going deeper in the spiral process. It is like an artichoke with the center in infinity. Each bract (leaf) tastes good and brings us closer to

the heart although we never quite get there. Spirituality always —and religion sometimes— makes us more sensitive to injustice and more compassionate. Spirituality reminds us of our interconnectedness and interdependence more than our separateness while recognizing the uniqueness of each individual. As a result there is a call to service where reaching out to others keeps us from becoming complacent. The next chapter begins with an exploration of the call to service before discussing recovery as an ongoing pedagogical enterprise. Thus far, I have argued that recovery is a learning process that has four components that are spiral in nature. In recovery, learning and teaching take place in communities of practice of the various self-help or step groups. People new to recovery learn from listening to and observing the people in recovery at meetings and in other settings.

CHAPTER SIX: MANIFESTATIONS OF SPIRITUALITY

Spiritual practice changes how we relate to the world around us and, as some suggest, how we develop our authentic identity (G. G. May, 1991; Tisdell, 2002). ‘Authentic identity’, as I understand it, refers to shedding the masks we wear to please others and/or fool ourselves. It involves an acknowledgement and awareness of our strengths and weaknesses. The emergence of the authentic self enables an individual to voice his or her opinion, even when it is unpopular, that is, to be able to stand up for what one believes is just. Tisdell, in her study of women adult educators for social change, found that

The role and relationship of spiritual development to what these women viewed as the ongoing development of their “authentic” identity cannot be ignored. Further, as these women became more secure in the development of their authentic identity, they felt more empowered to take risks, to tell the truth as they saw it, and to take action, both in their personal lives and in their activist lives (p. 139).

This chapter explores the participants’ work with those still struggling with addiction in terms of their motivation, contributions and the rewards they gain by that work. The participants’ responses make the case that service through helping others with their recovery is the outward expression of their spiritual philosophies. More importantly, their sensitivity to others and their willingness to reveal their vulnerabilities suggest the transformation from retreating from life to being able to embrace life on life’s terms and to be able to practice *agape*—love without expectation. As May (1991) states,

In both joy and pain, love is boundless. Love is open, allowing our hearts to be touched and moved by what exists. Love is honest, willing to be present to life just as it is, in all its beauty and ugliness. True love is not blind at all; it sees what is and feels it as it is with no rose-colored glasses and no anesthesia (p. 12).

In the second section, I argue that Step groups function as communities of practice, where small group learning and legitimate peripheral participation take place. Legitimate

peripheral participation is a term used by Lave and Wenger (1991) to describe situated learning where the learner is in an apprentice-like position. The learner is in a peripheral position because they have not yet acquired all the skills or knowledge of a master but has a legitimate claim to participate in the activities of the group. Further, it is through participation that the learner will become a full fledged member of the community of practice.

The chapter concludes with an exploration of the plural or ‘we-ness’ aspect of spirituality and recovery. I argue that the Step programs explored for this project have an intentional social or community aspect, which is also present in several spiritual traditions.

Service: The outward expression of inner transformation

It was difficult at first to determine whether the participants in the current study were aware of and concerned with, the larger social issues that impact individual lives. From all that has been explored to this point, I would argue that they are concerned with social justice issues and their paid and volunteer work is an example of working for social change at the micro level. I would further argue that most of them see social justice in spiritual terms. In addition, working with people who are still struggling with addiction or other social ills also works as a preventative and curative to self-righteousness. This type of work can serve as a reminder of the challenges an individual faces when trying to move from addiction to recovery. Sometimes the opportunity for service may appear to be serendipitous. For example, in Bico’s case, things just fell into place for training and employment when things looked the least hopeful.

The doctor told me that this would keep recurring and you need to find a new way. You can't do this work any more, your body is too broke-down. It was quite

traumatic for me. I didn't know what to do. I went back to the course I was taking and I told her. She said, "You're really good at what you do in group. Having you in the group is like having another facilitator." I said, "I didn't know that." She said, "Would you like to take this life skills coach training and do what we do?" They actually gave me the course. I tried to get funding. I'd burned a lot of bridges in my life. I couldn't get funding anywhere. They called me and said, "We want you to take this course. We think you'll be good at that kind of work." They gave me the course and said, "When you get rich, you pay us back." That was a third of the journey. I took that course. The guy approached me, from my recovery house where I had sobered up. A year later, he said, "I heard you've graduated from that course. We don't have any life skills training here. We could use that with some guys here. Would you like to come here? I've got a drug and alcohol counselor's course that can be funded by the government. We're going to train three or four people. If you come here and do these life skill groups, I'll put you into this course we've got. You'll become a drug and alcohol counselor." I've been counseling for about a year. I've had a few years in the field [as an] outreach worker [on] Granville Street, down Robson, Seymour, Homer but not right in the Downtown Eastside. I worked for the Recovery Club. I'm pretty wise about the resources that are available. I know a lot of people. I've done a lot of networking. I know a lot of people who have sobered up and gone to work in the field. I've got some good connections to problem solve, help, support. I'm very much a team player. I get a wealth of information from the other counselors who have been working down here as counselors and have a great deal of expertise: on the street, other agencies. Any experience a client comes to me and there's a problem, I'm not sure how to problem solve, I'm stuck, I can go to them. Almost every time somebody's got it at the tip of their tongue: these are the options, talk to this guy, if you need me to help with that. Agency pays for our supervision: a clinical supervisor, office supervisor, one hour every week. We all maintain healthy boundaries and lifestyles, make sure we're not getting off track. Now I get to work with the clients, the family, young kids in school, and [give] drug and alcohol presentations to grade seven. I like that (Bico).

Bico did not explicitly express the transformative nature of the work that he does but I remember the delight in his face as he talked about his work and the organization that employs him. Kunkle, on the other hand, noted a systemic lack of services for a certain segment of society and is aware of the gender bias in service delivery to women in need. He chooses to work on the micro-level.

I became aware of how few resources there were for the street level sex trade worker, just the lack of women's resources in general. There's a lot of emphasis on males, it seems, but not a lot of emphasis on women and particularly the bottom end

of the socio-economic strata: the street level prostitute; drug addict; the HIV infected. So when I was approached in March of 2000 or February 2000, I thought I wanted to set up agency like the one I was currently working for. I think the major contributions are in structure and philosophy of the Society and the counselling principles that we use, which are quite spiritual in their nature, non-judgmental, recognizing that people don't have the power to change and that we're the ones that have to create that power for movement within them (Kunkle).

In discussing the rewards he hopes to obtain for his work, he stated:

Maybe a legacy of helping, of having done something for the women in the Downtown Eastside to improve their lot in life, that would be a nice legacy to have. Then hopefully my daughters would never have to, I don't think my daughters would ever be down here but somebody's daughters won't have to go through what many of the women down here have had to go through (Kunkle).

All of the women participants expressed being motivated by the desire to 'give back' and noted their own experiences of addiction and recovery as assets in understanding, making connections and building a rapport with people, especially, women struggling with substance abuse.

I'm in recovery myself. The addictions counselling was always a consideration since I've been in recovery. I can be to a certain extent, a role model. We always gain even more than we give. If I don't have anything to give away, I believe I have something to give away. I know that by giving it away, I'm going to get rewarded ten-fold. I don't mean physically rewarded but spiritually reward ten-fold. It makes a tremendous difference to my life being able to be of service to somebody else (Olivera).

Well what really motivated me was because I worked on the street. I was a prostitute and I used my past experience as my greatest asset. I guess that would be the key because I can gain trust faster that way. I know some of the girls there. They just can't believe it. Compared to how I was and what I am, the accomplishments I've made today, is a total miracle, completely different (Nikki).

When prompted about the rewards of her work, Nikki replied "I think it's just feeling that you gain, like that you know that you're doing the right thing."

It was my life that took me over a period of 45 years, 46 years almost and alcoholism and the numerous things and coming to my knees one day in a recovery

house really, that's where my whole social justice thing came. So it was really something that just happened through writing the book of life. You move along and my book really became evident in the recovery house and when I was called and once Jesus, once God came into my heart, I let God in, it really became clear that I had to keep giving back. There's a plaque up here that I was given. Somebody with a little over a year clean-time and somebody that worked at the drop-in that we brought into the program, Women Helping Women. And I used to help her and work with her and encourage her. I remember, I never thought that I had given her a lot of encouragement but I was always there and so she gave me this plaque. My life has been touched because we have walked a special walk together because you have given me courage because I care and I love you. We never know when you're, what you're doing, you just wait and that's a pretty special reward from someone you just encouraged like she said. And she has 15 months clean time now and she's doing quite well. So those are rewards, absolutely (Micha).

When I was working I would go to those meetings and I knew from living in the neighbourhood and working in the neighbourhood a lot of confidential information that I received when I was working with people and a lot of people saw me as someone they could trust and being at a breaking point where they had to let a certain amount of pain, and their story, they had to tell somebody what was going on. They had reached that breaking point. Very often that was me because I was the person who was welcoming them, they called it intake. When I'm working with a woman who is on the street, who you just know is a survivor of child sexual abuse, I know how monumental it is for her to undertake that step into recovery. She is self-medicating, drugging, prostituting there is something that is even scarier than that for her, which is incest, cause that's pretty scary stuff. There were times that I wanted to pick up a bottle of pills or some way or something whether it was take a drink or some how get myself out of it, there were times that I felt suicidal too, those feelings. I would have. I was guided through. There were people who were put in my life. When I talk about my own stuff: my hesitation around recovery and some of my own beliefs I had before I came into recovery and in early recovery. When I talk about that, there seems to be a definite transition to where I am now. I am still dealing with issues of self-hate, ageing, and sexuality. I find when I talk about those things, people laugh but they come up to me after the meeting and say, "That's incredible, that's what I thought too." That for me is the connection it's not reading the Bible to somebody. It's when I actually share some of those things. At that point, I would never have told people that was what I thought because I figured I would get kicked out of AA. When I say some of those truths, other people who can't often express them come up to me at the end of the meeting and tell me something about what happened to them: how they were when they were a kid or what kind of drugs they used to like. Absolutely relate at a level of "it's okay for me to say this because you've already said it out loud" (Mildred).

Like Kunkle quoted above, the responses of Barbarita and Goodie reflect their awareness of the social climate facing the Downtown Eastside in general and women with addictions in particular.

Wanting to help in the DTES, feeding people, putting the food on the plates and feeding people when they are hungry – very rewarding. On rare occasions, I'd make a connection. I particularly remember this one: I was working on the make-up (that was the best part, to have some rapport with the women). This young woman, in her early 20's maybe, she was standing very close to me and she was applying the make-up (usually they go off somewhere). It suddenly reminded me of when I was a child and would play with my mother's rouge. I said that to her. She looked me right in the eye and said, "I remember doing that too." Who knows what else, they just seem so hopeless. One of the things I really liked about [the organization] was the emphasis they put on not judging and being respectful to the women. It can be very easy to be judgmental (Goodie).

I was motivated to join the work of the Society because it sounds like the Society is working with people who are often neglected and marginalized by our society as a whole and even by social agencies. It is my heart's desire to work with the 'least, last, lost and nearly dead' because I have been lost and people were there for me. By the grace of God today, there I go. I believe that I have compassion and everyone can use a little love. I also carry a great message of hope. In addition, I have big ears and broad shoulders. I have been trained in A&D Counselling and have had numerous sponsors. I had never thought about gaining benefits from working at the Society. I guess I just love to watch lives change (Barbarita).

In addition to her counseling responsibilities, Lynn works “*helping people to get in touch with their own creativity and I think people will find their niches once you get their creative juices going and they find out what they like. Creativity is such a huge part of my life. I meet people that I work with, so many of them are very creative.*” Lynn is an iconographer and painter. Once a week at a local drop-in for women, she teaches beading and other crafts. She is open to learning crafts and skills that the women can teach her. For example, some of the First Nations women taught her indigenous traditional beading techniques. When asked about her work as a counsellor, she responded—

When I was 19 and quit coke, my brother and I looked at my life experience in that time frame and realized, like wow, you're lucky to be alive and thought that it must be for some purpose. Like, that maybe, my life, I would give back to something or

like have a greater good. I think my biggest contribution is the rapport I have with people. Like the women I work with trust me very easily. Like we build relationship very fast. I think that's the biggest asset. Like for the greater good that happens. I think it's given me things that I never expected it to like, it was very scary for me to face the prospect of talking to professionals or people in authority, like talking to doctors and social workers and nurses and lawyers, like advocating for people and having a voice. It's a really big thing for me. It was so scary at first and now, knowing what's going to happen, I can put my clients at ease and I can be a voice for them. I think that's, so much of my life I didn't have a voice. In recovery, I got a voice back but the job has really given me a voice. A big part of my job is having a voice. I know that sounds kind of crazy but we do so much more than counselling, so much advocating and helping people find resources. Just approaching people with questions, for a lot of people I'm sure that's an easy thing but just being able to come to that point where I can do that is pretty— that's growth for me (Lynn).

Lienee was inspired by Lynn's example. She volunteers with Lynn at the drop-in for women and in turn serves as a role model for others.

Lynn motivated me when I saw her, the way she works with the young girls at the arts and crafts, going down there early meeting the girls on the street. Being able to listen to them and talk to them. I always liked doing things like that. To give back by helping young women who are on the streets and suffering from addictions. I think I have a lot to offer the young girls from my own experience of being a drug addict. A lot of times they'll say, "You don't know what it's like. You never did drugs." I'll tell them my story and they'll go "Wow! Really?" I'll say, "See, there is still hope for you. Look at my age and look at your age." I have a lot to offer the girls that work or do drugs downtown. I understand what they are going through. I am a good listener and I believe I have a lot of love, which they need, to offer them. I can be feeling down and depressed. I'll still, like on Wednesday, I wasn't feeling all that up because I haven't been able to work lately—with no money, no food—but once I get there, and I see those girls, it lifts me up and makes me forget about my own problems. I figure at least I still have a roof over my head. I don't have to go stand out on the corner. I don't have to sleep in an alleyway. God has given me this gift to help these girls. I hope to gain the trust of the girls so they can come to me in their hour of need (Lienee).

Annie's responses introduced the notion of being gifted. She presents the concept of the health of an addict rather than just focusing on the sickness they have—addiction—beginning from a position of health and moving to a healthier position.

When I got to the point where I could work, I knew that I wanted to give back, work with other addicts and alcoholics. One of my prayers, one of my intents and hopes,

is to be able to, I'm not perfect at this, being able to have people feel better after an interaction with me than they did before the interaction, to leave people feeling okay and better.... I think what I'm able to do is provide a lot of encouragement especially to women. The person you see sitting in this chair has not always been that person. I think that really surprises people a lot when they realize I can really relate to who they are. I think it's really important to be able to relate. Even if the details are different, the feelings are the same. When I work with a client nearly always I really see the health in that person I don't see the sickness as much as I see the health. I know that they can get healthier because I did. I love the work that I do. I love working with these clients. It also keeps me clean and sober. I don't see anyone coming in who says, "Gee, it was great using out there." They don't say that. I have a gift. I feel I've been given a gift. I'm really good at what I do. I don't have to look very hard to do it. Not in the sessions I don't have to look hard. I've had to work really hard doing my own work to get to a place where it's not hard. I really feel like I have a gift. It's like breathing to me. If I didn't earn a live, if I was independently wealthy, I would volunteer to do it, in between my trips to Greece. It's being able to see the health in people. I think that's maybe the biggest contribution. Wanting to help them get to their spiritual and emotional place where they can be safe in the world (Annie).

The validation Annie gets from clients is the rewards she says she gets from doing the work she loves.

My clients tell me that they are really appreciative of our work together, which is a neat thing, I love hearing that. It's not so much an ego thing, it's that I'm on the right track. I'm doing, whatever God is, I don't know, I'm doing God's work whatever, that's what I feel like. I've been given the gift to do that. I don't feel guilty at all when I go home and stay by myself and don't answer the phone. I gave at the office (Annie).

Shirley's response to the call to service is the most explicitly permeated with humility. She attributes the inspiration to start Halfway House to the work of the Holy Spirit. During the first year of the operation of Halfway House, Shirley gave selflessly. Financial security was non-existent and at times she had to work seven days a week. I know of Shirley's work because I have been following her organization's progress from its beginning as a member of one of their donor organizations. It is my belief that only faith in a Divinity of some sort can sustain such dedication. Shirley expresses it as follows:

I guess you call it the Holy Spirit. It wasn't my idea at all. To live with women, to be a mentor to women was the farthest thing from my mind. It took a lot of healing and a lot of challenge. I had to face the fear before I guess, I could take to God's plan. And then it all kind of fell into place and there was nobody else but me. So it was sort of like that's how it began, my own life, my life experience and realizing the need was out there. And eventually I fell into line. So what I hope in the next ten years is to have grown spiritually enough to be the presence of unconditional love to these women and to the men when they come to me for advice or just to listen. That's what I hope to attain and in that I know I'll achieve peace and love with detachment. That's unconditional love. That's the kind of love God gives us where it's our choice. He allows us to screw up and come back and to love us through the whole scenario and that's what has to happen for me. I'm learning how to love with detachment and the love that I feel for the women that come in and are using and do the things that addicts do, I've learned not to take it on. It's not my stuff. And if they want to feel their anger and their rage, they need someone sometimes to focus on to do that and I'm that person. And I've learned that what they're saying really isn't about me. And God's helped me to see that. The unconditional love that I was talking about is the love God has shown me. I'm sure God doesn't want to see me screw up and kill myself in some alley with a needle in my arm or worse, end up like a vegetable. God does allow me to do that, to experiment in that way and I have to be able to say, "okay, see you, call me and let me know you're alive." And I know God in my recovery and before my recovery in my addiction, things that I didn't recognize then, as being God— was God, "Hello, I'm here. It's me." And I never did, so I think reminding the girls to give me a call once in a while to let me know that they're okay or they're not okay or whatever is going on in their life, so that there's some sort of contact there and they know they can always come back (Shirley).

In addition to their paid or volunteer work, all of the participants continue to attend 12 or 16-Step meetings. Attendance at these meetings has the dual purpose of teaching and learning. I have often heard people—including those with decades of sobriety— say that they learn something at each meeting. For example, for the first five years of my sobriety, I kept hearing, "It's the first drink that gets you. Don't take the first drink." It sounds simple but I didn't get it. Finally, one evening I heard it for the thousandth time and I finally understood—as alcoholics, we could never stop at just the first drink. It is exactly like that cliché line in the movie, *The Lost Weekend*, "One drink is too many and a hundred is not enough." In the next section, self-help or Step meetings are discussed as communities of practice, and from the above anecdote, 'practice' taken literally.

Recovery as an ongoing teaching and learning process

Communities of practice have been discussed in the literature as sites of legitimate peripheral participation, where individuals learn their skills through participating (Lave and Wenger, 1991; Wenger, McDermott, and Snyder, 2002). Individuals in recovery from addictions who attend self-help groups form communities of practice. In this instance, practice means living a life of sobriety and engaging in activities that promote well-being. Attending the self-help group and performing the activities suggested by the group is a learning process.

Activities, tasks, functions, and understandings do not exist in isolation; they are part of broader systems of relations in which they have meaning. These systems of relations arise out of and are reproduced and developed within social communities, which are in part systems of relations among persons. The person is defined by as well as defines these relations. Learning thus implies becoming a different person with respect to the possibilities enabled by these systems of relations. To ignore this aspect of learning is to overlook the fact that learning involves the construction of identities (Lave and Wenger, 1991, p. 53).

Lave and Wenger look specifically at AA and the story-telling and Step (procedural) aspect of going from newcomer to sober old-timer. However, as my participants' stories show, recovery describes a process of teaching and learning that goes beyond the meeting rooms. Likewise, in some cases the participants engage in mutually reinforcing communities of practice such as worship communities, Step groups, volunteer and professional communities. The pedagogical process and practice is one of reflecting, modeling and mentoring. These are not necessarily structured or formal relationships. Shirley presents a rich description of how the process works for her,

I'm a mentor or I try to be a mentor. My life experience, you see God in his wisdom –I think— allowed me to go through all of this stuff in my past, through all of the friendships that I've had with different women and different men to this point, so

that I could draw on my life experience. To have the compassionate heart when I see a girl come in and she's all twisted out of shape and her family's all messed up and her partner is an abuser, you know, I can understand where she's coming from, what ground she's standing on at that moment and be able to support her through her changes. The real difficult part is to allow me to be me in front of them without pretending I'm perfect or that I've got it all together or that I've got all the answers. That's the difficult part because the ego wants for me to just appear to the women when I've got my shit together. I can't be that way. I've got to be able to let them see that I'm tired or I'm really frustrated or I'm grieving or I'm really happy or I'm content. So they can have something to measure themselves against and to see how to express all of those raw kind of emotions and even the ones that are everyday emotions. A lot of times when a person comes into the program, they're either really, really happy, like way up there, or really, really down. There's no middle ground and life isn't like that, mostly it's middle ground. When we get really, really happy we have to realize that we're going to come back to middle ground but we don't have to go to the great depths that someone in early recovery does, as if I'm not happy I must be really, really mad or angry or sad or something. So that's what I try and show them. I try and guide them in their 12-Step work because I've done several sets of steps by now, just to help them become aware of themselves. And if they become aware of themselves then they will be able to recognize the God within and take direction from the God within. But if you're coming from your head all the time, it's pretty impossible to be intuitive from your head. And God intuitively teaches us and guides us and directs us and challenges us and all of that and if we're not in tune with what our gut's doing, we blow it, regardless, we crash. We crash and burn. Many times the girls will see me reach that point and I'll go in and say a little prayer in my office and I'll come back. Sometimes I'll walk through the house saying, "I love my job. I love my job" and they'll know, right but it's not a matter of "okay it's time to clean house" and yet that's how it was when I first opened it. A lot of things have happened in the last two years to change me so that I fit God's program, sometimes unwillingly. It's pretty wild (Shirley).

The processes illustrated by Shirley above are: reflecting, mentoring and modelling. The reflection that takes place between experience, God, and others with whom we interact are the internal processes. Honesty, gratitude and purpose are motivators and the qualities that are modelled. As Shirley states it is difficult at times to be honest with yourself, which is an obvious prerequisite to being honest with others, including God. In order to go forward, we have to make sense of and be honest about the past. This often precedes gratitude. I remember thinking people were insane when they stated they were 'grateful alcoholics.' It

made absolutely no sense to me. However, I came to realize that this gratitude comes not just from surviving addiction and being in recovery, but also the gratitude that comes from learning that the experiences of our past have value. Their value lies in the fact that our past experiences are useful to us in our new found purpose, which is to help those who still suffer from addiction. Ultimately, mentoring, modeling and storytelling are the key pedagogical tools or practices for teaching recovery.

It is important to note that learner and teacher are not distinct roles or categories. These roles are not mutually exclusive but often occur simultaneously. For example, someone may be noting how I react in a particular situation and learn something from it. In turn, I could be doing the same—listening, observing or noting what someone else is saying or doing and thereby learning a new way to handle a certain situation or discovering a new way to look at something that has been of concern to me. Learning recovery can be seen as phenomenological practice.

Phenomenology suggests that if we can lay aside, as best we can, the prevailing understandings of phenomenon [sic] and revisit our experience of them, possibilities for new understandings emerge for us, or we may witness at least an authentication and enhancement of former meaning. Phenomenology wishes that we reconsider what we believe we understand. It requires that we place our own understanding in abeyance and have a fresh look at things (Roberts, 2000, p. 147).

Graveline's (2000, pp. 364-365) poem, which describes the Talking Circle method that she employed as a research methodology, may be the best way to describe the phenomenological practice that takes place in 12-Step groups.

Talking Circle as Methodology Enacted.
Traditionally a Sacred ceremony
a Gift from the Ancestors.
A physical reality
a Metaphysical experience.
An egalitarian structure
each voice acknowledged

heard in turn.
To choose words with care and thoughtfulness
is to speak in a Sacred manner.
We can each have our own Voice
speak our own Truth.
Tell our own Story.
In Circle all participants are encouraged to Be
Self-reflective
Culturally located.
To Listen Respectfully to Others
provides another lens to view our own Reality.
“Circle is a place of healing ” says Elder Sarah (in Graveline, 1998, p.148).
“Through the sharing you can find strength and you can see a purpose for what
you’ve gone through, that it’s making a difference in somebody’s life if you do
share
it ” realizes Phil (in Graveline, 1998, p. 178).
Circle Builds community, “gives everyone a sense of worthiness and being
valued and listened to, and respected, ” acknowledges Char (in Graveline, 1998, p.
176)

The Twelfth Step, “Having had a spiritual awakening as the result of these steps,
we tried to carry this message to alcoholics and to practice these principles in all our
affairs” (A. A. Grapevine Inc., 1995) and the Sixteenth Step, “We grow in awareness that
we are sacred beings, interrelated with all living things, and we contribute to restoring
peace and balance on the planet” (Kasl, 2003) make it clear that we are not to isolate
ourselves in the cocoon of the respective groups but to become alive and active outside the
groups. For the participants in this study, however, reaching out began in Step groups.

The We-ness Aspect of Spirituality and Recovery

There is an overt expression of plurality in the steps of the programs discussed in this
study. Each of the 16-Steps begins with ‘We.’ The 12-Steps refer to a plural subject either
explicitly using ‘we’ or implicitly using ‘our’ or ‘ourselves.’ I believe that the authors of
these texts were conscious of the need for a community or a fellowship aspect, where
individuals serve and nurture each other in recovery and spirituality. In this section, I use

examples from the Christian, Buddhist and Aboriginal traditions to examine the ways in which spirituality is expressed through active concern for others. 'Active' can be as simple as taking the time to listen to someone or taking time to utter a prayer for someone because concern precedes care, which, in turn, requires action.

Willpower is not enough. Pursuing a sober lifestyle usually entails disassociating with friends and acquaintances who were part of one's life in addiction. This creates feelings of emptiness, loss and loneliness. Through attendance and participation in step, self-help, and church groups, the emptiness begins to subside. Participation in step groups provides a place where one can discuss openly the hills and valleys of their life. When there is a problem one does not want to share with the whole group, there is always the sponsor or some other person one has come to trust with whom to discuss the problem. With the group and sponsors as social supports, there is less likelihood of having the stresses of life build up to such a point that one returns to addiction.

Conversely, as people become more stable in their own recovery, they seem to grow in care and concern for others, especially those still in the clutches of addiction. As the stories of the participants suggest, the motivation behind their work is love. Love also requires surrender, that is, the willingness to be vulnerable.

Close critical scrutiny reveals that often no difference is discerned between the defining characteristics of 'care' and 'love'. This is because both terms are motivated by duty as an objective quality that seeks to discern and meet the needs of the other. Such thinking reflects that love is not reliant on an emotional resonance between individuals but is shown through a seeking out of the other to sustain, maintain and elevate his or her welfare (Kendrick and Robinson, 2002, p. 292) .

I want to emphasize that I am not speaking of a 'pink and fluffy', sentimental kind of love. Rather, I mean what in the Christian context is called, *agape*, a love that is concerned with the well-being of others, which is independent of liking the individual. For example, I may

not particularly like someone but I would do everything in my power, including invite them into my home, rather than see them sleep on the street. It is the kind of love that cares for people more than things to the extent that fear of being robbed is less important than giving someone a place to stay. Outka (1996) describes *agape* as follows:

One regards the other's good for the other's own sake, or, more emphatically, one wants the best for the other and is ready to protect and promote what is best, independently of knowing whether a response in kind is likely to occur. Moreover, this wanting never ends, whether or not a response occurs (p. 36).

A more detailed definition of *agape* states:

“*Agape*” is the New Testament Greek word for the steadfast love God has for human beings, as well as the neighbor-love humans have for one another.... *Agape* is characterized by three interpersonal features: (1) unconditional commitment to the good of others, (2) equal regard for the well-being of others, and (3) passionate service open to self-sacrifice for the sake of others (Jackson 1999, pp. 11-15 in Gregory, 2002, p. 16).

Andolsen (1981), a feminist theologian, argues that women must be mindful that self-love and self-development are not to be put aside by existing solely for others. The Biblical injunction, “You shall love your neighbour as yourself⁹” is often internalized, especially by women, as ‘you shall love your neighbor *instead of or more than* yourself.’ Andolsen’s point is that women must avoid ‘demeaning passivity.’

Many women live for others to a damaging degree. Largely focused upon others, such women are unable to establish a satisfying self-definition.... Some women are so concerned for others that they lose the ability to be centered selves (p. 74).

The important issue is ‘right relationship’ in dealings with God, self, others and creation. In cultures where lives are not compartmentalized into the spiritual, physical, emotional and intellectual, the importance of ‘right relationship’ is inherent. For example, the

⁹ NRSV Bible Catholic Edition, Matthew 22:39 (National Council of the Churches of Christ in the U.S.A., 1989, 1993)

Buddhist concept and practice of Metta Bhavana or Loving-Kindness is an example of this concept.

The practice [of Loving-Kindness] always begins with developing a loving acceptance of yourself. If resistance is experienced then it indicates that feelings of unworthiness are present. No matter, this means there is work to be done, as the practice itself is designed to overcome any feelings of self-doubt or negativity. Then you are ready to systematically develop loving-kindness towards others (Pannyavaro, 2004, n.p.).

The Loving-Kindness concept is put into practice by first praying for oneself, then for someone who is dear such as a family member or good friend. So far, this is not particularly novel. The next step is to pray for someone who is known but for whom one feels no particular or special feelings, such as a grocery clerk. The final part of the Loving-Kindness meditation is to pray for someone with whom one has problems or difficulty (Pannyavaro, 2004). For each person, including oneself, the Loving Kindness prayer has the following or very similar form:

May I/he/she be free from enmity/danger
May I/he/she be free from mental suffering
May I/he/she be free from physical suffering
May I/he/she take care of himself/herself happily (Sujiva, 2004, np).

Graveline (1998) uses the term 'Self-In-Relation' to describe the traditional Aboriginal way of being. She writes of her pedagogical Talking Circles as microcosms of Self-In-Relation that observe the four laws of living in community: respect, honesty, caring and sharing (p. 162). Graveline states,

Coming together in a Circle, caring for each other, sharing with each other, helping each other gain a better understanding of our cultural locatedness, our Self-In-Relation is considered by Traditionalists to be necessary for the transformation of today's society. We must work continuously to re-establish the individual in connection to the community and In-Relation to Mother Earth. Community is a sacred concept with high value in Aboriginal culture (p. 164).

When our acts are based on *agape*, Loving-Kindness or Self-In-Relation, whether consciously or not, they have the additional effect of drawing our minds away from ourselves. Service is a curative to self-pity and self-absorption.

The meeting I attend, I believe, is representative of other AA meetings, in the way we really listen to and hear each other. I also believe it is because of this attention given to each other that regular members of the group find that race, class, affectional orientation and all the other factors that can be divisive in the wider society, lack a divisive effect on us. Our history of addiction and work towards sustained recovery are the great levelers. There is genuine acceptance and concern by each member for each member. I suggest that being accepted is the first step in becoming accepting.

In this chapter, I have argued that recovery is a learning process and that service work—whether paid or voluntary— is an outward manifestation of inner change. Service is also the medium through which recovery is taught by modeling, mentoring, story telling. I have also shown that an integral part of several spiritual traditions is an increasing love for oneself and others. It is my contention that the recovery process and participation in worship and/or self-help groups transform communities of practice into communities of care, where individuals develop care and concern for others that is manifested in their service to others. In the concluding chapter, which follows, I revisit the research questions and discuss in what ways this study has addressed them.

CHAPTER SEVEN: CONCLUSIONS

In the first two chapters of this study, I presented the context of the research and the researcher. The description of how the research was conducted and the introduction of the participants in the study was presented in Chapter Three. The analysis of the data consisted of examining the interview data for patterns within interviews. Then the interviews were compared with each other in a search for similarities and differences between the interviews. Next the themes that emerged from the data were compared with the literature. The data analysis was presented and discussed in Chapters Four through Six.

In this final chapter, I summarize the research findings in light of the questions that prompted the research. The primary research question will be discussed last. First the participants' perspective on their experiences of addiction and recovery and how these beliefs compare with each other and the literature are addressed. As stated previously, most previous studies focus on the transitions from substance abuse to the cessation of substance use or changing behavior that is unhealthy to healthy behaviors. One exception is Anderson (1994), who explores the role of both the micro and the macro phenomena in transforming identities that accompany the movement into drug addiction. Anderson's study confirms the fact that there are two periods of transition. The first is into the problem behaviour and the second transition is when the behaviour is stopped. The conditions that led to addiction to controlled substances are significant for two reasons. The first is that knowledge of the factors and conditions that led to addiction provide insight as to what situations may trigger a relapse, especially if those issues are not resolved or at least addressed. The second is, just as the participants' stories tell us what it felt like to grow up

under adverse conditions, they also suggest that there should be mechanisms for intervention in place to reduce the risk potential of ACEs.

The participants in this study believe contributing factors to their addiction are: attempts to relieve emotional pain and physical pain; attempts to cope with stress and loss; and genetic or biochemical predisposition. When the stories of the participants' childhoods are examined, adverse childhood experiences (ACEs) emerge as a factor in the lives of all but one of the participants. This finding does not negate but elaborates on the contributing factors named by the participants.

There is some agreement between the literature and the participants' stories with regard to the decision to stop using drugs and/or alcohol. In the literature, hitting bottom, the desire to be a better mother and the possibility of a better future are some of the reasons given as contributing to the cessation of drug or alcohol use. The stories of the participants tend to agree with those findings. However, what is significant in the recovery experiences related by the participants is the spiral nature of the recovery process, which is mirrored by a corresponding deepening of their spirituality. There are four parts to each cycle, namely, surrender, self-assessment, willingness to change and non-complacency. There are lessons to be learned or tasks to be accomplished in each stage of the process. In the surrender stage the individual admits the need to change and that they need help to effect that change. To obtain the help that is needed, the individual learns to trust others. Acknowledging one's strengths and weaknesses and learning to take responsibility for their actions are the lessons of the self-assessment stage. The pivotal part of the recovery process is the willingness to change. Making amends for past wrongs done to people during their addiction is a difficult part of this stage. However, sometimes the hardest part of the work

done during this stage is learning to love and care for the self. In the final stage, non-complacency, individuals learn gratitude and show it through service and teaching others who are currently struggling with addiction.

This study has provided a new way to view ourselves as spiritual beings, which is extracted from one participant's response on spirituality that was stated above and is paraphrased here:

The spirit within us is the breath of God. It's ... the holy seed and through spiritual pursuits we open that up.... It's protected by God. It's the good part of everybody. Even in Robert Pickton¹⁰, I'm sure if you could crack through layers and layers and layers of mental illness and trauma and whatever has happened to him in his life to create this monster that we see on TV, inside is this kernel of truth, the God seed, which is waiting to be born (Kunkle).

The spiral of the spiritual path can be seen as the gradual opening of this seed and this leads into the exploration of the next research questions, namely, the part played by spirituality in the participants' experiences of recovery. The companion question dealt with if and what changes have occurred in their lives or their outlook on life and to what do they attribute the change(s). All of the participants relate being changed. "Everything has changed", was the most common response to the question, "how has your life or your outlook on life changed since you've been in recovery?" The participants attribute the changes in their lives and outlook on life to the acceptance of and surrender to a Higher Power. Paradoxically, as a result of surrender they report having greater freedom. They report that they no longer feel that they have to control everything but have learned that their energies should be spent on what they can change, themselves. In addition, the acceptance of a Divinity brings with it the consolation of no longer feeling alone or abandoned. This is especially significant given that most of the participants experienced adversity and trauma

¹⁰ Robert Pickton has been charged with 22 counts of murder in the case of over 50 missing women in Vancouver at the time of writing.

as small children. Further, the paid and volunteer work performed by the participants represents the concrete manifestation of their spiritual philosophies. Just as recovery grows, deepens and becomes more easily maintained, the spirituality of the participants has taken the form of constant conversion, which can be described as the ongoing deepening of one's relationship with of the Divine. However, for the participants in this study, it becomes impossible to separate recovery and spirituality as to which is influencing the other. For them, both recovery and spirituality are deepening.

The last of the subsidiary questions behind the research was to discover some of the factors that motivated the participants to volunteer and/or work helping others. The data from the participants in this study made up for all the work that goes into a qualitative inquiry. What emerged from their responses was a picture of people who operated from a center of care that is rooted in their spirituality. Spirituality is an integral part of their recovery that has outward manifestations of their inner changes. By outward manifestation of inner change, I mean that as one grows spiritually there is a pull or call to work with and help others. In essence, there is a call to service. The care and love for others, such as that which the participants have for the people with whom they work, is a part of at least three spiritual traditions: Christianity (*agape*), Buddhism (Loving-Kindness) and Native Spirituality (Self-In-Relation).

The principle research question was to explore what this study could reveal about the role of spirituality in the learning process of recovery from addictions. This question includes an embedded question about the notion of recovery as a learning process. The data show that, for the participants of this study, recovery is indeed a learning process where the classroom is—at least initially—the 12-Step program of AA. The individuals in

this study learned how to live sober lives by attending and participating in AA groups. Two of the female participants added attendance at 16-Step program groups, which they found more suitable for them than AA groups. In 12-Step and 16-Step programs, personal narratives or stories serve as the teaching medium or method. As newcomers become more acquainted with sharing their stories, they in turn become ‘teachers’ or mentors. However, the learning does not end when the newcomer becomes an old-timer. Rather, the individual then becomes instructor and student. The newcomers also are pedagogically significant to the old-timer because they remind the veteran group members of their early days in sobriety. Recovery, like spirituality, is an ongoing learning process.

With regard to the role of spirituality, the participants’ responses illustrate that for them, recovery and spirituality are interwoven. The paths and forms of spirituality are varied and for some, changing. For example, former Roman Catholics do not feel a prohibition on exploring Buddhism or First Nations spirituality. For some there is an understanding of the Higher Power that verges on mysticism as illustrated by Lynn when she described writing icons. The participants have shown that spirituality can move beyond the AA model of the 12-Steps to other self-help models. Some individuals find that they must move beyond AA or other step groups for spiritual nourishment, while remaining active members of their respective groups in order to be there for others as well as their own recovery. The main conclusion on the role of spirituality is that while it is intimately linked with the recovery process, it is not limited to any one self-help group and/or worship community. Likewise, it is not a matter of whether or not God exists. What is significant is that those of us in recovery *believe* that there is a God, Divine Energy, or Higher Power, and have been able to change our lives because of that belief.

Admittedly, the sample size of the study was small. Impaired recollection is always a concern in reading history— including personal history— backwards. Yet, as an exploratory study, this project raises important questions. For example, there are individuals who are in recovery through their own efforts or with the help of medical/mental health professionals. Do these individuals manage to maintain long-term sobriety? If so, how?

This study focused on people who do have a sense of their spirituality and accept the spiritual side of their respective Step groups, but what about those in recovery who do not consider themselves spiritual and/or object to self help programs that have a spiritual component. The findings of this study show that some of the participants experienced spirituality as community and relationships or connectedness with others, as an energy or force, as life and as freedom. This finding suggests a significant question. Could the process of nurturing a sense of community, connectedness and relationships with others also foster what the participants and I may call, spiritual? To respond to this question, I would like to explore in future the applicability of the cycle of recovery processes described in this study by advertising for participants willing to participate on a study of recovery from addiction, with no mention of spirituality in the recruitment literature.

The work on this study has also resulted in my reflecting on the significance of compassion and concern for teaching and helping practitioners. While working on the latter chapters of this work, I realized that I could be an agent of change. I know I can't make large or global changes but I could make a small contribution to social change. So, I designed a course which I thought would be a small step towards making that contribution. In February 2005, I begin teaching a course in compassionate citizenship at Langara

College, a community college in Vancouver, British Columbia, Canada. The course is aimed at people in the non-profit sector who, although they use their limited resources efficiently and wisely, are often pressed by time and urgency to suppress empathy. In this course, social justice issues are presented using images and literature to call attention to the consequences of public policy and private apathy. I designed the course with the aim of rekindling the compassion, which originally motivated the participants to work in the non-profit sector. This course was adapted from one that I designed for Catholic school teachers as part of their teacher education program, which uses Roman Catholic social justice literature. I make the connection between teaching about social justice issues and addiction based on a premise referred to in the beginning of this work. The factors that contribute to addiction are social or societal as well as biographical. More importantly, the adaptation of a course for an audience at St. Mark's College to one that is fitting for an audience at Langara College demonstrates teaching about real issues from a religious perspective does not preclude the teaching of those same issues from a secular perspective.

From what I have learned in this study, it is clear that the results of the processes of recovery are more important than the name given to the process. Yet the efficacy of the process of self-help groups in nurturing spirituality and recovery does not address the structural factors that work against individuals accessing these resources.

As discussed earlier, the effects of institutionalized racism, the microaggressions experienced repeatedly through racism and discrimination can result in cumulative trauma that prevents the envisioning of a better life. Internalized racism and the feelings of inferiority that it engenders can be the result. The narratives of childhood in this study did not touch on racism but rather on ACEs. Obtaining narratives from participants with

minority group membership could result in the experience of racism in early childhood being added to the list of ACEs. More specifically, another area for future research would be to examine the role of racism, classism and other categories of marginalization in contributing to addiction. A key element in the design of such a study would be to recruit participants in all stages of recovery, including those who try repeatedly yet have difficulty remaining clean and sober. The purpose of these changes in study design would be to explore whether or the extent to which marginalization contributes to addiction and if the inability to overcome the negative effects of marginalization and the inability to remain clean and sober are contemporaneous with the absence of a sense of oneself as spiritual.

Along with broadening the racial/ethnic diversity of the participants, there would also be a broadening of the concept of intersectionality to include intermarginal research. I have argued that the experiences of addiction and recovery serve as a point of mutual understanding. A project that is intermarginal in nature could discover and describe other points or intersections between participants and between participants and the researcher in addition to identifying the disjunctions.

The personal implication of this study for my own future research is that there needs to be diversity in at least three areas. The first is that the participant pool should include those with religious or spiritual beliefs and practices and those without. The second is that there needs to be racial and ethnic diversity among the participants. The last is that the participants reflect the various levels or stages of recovery and include those who have difficulty maintaining their recovery.

Doing this study has had an impact on my professional practice as a local community researcher because in addition to the expansion on this current project as

suggested above, my research interests have expanded to include resilience, creativity, and spirituality within and among disadvantaged groups.

APPENDIX A – INVITATION TO PARTICIPATE

THE UNIVERSITY OF BRITISH COLUMBIA



Department of Educational Studies

Mailing address:
2125 Main Mall
Vancouver B.C., V6T 1Z4

Tel: 604-822-5374
Fax: 604-822-4244

V O L U N T E E R S W A N T E D T O P A R T I C I P A T E IN A STUDY OF SPIRITUALITY AND RECOVERY FROM ADDICTIONS

Project Title: Transformations: Learning and Teaching Recovery

Principal Investigator: Dr. Allison Tom, Ph.D., Associate Professor, UBC, Department of Educational Studies, (604) 822-5361

Co-Investigator: Victoria Marie, OSF, research project in partial fulfillment of the qualifications for Doctor of Philosophy degree from UBC, Faculty of Graduate Studies, Department of Educational Studies, (604) 255-1555

Purpose: The purpose of this research is to investigate the recovery from addictions experiences of the study participants as a learning and possibly spiritual process. The study will explore the conditions the participants believe led to their addiction and the processes that led to the decision to give up drugs. Spirituality has been largely unexplored as a factor in the recovery from addictions. Your participation will help me to explore the possibility of a relationship between spirituality and recovery.

Study Procedures: Victoria Marie, O.S.F., will assume the dual roles of researcher and participant by examining her own experience of recovery. Your participation would include giving your consent to be interviewed twice and meet with me a third time to make sure the information collected in the interviews is representative of what you said. The third meeting will also give you the opportunity to ask any questions that have arisen and to provide me with feedback on the transcription of your interviews. In other words, I am asking to meet with you twice for interviews and a third time for your feedback.

The total time commitment required for interviews and feedback is not to exceed fifteen (15) hours over a one year period.

If you have 2 years clean and sober and agree to participate in this research project, please contact Victoria Marie at 604 255-1555 or 604 716-4008 (cell). If you have any questions, please contact: Dr. Allison Tom, Associate Professor, UBC, Department of Educational Studies, (604) 822-5361.

Confidentiality: Any information resulting from this research study will be kept strictly confidential. All documents will be identified only by pseudonym and code number and kept in a locked private office. Participants will not be identified by name in any reports of the completed study. All data records on computer hard disk will be kept in password protected computer files.

APPENDIX B: CONSENT FORM

THE UNIVERSITY OF BRITISH COLUMBIA



Department of Educational Studies

Mailing address:
2125 Main Mall
Vancouver B.C., V6T 1Z4

Tel: 604-822-5374

Fax: 604-822-4244

CONSENT FORM

Project Title: Transformations: Learning and Teaching Recovery

Principal Investigator: Dr. Allison Tom, Associate Professor, UBC, Department of Educational Studies, (604) 822-5361

Co-Investigator: Victoria Marie, OSF, research project in partial fulfillment of the qualifications for Doctor of Philosophy degree from UBC, Faculty of Graduate Studies, Department of Educational Studies, (604) 255-1555

Purpose: Spirituality has been largely unexplored as a factor in the recovery from addictions. The purpose of my research is to investigate the recovery from addictions experiences of the study participants as a transformational learning process. Individuals who volunteer or work in helping positions are the focus of this exploration of spirituality and recovery. For this study, I would like to talk to you about the conditions that you believe led to your addiction and the processes that led to the decision to give up drugs.

Study Procedures: Victoria Marie, O.S.F., will assume the dual roles of researcher and participant. As researcher, I would like to interview you about your experiences of addiction and recovery. In a second interview, I will ask for clarification and your feedback on your first interview. Near the end of the project, I would like to meet for a final time to discuss the two previous interviews. The total time commitment required for interviews and feedback is not to exceed fifteen (15) hours over a one (1) year period.

As a participant, self-study requires that I record, examine, and analyze my own experiences with addiction and recovery. In addition, I will explore the significance of spirituality in, not only my recovery, but in choices of lifestyle, paid and volunteer work..

Confidentiality: Any information resulting from this research study will be kept strictly confidential. All documents will be identified only by pseudonym and code number and kept in a locked private office. I will not identify you by name in any reports of the completed study. All data records on computer hard disk will be kept in password-protected files on my personal computer.

Monetary Compensation:

Participation in this study is strictly voluntary. There will be no monetary compensation in exchange for participation in this project.

Consent:

I understand that my participation in this study is entirely voluntary and that I may refuse to participate or withdraw from the study *at any time*.

If I have any questions or desire further information with respect to this study, I may contact Victoria Marie, O.S.F. at (604) 255-1555 or by fax (603) 692-3835 or Allison Tom, Ph.D., or one of her associates at (604) 822-5361 or by fax (604) 822-4244.

If I have any concerns about my treatment or rights as a research participant, I may contact the Director of Research Services at the University of British Columbia, at (604) 822-8598

I have received a copy of this consent form for my own records.

I consent to participate in this study.

Subject Signature

Date:

Pseudonym (code name) I wish to use

APPENDIX C

Interview Questions

1. What motivated you to join the work of _____?
PROBES:
 - a. Were you ever addicted to drugs or alcohol?
 - b. Can you tell me how you became involved with your drug of choice?
 - c. What do you see as the cause of your addiction?
 - d. How long did you use.
2. Can you tell me about your decision to stop using?
PROBES:
 - a. What prompted the decision?
 - b. How long have you been in recovery?
 - c. How has your life or your outlook on life changed since you've been in recovery?
3. Can you tell me about your childhood? You can tell me as much or as little as you wish.
4. Are you married?
PROBES:
 - a. How many children do you have?
 - b. Do they live with you?
5. What do you see as your contribution to the work of the _____?
6. What benefits do you hope to gain by your work with the _____?
7. "In your own words describe how admitting you are powerless empower you?" or "How is believing in a higher power liberating or empowering for you?"
8. Do you go to church?
PROBES:
 - a. Do you have a personal spiritual practice?
 - b. Tell me, in your own words, what does spirituality mean to you?

APPENDIX D- FOLLOW-UP LETTER

THE UNIVERSITY OF BRITISH COLUMBIA



Department of Educational Studies

Mailing address:

2125 Main Mall

Vancouver B.C., V6T 1Z4

Tel: 604-822-5374

Fax: 604-822-4244

September 17, 2003

First_Name Last_Name
Organization
Address
City, Province Postal_Code

Dear First_Name,

Thank you for participating in my research project, "*Transformations: Learning and Teaching Recovery*". I have completed the transcription of all the interviews and a transcript of your interview is attached along with a copy of the research questions. I will not be conducting a second interview but if there is anything that you would like to add, clarify or remove, please feel free to contact by email at vmarie@telus.net or by post to my home address:

Victoria Marie, O.S.F.

Street

City, BC A#A #A#

If you would like a copy of the dissertation when it is completed, please let me know. I look forward to hearing from you. Again, thank you so much for your participation.

Sincerely,

Victoria Marie, O.S.F.

CONFIDENTIAL

APPENDIX E:

Number of ACE(s) Experienced Per Participant

ACEs per Participant

Participant	ACEs
Annie	2
Goodie	4
Lynn	6
Micha	3
Mildred	3
Nikki	5
Olivera	5
Shirley	4
Vikki	6
Bico	2
Kunkle	3

APPENDIX F: THE RECOVERY MEDICINE WHEEL

The 16 steps and their position on the recovery medicine wheel are as follows:

North, the physical realm

1. Beginning today I will take good physical care of myself
2. Beginning today I will regain balance in my life by developing an understanding of the important connection between the physical, psychological, spiritual and emotional parts of my existence
3. Beginning today I will stop inflicting pain (either physical or emotional) on others or myself
4. Beginning today I will come to an understanding that change is a process (I can't expect miracles overnight)

East, the realm of knowledge and enlightenment

5. Beginning today I will reawaken to all creation and all of the beauty that exists in the world around me
6. Beginning today I will release myself from a narrow view of life and begin to grow, learn and gain new knowledge
7. Beginning today I will remember that I have a sacred right to live my life as I wish and the need to bring harmony and balance in my existence by respecting the life rights of others
8. Beginning today I will work on understanding the changes I must make in order to achieve personal harmony, balance and freedom

South, the spiritual realm

9. Beginning today I will come to an understanding of my special relation to Mother Earth (release my pain to Mother Earth)
10. Beginning today I will come to an understanding of my special relation to Father Sky
11. Beginning today I will seek a greater understanding of my sacred connection to all the Universe
12. Beginning today I will reconnect with and nurture my own spirit

West, the realm of introspective thought

13. Beginning today I will speak honestly with myself
14. Beginning today I will look at my problems and my accomplishments with a willingness to commit myself to positive growth and change
15. Beginning today I will examine the ways in which I have tried to manipulate, control or manage the lives of others and make a commitment to stop this behaviour
16. Beginning today I will acknowledge that change in my life must begin with me.

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