FRIENDS OF BILL W.: THE STORIES OF HOW EIGHT MEN FOUND “A NEW PAIR OF GLASSES” THROUGH TRANSFORMATIONAL LEARNING

A Dissertation in
Adult Education
by
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ABSTRACT

In this qualitative study the primary researcher utilized research methods of heuristic phenomenology in order to better understand the experience of recovery for a group of male participants. The purpose of this study was to aid the primary researcher in better understanding his own experience of recovery from alcoholism, as well as to add to the current research available on the process of personal and social transformation through the process of participation in mutual-aid programs. For this research the primary investigator utilized a theoretical orientation of transformative learning theory; this was employed based on preliminary research indicating the process of meaning making and personal development based on participation in the program of Alcoholics Anonymous.

Specifically, this research selected to study individuals in human service occupations, given that this was the researcher’s occupational paradigm. A secondary rationale for selecting this occupational group was based on preliminary research indicating a disproportionate ratio of members within the program of Alcoholics Anonymous coming from, or moving into the human and social services. Lastly, this investigator identified philosophical ideologies of the ‘wounded healer’ phenomena, as discussed by Henri Nouwen, as representing a particular experience in which ‘helpers’ can have a lived experience of not recognizing their own need to help themselves.

In this study eight men (including the primary researcher), coming from the states of Pennsylvania, Maryland, and Delaware, were recruited through known contacts and snowballing research methods. Men participating in this study met entrance criteria including: having a minimum of 3 years of continuous sobriety, finding sobriety through the program of Alcoholics Anonymous.
Anonymous, having and working with a sponsor, and being engaged in a human service occupation prior to finding sobriety. The primary researcher conducted semi-structured face-to-face interviews with the participants at a variety of different locations. Study participants agreed to a minimum of one physical meeting; an additional follow-up meeting was set-up, as needed, for review and clarification.

The findings of this study were such that a variety of adult learning mediums were employed in recovery from alcoholism. The participants of this study discussed how the various elements of the A.A. program (e.g., working the 12-Steps, developing a relationship with a sponsor and higher power, telling and revising ones story, sponsoring other men, and engaging in spirituality-based literature) fostered a new identity in recovery through a critical reflection of assumptions. Through the process of revising ones point of view and habit of mind numerous meaning making experiences were elicited: connecting with the personal stories of A.A. group members, coming to acceptance through developing a personal relationship with the A.A. literature, developing a new identity in recovery through a relationship with a home group, and experiencing a sense of connectedness through developing a personal relationship with ones higher power. Participants identified how their experiences in the program fostered change in their belief systems, values, assumptions, and motivations.
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I began a journey roughly nine years ago on a quest to earn a doctoral degree to further my opportunities in clinical practice, research, and teaching. Through the course of this journey I discovered an inner passion for the field of education and research, but more so, I found the spirit that lies in the essence of one’s life story. Through the pursuit of this degree my life story has changed. In fact, this dissertation manifested through my own addiction, and recovery, within the duration of my doctoral studies. To reflect back to the person I was when I started this process in contrast to the man I have come to know myself as today I am left with nothing less than mere awe. For the past nine years I have been a boat at sea, first without a charter, and today with an internally manifested compass. In the course of this voyage many essential people have come in and out of my life… these people symbolize lighthouses who have not only guided my own recovery, but also my movement to solitude, serenity, and hope.

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CHAPTER 1

INTRODUCTION

Human services primarily include, but are not limited to nurses and related care providers, community service workers, educators, adult educators, youth workers, community developers, mental health workers, family life planners, ministers/clergy, human rights workers, and psychologists (Dimock, 1984). As a formal occupational group, human service providers began to proliferate with the creation of college-based training programs in the 1930’s. A study of human service workers is significant to the field of Adult Education. Human service workers experience adult education as both facilitators/instructors, and as learners. For example, human service providers are learners as they attend training conferences, or as they return to the classroom for a more advanced degree; human service providers are facilitators as they provide training programs to their occupational cohorts, or as they disseminate public health information to the populations they provide services to. Human service providers function as facilitators and learners in both formal and informal adult learning environments. To this end, human service work is a form of adult education, from both a career preparation and a practical standpoint. Lastly, it is also important to mention that human service providers are learners in the non-traditional sense. They learn from their own life experiences, and from their interactions with colleagues and those they provide services to, which, in turn, affect how they make meaning, and what they disseminate to others.
It is common for individuals to be drawn to the human service occupations based on a desire to help others, history of personal trauma or close relational experience to a person who experienced severe trauma, and an identity structure of knowing based on relationships with others (Dollard, 2003). For example, according to research on human service professionals (HSP’s), some common characteristics of persons drawn to helping occupations include selflessness, a willingness to work long hours, and doing whatever it takes to help a client/patient/customer/student. Paradoxically, the characteristics that makes one a proficient helper also places the helper at a higher risk for burnout, secondary trauma, or vicarious traumatization (Grafanaki, 2005; Lambie, 2006; Shapiro, 2007).

In an effort to gain a better understanding of recovery for individuals in human service occupations, it is important to have a grasp of the history of this vocational group. Human service providers are an incredibly diverse group. This grouping is composed of men and women from as heterogeneous cultural backgrounds as the communities within which they work. They have a wide array of interests and goals, orientations, and abilities.

First, it is important to mention that learning within the formal institution setting and learning on the job are not mutually exclusive. For most HSP’s, the formal training they receive prior to job acquisition will be the primary part of their formal learning for their discipline. Once on the job HSP’s are expected to function autonomously, with instruction and oversight coming from supervisors, organizational trainings, and out of office workshops being available as needed, or on a minimal basis. “Each employee is fully responsible for high quality and satisfactory service delivery” (Dollard et al, 2003, p. 84). Essentially, what HSP’s learn on the job is how to provide services effectively (maintaining their own well-being, while being
beneficent for their client/patient/student), or they become a victim of their emotional work, vicariously being traumatized by the stresses that they encounter by the persons they provide services to (Mills, 1986; Akerboom & Maes, 2006; Frese & Zapf, 1994; Jex & Bliese, 1999).

HSP’s, in small part, learn instrumental/technical job skills; primary job learning entails an assimilation and acculturation to the emotional work culture. HSP’s generally have to function under what has come to be known as the uno acto principle. What this means is that they often only have one opportunity to provide a service. For example, when surgery is unnecessarily conducted, it cannot be reversed, social workers can fail to remove an at risk child, possibly leading to disastrous consequences, police officers can accidentally shoot the wrong person, and mental health providers implement specific psychological therapies that can fail to be effective, leading to progressively advancing ill mental health. Human services:

Which are sometimes called direct person-related jobs, should be distinguished from other kinds of services, which are called indirect person-related jobs. In direct person-related jobs, the primary task is to modify the clients physically or psychologically, as in the case of counselors, nurses, social workers, and teachers (Hasenfeldt, 1992, p. 84).

How one learns on the job includes a summative combination of individual-worker qualities (knowledge, skills, motivation), organizational characteristics (organizational background, work conditions), and individual-recipient attributes (expectations, idiosyncrasies, behaviors). In addition, human service providers have become known to provide what is referred to in the literature as ‘emotional work.’ Emotional work is the activity that is comprised from the interaction between service provider and service recipient.

Persons in human service occupations are being viewed as a unique population for investigation due to the identities that they hold, their inherent capacity to do harm, characteristics of their positions that may include high turnover and burnout, lower than average
pay given their years of education, fear of consequence and retribution should their substance use be identified by their professional ethics administrations, and the individual idiosyncrasies that leads one to choose a career within the helping occupations (Bacharach, Bamberger, & Doveh, 2008; Dollard et al, 2003; Dunn, 2005; Lambie, 2006; Ryan, 2007; Sanchez, 2008; Wilkes, 2008;).

Essentially, what places HSP’s at much higher risks for stress, maladaptive coping strategies, unhealthy behaviors, and burnout is that they are doing emotional work at a much greater frequency then persons in other occupations. HSP’s perform these duties on the job, and then leave and continue their emotional work within their private lives. A detailed narrative of this experience in discussed in Arlie Hochschild’s (2001) sociological inquiry titled *The Time Bind*. This practice is especially documented among clergy; clergy rank 5th as far as average number of hours worked per week (53.4 hours). Unlike many individuals in other occupations clergy are not able to leave their work at the office; persons of the cloth provide a visible role in the community, in their personal time, under their work roles (Dollard et al, 2003).

**Substance Abuse Among HSP’s**

In an effort to understand more about my own personal experience of burnout, progressive development of addiction, and recovery from alcoholism, I have been drawn to the study of substance abuse among persons in human service occupations. Various degrees of substance dependence have been reported across the different human service occupations. Substance abuse disorders affect approximately 15 percent of HSP’s. Substance abuse counselors have been found to have the highest history of dependence prevalence, at about 30-40% (Culbreth, 1999; Elman, & Dowd, 1997). This is primarily due to their own experiences with recovery leading them to this occupation. Additionally, this occupational group has a large
relapse rate; these persons may stop their own recovery programs when they become too fixated on helping others (McNaulty, Oser, Johnson, Knudson, & Roman, 2007). Persons in the human service occupations are especially at risk, based on the characteristics of their job, and symptoms of burnout, which may include depression, emotional exhaustion and anxiety, psychosocial isolation, decreased job satisfaction, reduced self-esteem, disrupted personal relationships, loneliness, problems with attention, concentration, decision making, and problems with substance abuse (Shapiro et al, 2007).

However, little is known about HSP’s who are substance abusers. For example, the only HSP’s with job specific recovery programs, as located in the literature, were for clergy and/or priests (Brachear, 2004; Hendrix, 1991). Although the academic literature that I reviewed does not discuss discipline specific recovery programs, I have come across information identifying job specific recovery programs. For example, individual disciplines, such as physicians, pharmacists, and nurses have regulatory programs, which are administered by their respective regulatory bodies. A few reasons as to why this phenomenon is not well written about in the literature include: substance abuse among human service providers leads to attrition and persons who recover do not maintain/return to their previous work roles; professional ethic bodies may prohibit their return; professionals who have recovered may get their treatment outside of known sources, or due to stigma, may not share their recovery experiences (McNaulty et al, 2007; Dollard et al, 2003; Raistrick, Russell, Tober, & Tindale, 2008). Based on accounts of prevalence rates for HSP’s we know that HSP’s utilize recognized treatments (counseling, hospitalization, mutual aid groups, etc.), but may choose not to discuss aspects about their work to their treatment providers, or to fellows they are in treatment with. We also know, based on literature,
that HSP’s who are current substance users are less likely to offer help to those they identify with substance problems (Raistrick et al, 2008).

One plausible explanation as to why persons in the human service occupations are hesitant or resistant to seeking treatment, and are at high risk of developing substance abuse problems, can be found in their own identity as a HSP. Characteristics of this cultural identity may include: a denial that the helper can have a problem of his/her own, having a difficult time recognizing and/or admitting to personal problems, extrinsic rewards of esteem, status, privilege, and earnings, privilege of service to others, sense of having been chosen (or having had a ‘calling’) to their vocation, privilege of service to others, and a sense of responsibility, conscientiousness, and willingness to address difficult medical, psychological, and social problems (Siebert et al, 2007). Siebert states:

Helping professions set expectations in which personal and professional standards, necessarily, often are one and the same. Clients often impose upon these practitioners an idealized version of their abilities as well, thus reinforcing their need to be paragons or models of efficacy and excellence. Even their families and friends know them as helping professionals, and thus they have expectations and behaviors that reinforce the social roles… Several authors have argued that the role expectations of these practitioners are the very thing that creates the climate conducive to impairment by creating unattainable standards (p. 50).

The identity of human service provider adds an additional dimension to treatment. In recent decades, alcoholism and drug addiction has come to be known as a chronic health disease (Gifford & Humphreys, 2006; Hasin, Stinson, Ogburn, & Grant, 2007; Stinson, 1988). Current aspects of treatment are not well suited to meet current needs. Although the format is congruent with how HSP’s have been conditioned to learn (instructional, didactic, deterministic, and cognitive), the process is not sufficient.

**Treatment of HSP’s**
Outside of traditional treatment, mutual-aid societies are available to persons who desire recovery from substances. Two examples of such societies include Alcoholics Anonymous (AA) and Narcotics Anonymous (NA). Twelve-step mutual-aid societies offer a different format of learning to its members. In 12-step groups individuals learn through mentoring (sponsorship), storytelling (both sharing and listening), and through a willingness to acknowledge that only a spiritual experience can provide remission. I was not able to identify literature citing the effectiveness of mutual-aid groups for persons in human service occupations, although persons in this occupational group are well represented (compared to other occupational groups) in 12-step programs.

We need to understand how HSP’s learn to recover. HSP’s are taught to be evidence-based, rational, not to share themselves, to be independent, to be able to find their own factual answers, and that they have power; it is only in working with their service populations that they perform relationally. Given the cultural identity common to HSP’s, how is it that they are successful with recovery from addiction. Clearly there are similarities and differences when contrasting HSP’s with other occupational groups. We can hypothesize that HSP’s will experience recovery differently based on their professional roles, characteristics intrinsic to their training, how they construct knowledge, and by the standards they are held to culturally.

**Problem Statement**

One only needs to open up a newspaper or turn on the nightly news to gain awareness on the prevalence of substance abuse across the nation, and throughout the world. Historically the substance abuse population has come to be known in the mental health community as a population with very low recovery rates and very high recidivism rates. According to recent research, the recovery rate post treatment for substance abuse is about as good as the mortality
rate (approximately 10 percent). Additionally, approximately 75-90 percent of the substance abuse population will relapse within 90 days of treatment termination. Today, approximately 80 percent of the prison population is incarcerated for a substance abuse related offense.

In the July 2008 edition of the Grapevine (AA’s “meeting in print” periodical) a woman who is incarcerated for a 15-year term writes about her psychological struggle with adjustment. Interestingly, prior to being arrested she was a substance abuse counselor. Persons in helping occupations (i.e., social workers, clergy, nurses, etc.) represent a population with high prevalence of substance abuse problems (about 5% of the AA population according to 2008 AA statistical survey). This appears to be intrinsic to the identity characteristics that bring one to helping occupations. Essentially, these persons either come from traumatic histories, or as helpers they forget to maintain their own recovery program.

The problem is twofold. The first problem was just described, being very high rates of disease, and very poor outcomes of sustained recovery. The second problem is an issue of research, practice, and education. Clinical treatment is provided by professionals, and knowledge, wisdom, and guidance is facilitated in mutual-aid groups by experts. Some individuals will experience abstinence from addiction without formal treatment or participation in self-help groups. Others may experience success with addiction with clinical treatment, and/or recovery from addiction with participation in mutual-aid societies. In my review of the literature in addiction studies I was only able to identity a very limited body of work on how learning in recovery occurs. Clinical treatment providing best practices is outcome based applying modalities that have been found to be most successfully historically. Mutual-aid societies, such as AA, assert that recovery occurs through a ‘vital spiritual experience’; this phenomenon is understood within the group conscious as a function of a loving relationship with a Higher
Power. Clearly there is little understanding of how learning in recovery occurs, other than that it does occur with specific practices.

**Study Purpose and Research Questions**

As discussed by Moustakas (1990), qualitative research that follows a heuristic mode of inquiry has a specific, purposeful, and personal grounding. The purpose of this study is to explore the role of spirituality and spiritual development in learning and meaning making for HSP’s in recovery; this study will specifically look at the transformative properties of mutual-aid program membership in eliciting this learning and meaning making process. The research questions guiding the study include:

1. What is the experience of learning in recovery from alcoholism for persons who work in human service occupations? In AA, recovery is described to be manifested through ‘vital spiritual experiences’. Through a learning process can we come to understand how spiritual experiences are transformative?

2. What can the experience of human service professionals in recovery provide to the field of Addiction Studies on how learning in recovery is manifested? How can this be viewed through a lens of transformative learning?

3. In Alcoholics Anonymous recovery is described as being comprised of 3 parts: a physical component, mental component, and a spiritual component. In application of A.A. group discourse (storytelling, sharing, AA literature, fellowship/community building, and sponsorship) how can action by HSP’s promote critical reflection of assumptions across these components?

In that this study emerged out of my own personal ongoing experiences with addiction, catalyzing events, spiritual experiences, and learning in recovery, a methodology utilizing
heuristic inquiry seemed autonomic. This is a topic that has personal, social, and universal relevance. This topic has personal relevance in that one primary goal of this study is to gain a better understanding of my own experience. This topic has social and universal relevance in that alcoholism, and addiction in general, is a human malady that affects millions of individuals and families. Various studies have documented the problem of alcoholism as a human malady in both the United States and abroad (Bristow-Braitman, 1995; Roman, 1988; Slaymaker & Owen, 2006). Research on the prevalence of alcoholism primarily lies in the fields of medical science, psychology, sociology, and counseling/social work. Additionally, alcoholism, and more generally, substance abuse, has been well documented in research as a problem for human service providers (Dollard, Dormann, Boyd, Winefield, & Winefield, 2003; Raistrick, Russell, Tober, & Tisdale, 2008; Sorensen, 1973). As previously reviewed in this chapter, a variety of plausible reasons have been given as a rationale as to why this problem has become so paramount in our society.

There is a gap in the literature, in both the fields of education and medical/psychological science, regarding how people learn abstinence and recovery from alcoholism. Given this gap this study will explore how persons in human service occupations learn to recover. This study will look into the process of transformation, and examine the way that one’s spiritual development as a human service provider effects the ontological process of learning. This study will examine the characteristics of participation in mutual-aid societies, which include: storytelling, sponsorship, and vital spiritual experiences, to gain a better understanding of how they facilitate learning.

**Conceptual/Theoretical Orientation**
The conceptual frameworks of this study are Transformational Learning and the body of research encapsulating spiritual development. In this section of chapter one I will present some of the basic background information, tenets, and selection rationale of the transformative learning theoretical perspective. Inclusive of this theory I will discuss some preliminary discussion on a conceptual lens of spirituality.

Prior to introducing transformative learning theory I would like to give some discussion as to why this theoretical orientation was chosen. First and foremost, the selection of TLT was based on my own personal experience, which also incorporates the decision to use a heuristic methodology. Although Moustakas (1990) does not specifically discuss TLT in his text *Heuristic Research*, he does discuss a type of learning that is indicative of meaning making, that incorporates reflection, and that has aims at correcting distorted perceptions, frames of reference, and worldviews, all of which are written about in the TLT literature. Additionally, Moustakas (1990) discusses learning and meaning making processes called symbolic growth experiences (SGE’s), which appear to share commonalities with TLT, especially with regard to the spiritual lens of TLT (Frick, 1983; Moustakas, 1990).

According to Frick (1983) SGE’s are instantaneous, dramatic shifts in perception, belief, or understanding that alters one’s frame of reference or worldview; an external event is usually connected with the internal change, but the connection is synchronistic, an intentional or spontaneous happening, rather than the result of a cause-effect relationship. The change in perception is a catalyst towards a new attitude, a new process of learning, or a shift in identity and self-awareness. As cited by Moustakas (1990), in Frick (1983), SGE’s may initiate a revisioning motivation, elicit human learning, offer guides for resolution of dysfunctional behavior, address handicapping beliefs, and offer corrections to distorted perception. I have
found this conceptual framework to be most similar to my own experience of learning in recovery, and to the theoretical framework of TL in the discipline of Adult Education.

**Transformational Learning Theory**

Transformative learning was selected for this study because it offers a perspective of learning and knowledge creation that involves the critical reflection of previously held perspectives, in relationship with experiencing a dilemma of unmet cognitive and emotional resources. Transformative learning theory, according to the literature, is described as a cognitive and emotional process that explains how one constructs and reconstructs meaning by developing a new meaning perspective. This rationale of learning appears to be most consistent with the purpose of substance abuse treatment and the discourse of Alcoholics Anonymous.

Transformative learning theory (TLT) was first introduced by Jack Mezirow in 1978. At that time, it was described as a cognitive, conative, rational, and psycho-critical developmental theory that was specific to adults, describing how adults make meaning of their experiences, and how they reframe their consciousness based on their sociocultural encounters. TLT has some very specific goals, according to Mezirow, which include understanding meaning out of experience, developing autonomous thinking, and becoming a socially responsible citizen (Baumgartner, 2001; Mezirow, 1997; Taylor, 2008).

Transformative learning occurs through a process of three factors. First, one becomes aware of holding a limited or distorted viewpoint; essentially, one is presented or stuck in an ontological conflict. Second, a disorienting dilemma is acted upon as a catalyst for change. The disorienting dilemma prompts people to engage in critical examination opening one up to different alternative perspectives. Third, through critical examination of assumptions, a change in how one views the problem or problems occurs (Cranton, 2002). This process is relevant to the
purpose of my study as the premise of substance abuse treatment and participation in a program of recovery is to develop new ways of thinking, and to understand prior irrational ways of living.

As previously stated, TLT was first introduced as being a cognitive process that is rational and conscious in nature. Since then other theorists and researchers have come to write about transformation occurring through other means. For example, Cranton (2002), Dirkx (1997, 2001), Grabove (1997), Tisdell (2003), and Taylor (2001) write about a process of transformation that is non-linear, intuitive, emotional, and not based on factual knowledge, or reason. As the theory has developed, the rational and the emotive have been described to have common purposes within TLT including: humanism, emancipation, autonomy, critical reflection, equity, self-knowledge, participation, communication, and discourse (Erickson, 2007; Grabove, 1997). Essentially, the rational and emotive modes of meaning creation are described to occur in concert, or as one being more accessible to an individual based on their own learning styles or personality (Cranton, 2002).

Through the action of responding to a disorienting dilemma, an individual’s frame of reference, habit of mind, and point of view, within a specific discourse (Cranton, 2002, 2006; Mezirow, 1997, 1998) is transformed. According to Mezirow, a frame of reference is described as associations, values, feelings, and conditioned responses that come to be known as a meaning perspective. Essentially, these are structures of assumptions. The habit of mind is described as a “broad, abstract, orienting, habitual ways of thinking, feeling, and acting influenced by assumptions that constitute a set of codes” that can be cultural, social, educational, economic, political, or psychological (Mezirow, 1997, p. 6). Lastly, a point of view is described to be the idiosyncratic ideals of self that shapes ones’ particular interpretation. These may include a “constellation of belief, value judgment, attitude, or feeling” about a particular concept or
perception (Mezirow, 1997, p. 6). Transformational learning occurs through change and development in either a point of view or habit of mind. Within TLT the four processes of learning include: the elaboration of an existing point of view, the establishment of a new point of view, transforming a point of view, and/or transformation in a habit of mind (Mezirow, 1997). A perspective transformation is described as a paradigm shift of consciousness, to a more fully developed, and mature, frame of reference. This development in learning is described as being more inclusive, differentiating, permeable, critical, and integrative (Taylor, 2008). These processes inform the purpose of this study as these tenets of learning are consistent with the desired outcomes of clinical treatment and growth in recovery.

According to the literature (Cranton, 2002, 2006; Grabove, 1997; Tisdell, 2003), not all learning is transformative, nor should it be, but all learning has the potential to be transformative. All learning has three components including: culture, context, and content (Hill, 2005; Ross-Gordon, 2002). To this end learning is described as involving identification with a community, and as a social and cultural event. The aspects of knowledge and skills in the learning process are viewed as being less important than the context; all learning, and teaching, is socially constructed (Cranton, 2002; Hill & Johnston, 2003).

**Spiritual Development, Transformative Learning and AA**

In the adult education discourse there has been a development of literature within transformative learning pertaining to spiritual development and spiritual experiences. Several academics, including Tisdell, Palmer, and Dirxk have been developing this discourse, pertaining to a lens of spirituality in learning within the transformative learning discourse. The spiritual development literature, with its intersections in transformative learning and the philosophies of the program of Alcoholics Anonymous will inform the conceptual framework of this study.
Some of the consistencies between the AA philosophies and spiritual development as it is written about in the adult education literature include the notion and existential purpose of a higher power, principles of self-development through willingness, gratitude, and acceptance, and references to vital spiritual and/or religious experiences. Thematically, these discourses (AA and Spiritual Development) also share consistency in mediums of prayer, creating a shared space of community, celebrating ritual, fostering authenticity, and developing oneself through the process of helping others. These ideals correspond to the transformative learning literature as part of the process of change. Specifically, the programs of AA (working the 12-Steps with another), and the process of spiritual development, can be conceptualized in the transformative learning literature as they pertain to developing more holistic perceptions of experience; through these learning processes there is a critical reflection of previously held assumptions, beliefs, and judgments. The program of Alcoholics Anonymous identifies themselves, and is commonly known to be a spiritually-based program; the spiritual basis of the program is fostered through the tenet that recovery comes through a belief in a power greater than oneself. This way of knowing relates to the spiritual development literature within adult education, and the discourse development of transformative learning.

Discourse is an integral part to the program of Alcoholics Anonymous, and to treatment in the clinical setting (the discourse of treatment has been greatly impacted by the discourse of AA). The program of AA, since its creation in 1935 by Bill W. and Dr. Bob, has developed a discourse putting the experience, strength, and hope of recovery into print. Discourse as defined by Mezirow (1997) is “a dialogue devoted to assessing reasons presented in support of competing interpretations, by critically examining evidence, arguments, and alternative points of view” (p. 6). According to Boud (2001) critical reflection occurs through the process of
reflective practice, which is the process of working with and through events and experiences. The purposes of reflective practice include: improving what we do and how we do it, improving the quality of our learning, developing understand of the process of learning, and enhancing our practice of self-empowerment, understanding, and creative interaction. Having a discourse permits the process of reflective practice of experience and knowledge within a specific context.

**Significance of the Study**

As presented in the problem and purpose statement section of this chapter, this study is important for several reasons. First, alcoholism is a sociological malady that impairs the lives of millions of people and families. Alcoholism leads to various health impairments such as throat, stomach, and liver cancer, and has been identified as a primary factor in vehicular accidents and death; alcohol use has also been identified as having a tremendous cost on our healthcare system. As previously identified, substance use has also been found to be related to nearly 80 percent of crimes committed, impacting the sheer size of our criminal justice system. We need to do this study as little is understood about how people learn to abstain and recover from addiction to alcohol. Research on formal treatment and participation in mutual-aid groups has taught us what steps or activities one needs to participate in to recover. Research has not given us insight into the learning involved in this change process.

The prominence of this problem among human service professionals provides some insight that learning is not purely about having and applying information. First, this research is applicable to the field of adult education. It will serve to build on the discourse of transformative learning and the role of spirituality in education, both from a theoretical and practical point of
view. Second, what is to be gained is knowledge about how people make meaning of their recovery experience so that practitioners can apply this knowledge of how learning occurs to those that still suffer from this malady. Third, this research is important to the program of Alcoholics Anonymous, and may be able to be utilized by other mutual-aid groups, as their discourse follows the same format (i.e., the twelve steps). I have frequently experienced members of AA and NA desiring a rationale as to why their program of recovery works, wishing for a better explanation than ‘don’t drink and come to meetings.’ And finally, this research has personal significance to me. As a person in recovery from alcoholism I am seeking knowledge and wisdom about my own experiences, and the experiences of others. As a mental health practitioner I desire knowledge to apply to my praxis.

**Overview of Research Methodology**

Briefly, it is important at this point to identify some of the guiding tenets that this study will utilize in its construction of knowledge and meaning. Essentially, in qualitative research, it is not only the subject of the study that makes it unique, but also the guiding beliefs and practices of specific methods within the discipline of qualitative inquiry. First and foremost this study will follow the construction of heuristic inquiry; in the literature heuristics is grounded in a framework of phenomenology, thus, I will offer some background on this. Narrative inquiry will be utilized as function of data collection and results explanation. Most simply, phenomenology is the study of a phenomenon, or human experience. More specifically, this study will analyze and interpret phenomenological data through a lens of heuristics, which was briefly discussed earlier, and will more thoroughly be discussed in chapter two (Moustakas, 1990; Patton, 2002).

The word heuristic comes from the Greek word ‘heuriskein’, meaning to discover or to find. Heuristics is about an internal search, to discover the nature and meaning of an experience;
the self of the researcher is present throughout the process, and the researcher experiences growing self-awareness and self-knowledge. In all qualitative research the researcher is the instrument, but heuristic research takes this process a leap forward demanding that the researcher has a uniquely similar experience with the participants/subjects (co-researchers) and topic under study. As described by Moustakas (1990):

The heuristic process is a way of being informed, a way of knowing. Whatever presents itself in the consciousness of the investigator as perception, sense, intuition, or knowledge represents an invitation for further elucidation. What appears, what shows itself as itself, casts a light that enables one to come to know more fully what something is and means (p. 10)... In heuristics, an unshakable connection exists between what is out there, in its appearance and reality, and what is within me in reflective thought, feeling, and awareness (p. 12).

Essentially, heuristics delineates itself from phenomenology in being deeply intimate to the researcher, involving the researcher in the very creation of the question. In heuristics the researcher is searching for qualities, conditions, and relationships that underlie a fundamental question, issue, or concern. This process also involves a return to the self, where self-awareness is recognized, and one’s own (the researchers) experience is valued. The researcher, and the data, determines what is, and is not valid. (Moustakas, 1990).

Assumptions of the Study

In every study there are always assumptions that researchers make. The assumptions that guide this study are:

1. The scope of this study is to perform an epistemological inquiry into how persons working in human service occupations learn recovery from alcoholism through experience.
2. I assume that persons in human service occupations will honestly share their experiences with alcoholism and recovery, including how it has impacted their development, their careers, their families, and their ability to help others.

3. That maladaptive idiosyncrasies intrinsic to the alcoholic are not unique to the alcoholic; they are part of the whole human experience. The alcoholic is unique in that growth within these idiosyncrasies is not possible without first eliminating the allergen (alcohol) affecting the alcoholic’s brain. The time required to accomplish this elimination is individually based.

4. The disease of alcoholism is progressive. This means that one’s addiction will continue to advance even though one is not accessing the allergen. The symptoms of alcoholism will remain arrested so long as the allergen is not accessed by the alcoholic.

5. Learning and knowledge are socially constructed; learning is acquired through experience; transformative learning is a process unique to adulthood and/or higher levels of constructive thought (post-formal operations).

6. Persons in human service occupations have unique similarities and differences. The experience of one is not assumed to be consistent with the experience of another just because they share the same occupational group, although they may have similar thematic attributes. Persons in human service occupations may learn in different ways.

**Limitations and Strengths of the Study**

As is true with all studies, both quantitative and qualitative, there are some specific limitations and strengths inherent to the research, which needs to be addressed. The limitations of this study include:
1. Honest participation is believed to be a more significant problem for individuals in this occupational group. Human service providers are not an inherently dishonest group as a whole. Based on characteristics of this group, honest sharing, as it relates to alcoholism and participation in treatment, may be problematic.

2. Conceptualizations of recovery and abstinence may differ across subjects. Recovery in treatment is not synonymous with recovery in mutual-aid societies.

3. The program of Alcoholics Anonymous, although it has a group consciousness and a shared discourse, is experienced differently across individuals, and in different groups. AA states that recovery is made possible through one having a vital spiritual experience. Spirituality is experienced differently and defined differently, although there are common characteristics to experiences and definitions.

4. A heuristic methodology of inquiry with narrative data collection is such that serves to provide in-depth investigation to one’s own person experience. The nature of this method of inquiry is to conduct research that is small in number of subjects, utilizes purposeful samples, and has a defined context.

In contrast to the limitations of this study, there are also some inherent strengths that need to be identified. This study answers the purpose of all heuristic research, as described by Moustakas (1990), being that it has personal meaning, social relevance, and has the potential for universal application. My sobriety and recovery is an essential component of my own identity and this research serves to allow me to better understand my own learning and meaning making process. With regard to social relevance, alcoholism is a disease that impacts the lives of millions. This research serves to inform adult educators, adult learners, addiction researchers, human service providers, human service providers with addiction histories, alcoholics/addicts,
recovering alcoholics who are members of mutual aid groups, and interested persons who have relations with alcoholics. To this last end this study has universal application. In my own experience in attending Alcoholics Anonymous meetings for the past 3 years a common conundrum I have experienced among my communal peers is a desire to better understand the personal and group process of learning in recovery. This study offers insight into one lens of how this process may occur. This study does not offer a cause-effect relationship, but rather provides the richness that only an autobiographical experience can offer.

### Definition of Terms

**Addiction**: an obsession, compulsion, or excessive dependence on a physical or psychological medium that makes one incapable of performing the healthy adult activities of daily living expected from them

**Alcoholism**: the addiction to the substance ethyl alcohol; the manifesting disease of addiction to alcohol

**Allergy**: term used in the program of Alcoholics Anonymous to describe why alcoholics have a different response to the consumption of alcohol; the allergy refers to the manifesting effects following alcohol consumption such as social isolation, craving, self-centered thinking, and dependency

**Burnout**: a psychological term for the experience of long-term exhaustion and diminished interest, especially in one's career

**Chronic Health Disease**: an abnormal condition of an organism that impairs bodily functions and can be deadly; It is also defined as a way of the body harming itself in an abnormal way,
associated with specific symptoms and signs; the qualifier of chronic ensues that the nature of the disease is long-lasting and pervasive

**Emotional Work**: a descriptor of functions within human services and other helping occupations; emotional work includes the listening and sharing of feelings as it relates to problem-solving

**Experts**: term used within the program of Alcoholics Anonymous to describe a member of AA who has wisdom and knowledge regarding aspects of recovery, who has years of sustained recovery

**Human Service Providers**: professionals who have completed a qualifying level of formal education (as indicated by their field) who provide personal, medical, or civil services; some examples of human services include: psychologists, counselors, social workers, physicians/nurses/medical technologists, clergy, police/public safety, and educators

**Identities**: the functional characteristics of oneself (cultural attributes); characteristics may include class, area of education, vocation, family system, marital status, etc.; identities are typically placed in a hierarchy within a person or system

**Insanity**: term used in mutual-aid programs to describe the repetition of similar behaviors expecting different results; term is also used in the program of AA to mean the lacking of psychological, spiritual, and physical wholeness

**Mutual Aid (Self Help) Groups**: programs that are composed of a group of members with similar relational characteristics; mutual-aid groups differ from treatment groups in that they are facilitated by their members, and not by a human service professional

**Person-Related Jobs**: occupations in which ‘the relationship’, or what one person has to offer to the other from a helping capacity, is the primary service provided; jobs that typical do not involve the exchange of material goods
Professional: term used in the program of Alcoholics Anonymous to describe a person who is not a member of AA, but has education and knowledge within the field of alcoholism.

Recovery: term used within mutual-aid societies to not only describe an absence of the substance one struggles with, but also a surrender to spiritual principles of working with other group members who suffer.

Substance Abuse/Dependency: Substance abuse may lead to addiction or substance dependence. Medically, physiologic dependence requires the development of tolerance leading to withdrawal symptoms. Both abuse and dependence are distinct from addiction that involves a compulsion to continue using the substance despite the negative consequences, and may or may not involve chemical dependency. Dependence almost always implies abuse, but abuse frequently occurs without dependence, particularly when an individual first begins to abuse a substance. Dependence involve psychological processes while substance abuse reflects a complex interaction between the individual, the abused substance and society.

Treatment: modalities utilized by human service professionals to counteract a presented problem or concern.

Vicarious Traumatization: the process of the service provider experiencing secondary trauma due to their role in being an observer or listener to the actual event.
CHAPTER 2
LITERATURE REVIEW

The purpose of this study is to explore the role of spirituality and spiritual development in learning and meaning making for HSP’s in recovery; this study will specifically look at the transformative properties of mutual-aid program membership in eliciting this learning and meaning making process. In what follows I will be providing a review of the adult education and addiction literature. The addiction literature stems from the fields of medicine and psychology. In this chapter I will described the pertinent literature covering the following topics: recovery from alcoholism, spirituality and religiosity (generally and specific to recovery), and the program of Alcoholics Anonymous (history, purpose, and research); additionally I will briefly discuss the physiology and biochemistry of alcohol in the human body, as it is pertinent to addiction and alcoholism. Finally, I will end this chapter with a discussion of the contributions from the field of adult education in discussing my primary theoretical framework, which is transformative learning, and contributions from spirituality and spiritual development.

Alcoholism and the History and Philosophy of Alcoholics Anonymous

For this paper alcohol (ethanol) will be defined as the mood altering liquid produced through the fermentation of sugar. This substance is toxic to the human body in any concentration, although at lower concentrations does not manifest negatively experienced physiological responses. Alcohol is metabolized by the liver organ through the release of alcohol dehydrogenase, which is a normally produced enzyme. Alcohol is metabolized into acetylaldehyde (which is the substance responsible for the ‘hangover’ effect experienced with
excessive alcohol consumption). Alcohol is found in various concentrations in beer, wine, and liquors (Milam & Ketchum, 1981).

Depending on your source, timeline from which the source was produced, or the social context that created the source, one can find a variety of definitions to ‘the alcoholic’ and alcoholism. Today it is generally agreed that alcoholism is a disease, that is genetic in nature, that is incurable, chronic and relapsing, progressive, and that it is a product of a number of predisposing factors (Diagnostic & Statistical Manual of Mental Disorders, 2004; McKellar, Ilgen, Moos, & Moos, 2007). Abraham Lincoln stated:

In my judgment such of us who have never fallen victims (to alcoholism) have been spared more by the absence of appetite than from any mental or moral superiority over those who have. Indeed, I believe if we take habitual drunkards as a class, their heads and their hearts will bear an advantageous comparison with those of any other class (Milam & Ketcham, 1981, p. 27).

This quotation taken from Milam and Ketcham (1981) was clearly decades ahead of its time. In the era that this statement was made alcoholism was viewed clearly as a moral deficiency, and severe alcoholics were treated through inhumane means, even for that time period. This quotation was even years ahead of its time when compared to nearly a decade later, when Alcoholics Anonymous was created (1935), by a traveling salesman (Bill W.), and a physician (Dr. Bob), who were both viewed as social outcasts and ‘hopeless alcoholics’. What follows is not a definition of alcoholism as a moral deficiency, nor is it a definition from the program of Alcoholics Anonymous; the following elaboration describes what some of the current viewpoints are on alcoholism as a genetic disease of physiologic and neuro-chemical origin (A.A. Worlds Services, 2001).

Two of the first big questions in determining whether or not alcoholism is a disease, and on how it is to be judged as a social construction is: Is one born alcoholic? Or, does some
physiologic change occur in one’s body after they have been exposed to the chemical? The true results of this question are difficult to decipher, as the personal and social consequences of alcohol use are not established until one is well into their alcoholic drinking behaviors. The results of repeated Swedish twin studies have informed the research community that alcoholism is indeed an inherited trait. Essentially the results of these studies proliferate that having one biological parent, who is an alcoholic, predisposes one to a 50 percent risk of developing alcoholism; having two biological parents with alcoholism essentially predisposes one to a near 100 percent risk of developing alcoholism (McKellar, Ilgen, Moos, & Moos, 2007). The results of these studies can be concluded with two caveats. First, one cannot decide to become alcoholic (becoming addicted or dependent on the chemical) by excessive drinking. Second, one can only become alcoholic (i.e., meet their genetic destiny) by exposing their brains to the chemical ethanol (Hettelhack, 1992; Smart, 2001).

The History and Development of Alcoholics Anonymous

Prior to 1935 in the United States there really was not any form of formal treatment for alcoholism; as previously stated, alcoholism was not viewed as a disease, but rather was seen as a moral weakness or deficiency. Individuals were coming to emergency rooms and sanitariums, picked up off the streets, or brought in by family members with symptoms including failing organ systems, vitamin deficiencies, fits of delusion, seizures, and delirium tremens (DT’s). The medical community at the time had no other explanation for these variants other than to describe them as the hopeless drinking variety. Compounding these factors were changes in the social climate. The United States was progressing from an agricultural/farming system to an industrialized society. Thousands of men were returning home from overseas wars, finding a
changed employment environment, and the nation was about to embark upon The Great Depression and stock market crash (Roman, 1988).

Bill W., a soldier returning home from war, found work as a businessman. Being a charming, gregarious young man, using his reputation as a distinguished soldier, he entered the booming business world to find a working society very different from how he left it only a few years ago. In Bill’s early days as a businessman he also became acquainted with the changing times of social drinking, explosion of pubs and watering-holes, and the lively nightlife of New York City. Bill met a beautiful woman by the name of Lois, married, and was about to embark on the American dream. At this point Bill’s life as an alcoholic began to metastasize. As Bill’s alcoholism progressed he found that he could not keep a job, he burned the business relationships he had made, and survived next to a bottle at home as his wife went to work. Bill became a shadow of the man he once was (A.A. World Services, 2001).

On sheer will power, Bill found short periods of abstinence, which were generally preceded by short stays at sanitariums; unfortunately these alcoholic lapses did not last. One day while at home drinking, Bill had a visit from an old friend by the name of Ebby Thatcher, who he had remembered as a fellow drunkard. When Bill answered the door he was surprised by what he saw in the man before him. He saw a healthy, vibrant, clean man. He invited Ebby in and sat with him at a table curious about his condition. Bill offered Ebby a drink, which was declined. When Bill inquired into how he accomplished his sobriety Ebby told Bill that he found God through an organization called The Oxford Group. Turned off by the thought of God Bill congratulated Ebby on his successes, but could not see what benefit this would offer him (A.A. World Services, 2001).
Shortly after the meeting with Ebby, an event took place that would change history. With Bill’s declining health he once again was taken to a hospital. While at this hospital Bill met a physician by the name of William D. Silkworth. Dr. Silkworth described Bill’s condition as being grave, of the hopeless variety, and clearly well on his way to death. Bill inquired if there was anything that could help him. Dr. Silkworth described the only solution he had ever seen, happening in a rare number of alcoholics, being that of one having a vital spiritual experience. He stated that there is no medical explanation for this event, but nonetheless, he had witnessed a complete spiritual change being the only solution he had ever seen. While Bill was in the hospital he also had several visits from his friend Ebby. Bill and Ebby had discourse on God and spirituality. Ebby offered Bill some insight that changed his thinking. He told Bill that it was not necessary that he believe in a religious God, just that he find meaning in a power greater than himself; essentially he could create his own conception of God. Also around this time period Bill began to work with a psychiatrist by the name of Carl G. Jung. Dr. Jung was the person who provided Bill knowledge of a construction of spirituality. In retrospect one may clearly describe the chronology of all these events as a synchronicity of spiritual experience (types of spiritual experiences will be described in more detail later). (A.A. World Services, 2001; Kurtz & Ketcham, 1993; Tisdell, 2003).

Shortly after Bill’s relationship with Carl Jung developed, a happenstance occurrence in Akron, Ohio took place. A member of the Oxford Group introduced Bill to a fellow alcoholic by the name of Dr. Bob (a second spiritual synchronicity). This was the start of Alcoholics Anonymous as we know it today: a relationship of one alcoholic working with another alcoholic, sharing stories, and constructing a connection with a power greater than oneself. The 4 Absolutes of The Oxford Group eventually became the foundation for the 12-steps of AA. Bill never drank
again; Dr. Bob drank on one occasion shortly after their first meeting (A.A. World Services, 2001).

**Spirituality and Alcoholism Recovery in AA**

A historical and phenomenological explanation of how AA came to be in existence (as previously described) is essential for understanding the state of meaning of spirituality in alcohol treatment programs today; this is evident in that AA or NA is the most common medium for the integration of spirituality into treatment programs. In most treatment programs the discourse of AA is a foundation or backbone to what treatment programs use as a conceptual framework for recovery (Bristow-Braitman, 1995; Friedmann; Taxman, & Henderson, 2006; McKellar, Ilgen, Moos, & Moos, 2007; Moos, 2006). In a January 2009 poll from the AA Grapevine, it was found that out of 4090 respondents, 53% of AA members went to professional treatment before joining AA, and were most likely introduced to AA while in treatment. What AA offers in comparison to other treatment modalities, or in complement to other treatment modalities, is a community of fellowship, and the twelve steps.

**Fellowship.** Fellowship in AA occurs through several different mediums. Some examples of fellowship include participation in meetings (life stories of experience, strength, and hope), working with ones’ sponsor/mentor, a practicing of AA principals in all of one’s life affairs, developing a friendship with ones’ higher power, and contributing time to hold service commitments within the group or organization as a whole. Practicing spiritual fellowship involves a principle of spiritual ways of knowing: authenticity. One is authentic in their practice by sharing their whole self, being honest with themselves, and through knowing that the purpose of their sharing is to better understand their own experiences, and to creating a collaborate meaning-making experience among the group. A guiding practice working at the foundation of
spiritual ways of knowing is a common purpose; authenticity has its true power by working through a group conscience; a group conscience is the product of a homogeneous meaning-making experience. Spirit, and soul, speak and listen through authenticity (Chickering et al, 2006; Dirkx, 1997; Vella, 1994).

**The 12-steps and relationship with one’s higher power.** Steps 1 through 3 are about coming to understand the meaning of surrender, admitting that the world does not revolve around oneself (admitting that we are not in charge of what happens in the world), and identifying to the best of one’s ability a higher power that is. Briefly, steps 1, 2, and 3 can be summarized as: ‘I can’t, He can, and I’ll let him’. This concept of surrender and powerlessness found in mutual-aid programs like AA are not unique to these programs. Surrender is also well written about in the adult education spirituality literature. In part this is discussed in the transformational learning literature as well, with regard to developing a different way of viewing and conceptualizing an experience. This happens when a person surrenders an old way of conceptualizing an idea as no longer being helpful. There is congruence between the AA discourse and adult education literature here with the precepts of honesty, open-mindedness, and willingness (Cranton, 2006; Gutierrez-Zamanu, 2004; Mezirow & Associates, 2000).

Steps 4 through 9 thematically deal with the physical ailment of alcoholism (in regard to the physical world and the human beings that inhabit it), and identifying that one is out of touch with the real world. The spiritual principle most evident in these steps is the act of seeking forgiveness, both of ourselves, and others. In these steps people are admitting their faults (character defects), looking for forgiveness, and practicing forgiveness. Drawing a connection to the literature found within the discourse of adult education, these steps mostly tie with the concepts of taking action and accepting responsibility; in the practice of Buddhist traditions,
these actions can be found in the Four Noble Truths, as a means of freeing oneself from suffering (Gyatso, 1994). As stated in every AA Grapevine, members of AA have a ‘Responsibility Declaration’ that proclaims: “I am responsible. When anyone, anywhere, reaches out for help, I want the hand of AA always to be there. And for that: I am responsible” (AA Grapevine, 2009). Taking action and accepting responsibility in AA also involves the process of practicing the spiritual principles learned in all of life (both inside and outside the rooms of AA). In the adult education literature this process is written about extensively in the mentoring literature. There is responsibility from both the mentee and the mentor in this relationship. This process is outlined in learning contracts and learning covenants (Cranton, 2006; Wyckett, 2000). The mentoring relationship has an established purpose, duration, and limitations (AA World Services, 2001; Daloz, 1997; Groen, 2008; Levinson et al, 1978).

Finally, steps 10 through 12 are the synthesis of the preceding 9 steps, to allow one to continue to grow spiritually and to practice these principles in all of ones’ affairs. Essentially, these final steps are about working with others and creating new relationships. These steps involve continued self-assessment and appraisal (authenticity). This conceptually is congruent with the thinking in the field of adult education that learning is a lifelong, holistic, ever changing, purposeful, and relational. This concept is also found in the transformational literature with the notion of teacher as facilitator or guide. There are no hierarchies in AA, which resembles the construction of the transformational classroom. In the transformational classroom, the structure of circles is prevalent. Circles promote equality, relationship (everyone facing each other), and sharing (Cranton, 2006; Palmer, 2004; Parks, 2003; Tisdell, 2003).
Spirituality and Recovery

For the purpose of reviewing addiction literature, spirituality and recovery are discussed in tandem; essentially, recovery is understood conceptually as sustained abstinence from a specific drug, while participating in a spiritually based program; given this, it is also important to add that the term ‘recovery’ is used in various spiritual based programs, but it is much more prominent in the rooms of AA and NA. The research that I found relating to these constructs was not found within the field of Adult Education. There is a body of research relating to spiritual development within Adult Education, but I did not locate research that connects this literature to alcoholism. The research that is reviewed on alcoholism comes primarily from literature categorized in psychological journals, with primary findings coming from the *Journal of Substance Abuse Treatment*.

In what follows I discuss, in much greater detail, how spirituality and religiosity are understood in both the adult education and psychological literature. In a study by Atkins and Hawdon investigating religiosity and participation in mutual-aid support groups for addiction, several findings were reported: (a) mutual-aid groups are a primary (non-clinical) means for addiction treatment in the United States and abroad (in 2004 an estimated 2.1 million people participated in such groups), (b) support groups utilizing a 12-step approach to treatment are a major protocol in treatment programs, (c) people who lack a religious meaning making identity are often turned off by 12-step groups (Alcoholic Anonymous and Narcotic Anonymous), (d) 12-step groups consider alcoholism to be a ‘spiritual disease’ and believe that the spiritual component to treatment should supersede the physical and mental components, (e) participation in mutual aid groups was positively correlated to sobriety, (f) there are no significant differences between religious based support groups (e.g., Celebrate Recovery; Reformers Unanimous),
spirituality based support groups (e.g., AA and NA, and non-religious based support groups (most prominently being SOS, WFS, and SMART), with regard to success with abstinence, and (g) “respondents’ level of religiosity was unrelated to remaining clean and sober… belief in a Higher Power, was also unrelated to remaining clean and sober” (Atkins & Hawdon, p. 326-327, 2007). Correlates that were found to be statistically significant with regard to recovery from alcoholism include age, the number of close friends one has in recovery programs, and the frequency that one participates in mutual aid programs. It is my opinion that all three of these correlates are related to how one makes meaning and could be described as spiritual attributes. These attributes are also closely tied to social learning theory.

In reviewing the discussion section from the research completed by Atkins and Hawdon it is evident that religiosity in and of itself was not positively correlated with sobriety. Interestingly, religiosity was found to be positively correlated to success in the groups that are known to be religiously based (although AA does not identify itself as a religious program, its social construction of occurring primarily at churches, and utilizing ‘a God of my understanding’ in its’ doctrines/mantras would lead one to think otherwise). Therefore, this may be further evidence matching congruence of programs to one’s own identity to success in sobriety.

In addition to social learning theory being identified as both an explanation for the development of substance abuse or substance coping, it can also be identified as an explanation as to how some predisposed to alcoholism on a genetic level never come to manifest the disease. Ciarrocchi and Brelsford (2009) in a quantitative study identify another theoretical orientation which may hold promise within addiction science and positive psychology, namely, Self Control Theory. Essentially, in the research (non-clinical population) substance coping is identified as form of maladaptive self-control in that the research identifies its connections to negative
emotional states and psychological dissatisfaction. Contrarily, “many aspects of religion and spirituality support self-regulation (p. 24). . . religion and spirituality contribute more to enhancing positive emotions and are less strongly related to reducing negative affect” (p. 33).

This study had several important findings that may be quite beneficial to this dissertation, and other future research in spiritual development and substance misuse including: the impact of religion and spirituality in promoting well-being; persons who experience God as being punishing could experience more psychological distress, compared to those holding God, and more so one’s relationship to God, in a more positive light – we might want to look towards one’s image of God being part of the recovery process; and, religious/spiritual practices appeared to have a much more profound role in promoting wellness, then one’s self-designation of being religious and/or spiritual. This research summarized their findings by stating “these associations suggest the inherent wisdom of both 12-Step traditions and standard treatment that direct attention to the importance of individuals’ spiritual welfare in substance abuse treatment” (p. 35).

**Alcoholics Anonymous and Narcotics Anonymous**

AA and NA are by far the largest and most well known non-clinical treatment programs both in, and outside the borders of the United States. “AA is a self-governing, nonprofit organization whose only requirement for membership is a desire to stop drinking. It is remarkable among voluntary membership groups, as it charges no dues and subsists on mutual support and commitment to its program of recovery” (Galanter, p. 266, 2007). Currently AA has annual membership of over 1.8 million people with over 100,000 local groups in the United States. Over 25 million copies of the groups’ primary literature, *Alcoholics Anonymous*, have been placed into production. Comparing production rates of literature really underscores the vastness of the population that has read the literature in that it is commonplace for copies of the
literature to be passed along and/or shared at meetings… or as they say in meetings….
‘recycled’. Additionally, the literature is downloadable at AA’s primary website, www.aa.org, free of charge.

According to the research article, *Spirituality and Recovery in 12-Step Programs: An Empirical Model*, by Marc Galanter, M.D., AA and NA are spiritual programs, which posit ‘spiritual growth’ and not ‘spiritual perfection.’ In this research three theoretical models (one of which is spiritual) are offered as a review of recovery from addiction. The first model of recovery is that of a disease model, first offered by Emil Kraeplin in 1902 where addiction was found to be diagnosable based on specific behavioral manifestations and discrete symptoms.

As Galanter reviews, the second theoretical perspective of addiction comes from behavioral psychology. In looking at this perspective, recovery can also be viewed as a phenomenon that is observable to the researcher or clinician, based on the pairing of events, making this perspective measurable, as with the first perspective. The beauty of these two models is that they provide a more simplistic, or easier way to study psychopathology, and to maintain experimental controls. The third perspective is one that has struggled over the years to warrant empirical evidence, in that this last perspective is based on subjective reports of personal experience; we can broadly discuss this theoretical perspective as a spiritual phenomenology. “These experiences are not directly observable by the clinician but are available only as reported through the prism of the person’s own introspection and reflection” (Galanter, p. 266, 2007). Despite a history of these reports being immeasurable, more sophisticated instrument have been, and continue to be developed to research this spiritually oriented psychology (e.g., Life Engagement Test, General Well-Being Schedule, Spiritual Self-Rating Scale). The impetus for this mode of inquiry was developed by Carl Jung in 1978. This third perspective of a spiritually
oriented psychology is also congruent with studies completed by Abraham Maslow (hierarchy of needs triangle). Maslow developed a subjective ‘peak performances’ diagram driven by one’s self-esteem where the individuals purpose in life is based on an existential movement towards self-actualization once states of basic life needs had been met. This perspective has also been researched by psychiatrist Victor Frankl, based on his own experiences in German concentration camps during the Holocaust. Frankl wrote passionately about this perspective in his landmark work *Mans Search for Meaning*. Galanter’s definition of spirituality coincides with that which I previously established, being “that which gives people meaning and purpose in life” (Galanter, p. 266, 2007).

In reviewing the discussion and results from the research by Galanter, several findings relating spirituality to alcoholism were described: (a) spirituality significantly distinguished between those who had a favorable outcome and those that did not; (b) “recovery refers to the process in which people are able to live, work, learn and participate fully in their communities… science has shown that having hope plays an integral role in the individual’s recovery” (p. 267); (c) medication has not been found to be a workable long-term approach for alcoholism, nor has outpatient or impatient treatment due to cost; (d) meta-analysis of studies have found that those who participate in AA/NA during and after clinical treatment have more favorable outcomes than those that do not; (e) the number of AA visits during ones first 3 years after quitting was highly correlated with ones continued sobriety at 8 years post termination of substance use (Galanter, 2007)

In summation, the outcomes found in the research by Galanter were highly concordant to the research by Atkins and Hawdon. The research by Galanter verified statements in Atkins and Hawdon’s research that personal meaning making schemes are highly concordant to that of the
mutual aid group, that the subjects ability to adopt the identity of the mutual aid group is correlated to success, and that a high degree of personal distress over consequence of addiction is correlated to one’s ability to adopt an ideology similar to the mutual aid group.

**Qualitative Research in Spirituality/Arts and Alcohol Treatment Programs**

Although research in the field of alcoholism and addiction is rather plentiful, most studies follow either a quantitative or mixed methods methodology. In my review of the adult education literature, I was not able to find any qualitative studies on learning in recovery from alcoholism, with the exception of one anecdotal story written about by Mezirow with regard to transformative learning. Most of the qualitative studies on addiction were found in the fields of psychology or related social science, medicine, or nursing. Studies utilizing a qualitative methodology seek different qualities then quantitative studies. Common characteristics of qualitative studies include small study population, relatively homogeneous groupings, and purposeful sampling; comparatively, quantitative methodologies utilize populations that are large, generalizable, and randomized. Qualitative data is descriptive; quantitative data is reductionistic. The purpose of qualitative data in addiction research is to understand experience. The purpose of quantitative data is to acquire generalizable information on trends (Chwalisz, Shah, & Hand, 2008; Patton, 2002).

In my review of the qualitative literature a series of themes were revealed related to identity in recovery (Boisvert, Martin, Grosek, & Clarie, 2008; Groh, Jason, & Keys, 2008; Humphreys, 2000; Prussing, 2007; Wiklund, 2008), spirituality/religiosity in recovery (Boisvert et al, 2008; Humphreys, 2000; Koenig, 2008; Mohatt, Rasmus, Thomas, Allen, Hazel, & Marlatt, 2007; Prussing, 2008, 2007; Tucker, 2007, Wiklund, 2008), use of the arts to promote spiritual
experiences (Goldstein, 2007, Koslander & Arvidsson, 2006; Lawrence, 2008; Sharoff, 2007, and use of the arts in addiction treatment (Humphreys, 2000; Koenig, 2008).

In what follows I summarize and synthesize the findings within the literature, but I want to draw specific attention to a piece of research by Humphreys (2000) due to its centrality to my research interests. Prior to 2002, Humphreys spent three years attending AA meetings with a purpose of understanding meaning making and identity through storytelling. Humphreys found that there was interplay between the community narrative of AA and the individual personal life stories of its members. Narrative was rooted in the belief that alcoholism is rooted in self-centeredness and grandiosity. Themes from the personal identity stories shared in the rooms he attended personified AA’s goals of creating a state of spiritual peace, humility, accepting human limitations, coming to believe in a higher power, self-examination, atonement for past wrongs, spiritual reflection, and service. These goals fortified the belief in AA that the most destructive aspect to sobriety is resentment. This research also found five different themes to stories told.

The first theme was the drunk-a-log; these stories essentially encapsulated what one use to be like, what happened, and what they are like now; characteristics common to this line of story included: initial problems, job loss, marriage problems, maladaptive relationships, hitting rock bottom, incarceration, medical problems, and suicide attempts. The second theme was the serial story. Serial stories are brief accounts following a theme or step of the program (one of the 12-steps); serial stories are also known as multi-vocal stories, or a weaving narrative. The benefit of such stories is social reinforcement. This happens when one member validates another members experience through shared story. The third type of story is the apologue. The apologue is a story that embodies an explanation for why a particular procedure or tradition is present in AA. The fourth type of story is known as a legend story. In a legend story examples of miracles
worked in the rooms of AA are discussed. This is essentially a reinforcing history of faith, hope, amazing experiences, and the disasters that have occurred when one feels they don’t need the program anymore; legend stories create a sense of belonging to a valuable community. Lastly, the fifth type of story is humorous stories. These are stories about one’s life as an active alcoholic. This type of story is also known as ego-punching or self-parodying. This type of story validates the importance of humor and humility in recovery. The findings of Humphrey’s research are concordant to other qualitative research reviewed on identity development in recovery (Boisvert, Martin, Grosek, & Clarie, 2008; Groh, Jason, & Keys, 2008; Humphreys, 2000; Prussing, 2007; Wiklund, 2008).

I also reviewed a body of qualitative research on the development of spirituality in recovery. Although this theme is further explained later, the most common theme of spirituality in the research was peer and community support. Examples of the benefits of peer support identified in the literature include community affiliation, self-determination, supportive behaviors, and quality of life. Self-determination, meaning an ability to decide, and follow that decision, is frequently written about in the literature as one of the greatest preventative characteristics against relapse. Spiritual values pertinent to recovery include trust, respect, honesty, openness, helpfulness, leadership, integrity, willingness, and sobriety. Goals of spirituality in recovery, as discussed in the literature include shared experiences, giving hope, teaching each other, leading by example, social integration, and community building. One of the most frequent behaviors described as promoting spirituality was helping another alcoholic, which is the fifth tradition (and 12th step) of the program (Boisvert et al, 2008; Humphreys, 2000; Koenig, 2008; Mohatt, Rasmus, Thomas, Allen, Hazel, & Marlatt, 2007; Prussing, 2008, 2007; Tucker, 2007, Wiklund, 2008).
There is an abundant amount of literature on the use of the arts to promote spiritual experiences. Most of this literature has been produced from the field of adult education, medicine, and the holistic arts fields, and is related to health and well being. According to Koenig (2008), by the year 2000, over 1200 studies had been published relating spiritual arts and health; approximately 70 percent of these articles were about mental health, and most of this research followed a quantitative methodology. Qualitative literature on art and spirituality describe art as a deeply emotional experience, which is perceived both through the creation and viewing of art. This research delineates art-based ways of knowing and learning from the more culturally prized rational ways of knowing (e.g., logic, rules, reason). The benefits of learning through artistic ways of knowing include: no preoccupation with outcomes, an ability to experience the world in more holistic ways (self, others, the world around us), and that art invites conversation with the viewer (Goldstein, 2007, Koslander & Arvidsson, 2006; Lawrence, 2008; Sharoff, 2007). Lastly, art is also described as associated with transformative learning: “witnessing art expands our worldview by taking us to new places and allowing us to enter into the lifeworld of another” (Lawrence, 2008, p. 75).

Arts have also begun to emerge in the treatment of alcoholism and other addictions over the past decade. Unfortunately, the use of arts as a therapeutic medium appears to be viewed as a modality that is subordinate to more traditional therapies, such as cognitive-behavioral or psychodynamic therapy. Professional treatment programs are not able to recognize the full spiritual and preventative capacities of art, in that therapeutic art procedures are typically only used as a small, discrete aspect of treatment. This leads the practice of art to be taken less seriously as being symbolic of identity and cathartic of change (Prussing, 2007; Tucker, 2007; Wiklund, 2008)
**Spirituality in Learning and Development**

**Defining Spirituality**

Palmer Parker has written extensively on the topic of spirituality, specifically in adult education, throughout his accomplished career (1993, 1998, 2004, 2008). At this point it is my goal to highlight what Palmer, and other noteworthy academics in the fields of adult education and psychology offer towards a construction of what spirituality is, drawing comparison to the oftentimes confused constructs of religion, and faith. “Religion is based on an organized set of principles shared by a group, whereas spirituality is the expression of an individual’s quest for meaning” (English, pg. 1, 2004). Similarly, Tisdell (2003) provides a succinct list of guides offering delineation and definition contrasting spirituality and religion.

Spirituality and religion are not the same, but for many people they are inner-related… spirituality is about awareness… honoring wholeness… the interconnectedness of all things… fundamentally about meaning making… constitutes moving toward greater authenticity… about how people construct knowledge… (and) most often happen(ing) by surprise. (p. 28-29)

Parks (2000) somewhat broadens this construct of spirituality to include the words ‘spirit’ and ‘soul’ common to academic text (see also Dirkx and Palmer). Parks utilizes these words to further explore ways to talk about human experience including: “mystery, moral purpose, transcendence, intuition, vulnerability, tenderness, courage, and capacity to love” (p. 16).

The distinction between spirituality and religion are common in more recent academic contributions (Chickering et al, 2006; Palmer, 1993, 1998; Tisdell, 2003). In Palmer’s writings on spirituality he also commonly speaks of soul. He describes soul as an entity that diverges across belief systems. For the Buddhists it is described as the ‘original nature’ or ‘big self’; for Quakers it is described as the ‘inner teacher’ or ‘inner light’; the Hasidic Jews identify it as the
‘spark of the divine’; in 12-step mutual aid groups it is named ‘higher power or God’; and the humanist name it identity or integrity. Regardless of organization, common features of soul include aspects that keep us grounded in our own being, connected with our community, a means or understanding of our community, a way to understand ourselves, and our lives. Soul is often shared through the authentic human process of storytelling, commonly symbolized through the use of paradox and metaphor (Palmer, 1993, 2004).

Tisdell (2003) gives a thorough conceptualization of spirituality in learning by reviewing her own research and contributions from other noteworthy academics in her book, *Exploring Spirituality and Culture in Adult and Higher Education*. In theories of learning and development conceptions of stages of phases are predominant (e.g., Kohlberg, Erikson, Piaget, Perry). Tisdell describes conceptions of spiritual ways of knowing stemming from earlier works of Kohlberg and Piaget, and significantly expounded upon by Fowler, leading up to a spiraling mode of learning (in contrast to stage or phase theories of learning and development). The process of spiraling back integrates the rational and cognitive, affective, and unconscious/symbolic (as discussed by Fowler). Fowler identified the unconscious/symbolic as a limitation to the earlier works of Piaget and Kohlberg; the unconscious/symbolic was also written about by psychiatrist Carl G. Jung (Tisdell, 2003, 2008).

Spirituality is currently a very popular (and political) topic. Mutual-aid groups, which are grounded in spiritual principles, have become very prevalent as means of self-help; popular culture books on spirituality and religion continue to be very fashionable in the media. In Tisdell’s (2003) review of literature seven themes of spirituality were found. I briefly review these themes and conclude by contrasting spirituality with a definition of religion. First, spirituality and religion are not the same; religion implies an organized community of faith with
doctrine, guided by regulatory behavior. Second, spirituality encapsulates awareness, being present, and honoring wholeness. Tisdell describes this to include: self-awareness, a sense of inter-connectedness of all things, a relationship to a higher power or higher purpose, and energy that happens through everything, and/or something that is beyond human understanding. Third, spirituality is entirely about meaning-making. To this end spirituality is a means to guide overall life purpose and life choices, moves individuals in specific vocational directions, and can be individual (inner-work), or about social justice (outer-work), as described by Matthew Fox.

The fourth aspect of spirituality is very important to the experience of adult learning, and this is that spirituality is always present in the learning environment. Spirituality is not always recognized in the learning environment, and I am not advocating that it should be, but spirituality has the potential and ability to be integrated into any learning environment; this does not imply that facilitators of spiritual ways of knowing should necessarily use the words ‘spirituality’ in the classroom, or learning environment. Fifth, a constant goal of spiritual ways of knowing is moving towards greater authenticity. Vella (2000) discusses the concept of metanoia, which is the movement from alienation to deeper awareness; this happens as one grows, or spirals back to their authentic self (which is discussed in the literature as being fairly common for many individuals, but specifically for individuals of marginalized culture). Individuals also move towards greater authenticity by changing how they view self and world; when one defines self (rather than accepting others expectations, which is a construct of higher development according to Kohlberg’s moral development), authenticity has been found to be strongly related to culture, and may be related to theism. Cranton also describes some of these tenets as being pertinent to authenticity, but not necessarily with relation to spirituality (Cranton, 2006; Tisdell, 2003; Tisdell & Tolliver, 2003).
The final two themes of spirituality, as discussed by Tisdell (2003) include: spirituality being about knowledge construction through unconscious and symbolic processes (which is a function of Fowler’s faith development theory), and the theme that spiritual experiences happen quite commonly by surprise. Extrapolating on the sixth theme, unconscious and symbolic processes include the role of imagination in knowing, which include image, symbol, music, art, metaphor, and ritual, Heron further discusses the role of the imaginable, in contrast to fantasy, through a construct of presentational knowing. In the seventh theme of spirituality, being the element of surprise, the literature describes this process including one catching a glimpse of wholeness in their life, having moments of clarity (as discussed in the AA literature), relating to the inter-connectedness of all things, and that spiritual experiences not being planned (A.A. World Services, 2001; Dirkx, 1997; Fowler, 1986, 1991; Tisdell, 2003).

In William James’s historic text *The Varieties of Religious Experience*, he writes about how religion and spirituality may intersect, but not necessarily. Interestingly, Tisdell (2003, 2008) comments in her writing how should this text be written today, it may more aptly be titled ‘The Varieties of Spiritual Experience.’ Given the research that I have encountered comparing and contrasting spirituality and religion, it is probably about as common for religion to include a personal definition of spirituality, as for the two to be held by an individual as discrete constructs. As briefly noted earlier, and as defined by Tisdell (2003), religions by definition include: organized communities of faith, discussions of what constitutes salvation or a right or correct way to live, fundamental to broad interpretations of a belief system, an official creeds as determined by those within the religion in authority or power, and including hierarchies of entitlements. Marxist thought criticizes religions as being ‘opiates for the masses’, although this less then desirable description of religion from a historical and modern standpoint is more
accurately connected to religion and political or social oppression. Religion, in alternative to this
description, have served as meaningful ways of accessing the sacred, instilled a strong sense of
community, given people strength through difficult transitions, and provide ritual to human
experience (Tisdell, 2003; Tolliver & Tisdell, 2006).

**Identity Development through Spirituality**

Spirituality is not an aspect of identity, but rather has the potential to encompass all aspects of identity. Spiritual ways of knowing is a worldview, a way in which one makes sense of their past experiences, a lens, and through which one filters their past, present, and future experiences. Spirituality is an internal process through which one develops an identity (inner-work); spirituality is an external process in how a person acts and is viewed by their community (outer-work). All the parts of spirituality, how one constructs and deconstructs knowledge, and spiritual ways of learning plays a role in ones identity development. How one makes meaning of their past experiences, and their use of language to understand and create metaphor and paradox, will become a part of their identity.

In reviewing the spiritual development and spiritual identity literature several opening questions can be pondered. Is spiritual development inherently separate from other forms of development (e.g., cognitive, moral, psychosocial, etc.)? Is spiritual development something entirely different from these other forms of development?

Although there are no definitive answers to these questions, research over the past decade points to spiritual development being either integrative or spiral, rather than linear, as is common in stages and/or phases. As stated in the beginning of this essay, Robert Kegan (although not discussing spirituality) discusses an assumption of spiraling, in his developmental theory of
meaning making. Kegan states that with development one has more ways of organizing experience into complex systems of mind (Kegan, 1982; Tisdell, 2003). Another noteworthy (again, not necessarily discussed in relation to spiritual development), Mary Catherine Bateson, describes adult development and learning as a spiral; she defines spiral learning as manifesting through ‘shimmering moments,’ where one makes new meaning out of old events. Lastly, along these lines, Ken Wilber describes eight general stages to development, one of which is spiritual. Wilber describes ‘flowing waves of consciousness unfolding’ in his integrative and spiraling model, although he refers to stages.

In my review of the literature there also appears to be an abundance of literature from the circles of psychology offering explanation and insight into spiritual development. Some prominent contributors to learning and identity through spirituality have already been identified (e.g. Carl Jung), whereas others have been identified who are associated to our understanding today of psychological identity development in relation to spirituality (i.e., Kohlberg, Piaget, Erikson), although at the time these contributors did not appear to be addressing spirituality as a construct. Throughout my review of psychological journals I found Paul Wink to have contributed much to the discussion of spirituality, religion, and health (mental health). Wink discusses spirituality and religious practice as it relates to life course, aging, generativity, seeking, personality, authoritarianism, psychosocial functioning in late adulthood, etc. Specifically Wink and associates looked at these constructs with regard to how they related to satisfactory and adaptive maturation and life course (Dillon & Wink, 2004; Wink, 2004; Wink, Ciciolla, Dillon, & Tracy, 2007; Wink & Dillon, 2008; Wink, Dillon, & Prettyman, 2007).

Generativity, a term initially promulgated by Erikson, in reference to adult psycho-social development, references a movement towards creating something (e.g., an idea, person, concept,
structure, etc) that will outlast that person’s years, and exemplify the contributions they made in their lifetime to society; as a developmental process generativity exists on a spectrum in opposition to stagnation. In a piece of research conducted by Brelsford, Marinelli, Ciarrochi, & Dy-Liacco (2009) the role of spiritual disclosure was investigated, as it pertained to processes of generativity. In this research spiritual disclosure, a process that is commonplace at AA meetings and in interpersonal communication between members, was defined as: “the disclosure of personal religious and spiritual beliefs and practices between people” (p. 151). This research identifies the vast amount of research pertaining to intrapersonal communication within the discourse of psychology and religion, but very little research with regard to interpersonal communications.

According to this quantitative research study the following findings were made: spiritual disclosure was significantly positively related to generativity, intrapersonal measures of religion and spirituality, and all five factors of personality; additionally generativity was positively correlated with spiritual disclosure, general self-disclosure, intrapersonal measures of religion and spirituality, participant reports of spiritual experiences, and private religious practices. The findings of this research are noteworthy to this dissertation for numerous reasons including: spiritual disclosure is a process encapsulated in ones recovery program through meeting participation and working with ones sponsor; generativity is identified as a positive growth potential and represents a fuller representation on citizenship and one being a contributing member of society. The purpose of being a member of Alcoholics Anonymous is to give one a life worth living outside of the rooms of the program; this again represents a process of generativity.
To compare and contrast the psychological literature with the education literature, there appears to be a much greater preponderance of studies utilizing quantitative methodologies within the discipline of psychology. In the psychology literature it is common to see correlation data between state/trait personality factors found to be characteristic among religiosity/spirituality in relation to health outcomes; in relation to this, it also appears to be more common for spirituality research in psychology to utilize scales or assessment for the purpose of measurement. More recent research in the field of psychology and neuroscience appears to be also searching for observable measures of health benefits to religiosity/spirituality. This is evidenced through the use of advanced imaging devices, such as functional MRI and PET scans to attempt to isolate areas of the brain active during spiritual/religious-related activities. Currently this is a highly political topic as to whether religiosity/spirituality can be measured, and whether the results are scientifically valid. One example of this was completed by Giordano (2006) addressing neural and cognitive factors in spiritual experience.

In conclusion to this section on spiritual development and spiritual identity development, I would like to dedicate some time to reviewing the work of James Fowler. Fowler (1981) developed a six-stage theory of faith development based on his study of 359 people. A limitation of Fowler’s study population, with regards to the applicability of the results cross-culturally, is that approximately 97% of his participants were white and Judeo-Christian in religious orientation. This aside, Fowler’s work has been one of the most informative to current understandings of spiritual and faith development. Informed by religious traditions, Fowler intuitively advanced our understanding of unconscious and symbolic ways of knowing, drawing heavily on the work of Piaget and Kohlberg (Tisdell, 2003).
Fowler’s (1981) first two stages of faith development were not discussed by Tisdell (2003), and will not be discussed here, in that they pertain specifically to childhood. These stages, respectively, are intuitive projective faith, and mythic-literal faith. Fowler’s third stage of faith development is synthetic-conventional faith. This stage is described as occurring through adolescence, where one pulls together pieces and synthesizes them into a coherent whole. The conventional aspect of this stage ensues beliefs being based on the approval of significant others and authority figures; in this stage beliefs and values are unexamined and accepted (Tisdell, 2003).

Fowler’s fourth, fifth, and sixth stages of faith development are specific to adulthood. The fourth stage, individuative-reflective faith occurs in early adulthood. Indicative of this stage is the process of life circumstances presenting dilemmas; based on these dilemmas the individual must make critical choices, which will later define their faith and identity. In this stage there is an inter-relationship between the direct influence of significant others and one determining their own beliefs and value systems. It is not entirely uncommon in this stage for young adults to move away from their childhood religious belief systems.

Conjunctive faith, the fifth stage of Fowler’s faith development is characteristically described as occurring in adult midlife. In Tisdell’s (2003) study of adult educators, she states that most of her study participants resided in this stage; Tisdell’s study population had individuals ranging from their thirties through their sixties in chronological age. A definitive characteristic of this stage is the ability to hold the tension of opposites (stability in addressing and working with paradox); critical reflection is indicative of this stage. Adults in this stage are capable of having a sureness of their own belief and value system, holding conjoined traditions with their own, and are able to see multiple points of view as valid. The sixth and final stage of
Fowler’s faith development, which is likely uncharacteristic of what most adult will experience in their lifetime is universalizing faith. Only one individual in Fowler’s sample was described to be in this stage. This stage is described as a universalizing concern for all humanity; the realization that all are one in God (Tisdell, 2003, 2008).

In concluding this discussion on Fowler’s faith development theory it is important to mention that it is probably more likely that individuals will possess parts of several of the stages. This is inherently what Tisdell, Bateson, and other noteworthies are describing in the process of spiraling. Spiraling assumes a back and forth movement between stages, but in general an individual is probably more apt to possess more characteristics from one specific stage. As previously stated from Tisdell’s research, most of her study population was described to fall in the conjunctive faith stage. Again, it is important to reiterate that one of Fowler’s greatest contributions was on how people/learners construct knowledge through image and symbol (Tisdell, 2003, 2008).

I conclude this section by addressing what the discourse on spiritual development offers spiritual ways of knowing in identity. As discussed by Tisdell, and others who advocate for culturally relevant learning, identity is a very culturally specific process; essentially identity is informed by culture. Culture influences one’s thinking about the world, is impacted by the amount one has travelled or had exposure to other cultures (cross-cultural exposure), degree of exposure to higher education, involvement in social and/or political movements, or one’s involvement with the culturally-different. Identity development, with reference to spirituality, involves questioning the way one was socialized, may involve transitioning through theistic and atheistic meaning-making schemes, and involves a process of spiraling back to childhood or other previous life experiences. Many different life events are indicative of identity development;
life crisis has been found to be specifically related to prompting spiritual search and identity
development. Some examples of crisis may include: addiction (e.g., drug, alcohol, work,
materialism, food), a health crisis, or major life transition (e.g., having to enter the workforce,
divorce, death of a spouse or parent). Spirituality development is strongly related to one finding a
more authentic identity, which occurs through a process of searching for wholeness (Tisdell,
2003, 2008).

Throughout this chapter a few relevant developmental theories have been discussed with
reference to spiritual learning and meaning making. Other theories to be considered in expanding
this research should include Pamela Hays (2002) ADDRESSING model and Baumgartner and
Merriam’s (1999) model of identity development through personal stories. Hays model is a
holistic viewpoint of attempting to understand or work with the culturally-different. Historically
it has been utilized in educational and psychological/therapeutic settings. I was first introduced to
Hays’s (2002) model is a culturally competent counseling course I took as part of my masters
degree curriculum. Baumgartner and Merriam’s model on narrative learning may have some
specific application to the methodology of my dissertation research, given the importance of
storytelling to identity development in Alcoholics Anonymous.

**Spirituality and Learning**

Although the field of Adult Education has not contributed significantly to knowledge in
the field of addiction and recovery specifically, many on the tenets from adult and higher
education are application to treatment in both formal and non-formal settings. In what follows
through this chapter I present a review of the literature from the field of adult education, as it can
be conceptually applied to learning and meaning making in recovery from addiction. Specifically
I look at developing a review of the literature as it pertains to spirituality and learning, spirituality-based identity development, transformative learning theory, and spirituality and recovery.

**Conceptualizations of Learning through Spirituality**

As described by Robert Kegan in *The Evolving Self*, the purpose of being human is to make meaning; humans learn to make meaning from their first relationships with their care providers, through experience (Kegan, 1982). Although Kegan does not write about spirituality in his research, he does draw us into the purpose of spirituality, being meaning-making, and the understanding of experience. It is an impossibility to define what is going to be a spiritual experience for an individual. This being said, according to the literature, spiritual experiences tend to have the common denominators of being unexpected, arising from one being out of his or her element, generally involving one making a decision to do something outside of past experience and comfort range (Daloz 1999; Nouwen, 1975; Palmer 2008).

This road less traveled, moving forward in moments of uncertainty, possibly setting aside acts of reason, leads us to a common feature of spiritual experiences… paradox (Chickering et al, 2006; Daloz, 1999; Dirkx, 1997; Palmer, 2008; Parks, 2000). The ability and willingness to explore this mode of development is described by Fowler in his fifth stage of faith development (conjunctive faith), which is further discussed later.

Historically, both spirituality and religion have had a home in adult and higher education. Leona English (2005) provides a beautiful account of the role of spiritual/religious workers, especially with regard to social justice and human rights activism. English’s account was especially helpful in bringing my understanding of the contemporary position of spirituality in
the field of adult education. To this end, it almost seems as if the impetus for the creation of this
field, both nationally and internationally, have been silenced by fears, politics, and hegemonic
thought on the purpose and application of spirituality in the classroom today. I believe there is a
strong desire by adults, and adult learners, to integrate the parts of self that make up the spiritual,
into their knowledge and meaning creation/construction. I believe this is evidenced by the
popularity of spiritual-based self-help groups and resurgence of literature in the field on the topic
of spirituality and religion. There appears to be growing body of spirituality literature in adult
education, especially in the domains of experiential and transformative learning, as well as in
healthcare/medical fields. This is evidenced by the body of research reviewed by Koenig (2008);
Koenig cites numerous quantitative studies detailing patients’ desires to have their spiritual needs
defines as spirituality may, more aptly, according to definitions in the field of adult education, be
religion practice.

Circling back to the body of literature that makes up spiritual ways of knowing in adult
education, there is also an area of knowledge describing what makes up spiritual experiences. As
discussed by Tisdell (2003) in her own research and across other research on the nature of
spiritual experience, four culturally-related forms of spiritual experiences are identified:
experiences based on physical or emotional healing, dreams, synchronistic experiences, and
wholeness experiences. The first of these experiences are commonly described as being related
to prayer practice or meditation. They may be described as miraculous, and accompany a lack of
rational explanation. The second of these experiences, dreams, are quite commonly described
within spiritual experiences. This was found both within Tisdell’s research on a population of
male and female adult educators with relation to spirituality and culture, and among spiritual
learning as a whole. Fowler and Jung also comment on dream experiences as being: full of symbols, helping one to make decisions, the unconscious narrating through to the conscious giving further meaning, seeming predictive… aiding in a life decision… and promoting healing. These experiences as described by Tisdell (2003) frequently happen in a time of conflict, and as the person works through the conflict it is found that the dreams provide healing and reassurance.

The third type of spiritual experience described is the synchronistic experience. The literature describes these as uncanny coincidences. My personal understanding of coincidences is that they do not exist, therefore for my own spiritual learning synchronistic events are entirely spiritual, and encapsulate my theistic belief system offering guidance and oversight. Some may relate such experiences to déjà vu moments; it is also common for synchronistic experiences to include dreams. Lastly, as described by Tisdell (2003), are wholeness experiences. A number of individuals in her study describe life circles events (e.g., birth, death, close-calls) as speaking to the miracle of life, instilling a belief in a second chance, or bearing witness to an amazement of human experience (i.e., birth of a child), which are also described as cosmic events. Other wholeness events as described in the literature include the majestic qualities of nature instilling a personal connection to all things in the awe of creation. This construct is written about by eco-theologian Thomas Berry as ‘the wild and sacred connection.’

**What this Suggests for Adult Learners in Recovery**

Attention has been given to developing a definition of spirituality, elaborating on ways that spirituality has been witnessed in learning, and by demonstrating how story is an essential aspect of identity development. Social life stories and/or narrative identity stories serve as a natural medium for persons in recovery who are working a spiritual-based program, such as Alcoholics Anonymous or Narcotics Anonymous. Story is an integral part of the fifth tradition of
AA, which states that the primary purpose of AA is to carry the message to the alcoholic who still suffers. Story and spiritual ways of knowing and learning are also part of each of the 12 steps in mutual-aid programs.

**Transformative Learning Theory**

According to Cranton, transformative learning is described as a simple process, but as it is stating in the discourse of Alcoholics Anonymous, simple does not always insinuate easy. As previously stated, TLT was first introduced as being a cognitive process that is rational and conscious in nature. Since the time the theory was introduced other researchers have come to write about transformation occurring through other means. For example, Cranton (2002), Dirkx (1997, 2001), Grabove (1997), Tisdell and Manley (2006), and Taylor (2001) write about a process of transformation that is non-linear, intuitive, emotional, and not based on factual knowledge, or reason. Originally, the rational and the emotive were operationalized as two dichotomous events that really do not have interplay with each other. Initially, emotion was described as an aspect of the self that was inherently a barrier, or ‘baggage’, to learning (Dirkx, 2001). As the theory has developed the rational and the emotive have been described to have common purposes within TLT including: humanism, emancipation, autonomy, critical reflection, equity, self-knowledge, participation, communication, and discourse (Erickson, 2007; Grabove, 1997). Essentially, these two modes of meaning creation are described to occur in concert, or as one becomes more accessible to their own learning styles or personality (Cranton, 2002). Cranton also describes how learning utilizing the rational and emotional can occur through a spiral effect.

Regardless of whether one learns through an intuitive/emotional process, or whether it is through a rational/cognitive process, TLT describes transformation occurring
through critical reflection. This is the result of a disorienting dilemma, or trigger event, across ones’ frame of reference, habit of mind, and point of view, within a specific discourse (Cranton, 2002, 2006; Mezirow, 1997, 1998; Taylor, 1997, 2007, 2008). According to Mezirow, a frame of reference is described as ones’ associations, values, feelings, and conditioned responses that come to be known as a life world. Essentially, these are ones’ structures of assumptions. The habit of mind is described as a:

> Broad, abstract, orienting, habitual ways of thinking, feeling, and acting influenced by assumptions that constitute a set of codes” that can be cultural, social, educational, economic, political, or psychological (Mezirow, 1997, p. 6).

According to the literature (Cranton, 2002, 2006; Grabove, 1997), not all learning is transformative, nor should it be, but all learning has the potential to be transformative. Hill (2005) and Ross-Gordon (2002) describe all learning to have three components including culture, context, and content. To this end learning is described to involve identification with a community, and to be a social and cultural event. The aspects of knowledge and skills in the learning process are viewed as being less important than the context; all learning, and teaching, is socially constructed (Cranton, 2002; Hill & Johnston, 2003). Although, not all learning is transformative, there are specific modalities that a facilitator can utilize to promote transformative learning (Cranton, 2006; Dirkx, 2006; Taylor, 2007; Tisdell & Manley, 2006).

Critical reflection is the basis of transformative learning. This process occurs through an examination of a particular discourse by an individual or group (Cranton, 2002; Mezirow, 2003; Taylor, 2007, 2008). Discourse as defined by Mezirow (1997) is “a dialogue devoted to assessing reasons presented in support of competing interpretations, by critically examining evidence, arguments, and alternative points of view” (p. 6). According to Boud (2001) critical reflection occurs through the process of reflective practice, which is the process of working with
and through events and experiences. The purposes of reflective practice include: improving what we do and how we do it, improving the quality of our learning, developing understand of the process of learning, and enhancing our practice of self-empowerment, understanding, and creative interaction.

Learning is interpreted through ones intuition or rational abilities; activities of writing, prayer, meditation, discussion, and dreaming have been described as being facilitative of this process (Boud, 2001; Clark, 2007; Clark & Rossiter, 2008). More specifically, research by Hill and Johnston (2003), Dirkx (1997, 2001), Cranton (2002, 2006), Davis-Manigaulte, Yorks, and Kasl (2006), and Lawrence (2002) has described modalities that facilitators utilize to promote or ‘foster’ transformative experiences among adult learners. Some of these modalities include: providing a safe and supportive environment for learning, questioning ourselves, writing autobiographies, challenging beliefs, assumptions and perspectives, and exposing adult learners to alternative viewpoints. Mediums utilized to foster this process include: the use of metaphors, symbols, and images in films, documentaries, novels, short stories, poems, and journals (Cranton, 2002; Scott, 1997; Taylor, 2008; Tisdell & Manley, 2006; Yorks & Kasl, 2002).

Taylor (2008) has conceptualized and synthesized the most current viewpoints on this theoretical perspective. “It is transformative learning theory that explains this learning process of constructing and appropriating new and revised interpretations of the meaning of an experience in the world” (p. 5). According to Taylor (2008) this is a theory that is grounded in human communication where one’s prior interpretation of an event, experience, or relationship is used in the creation of a new interpretation. The purpose of transformative learning is to facilitate a perspective transformation, which is described as a paradigm shift of consciousness, to a more
fully developed, and mature, frame of reference. This development in learning is described as being more inclusive, differentiating, permeable, critical, and integrative (Taylor, 2008).

Historically, transformational learning has been described to occur incrementally over time, through a course of events (physical or mental), or epochally, through one grand life altering event. Cranton (2006) in her book, *Understanding and Promoting Transformative Learning*, provides some examples of epochal and incremental learning: a traumatic event that initiates careful exploration or lays dormant for a while gradually leading to change; a questioning of positive events leading to a questioning of one’s habits of mind; a disturbing event that leads to a sudden change of beliefs; or an unnoticed, gradual change that leads to transformation through a later process of retrospective thinking. Regardless of chronology, this process involves a questioning of one’s core existence involving both conscious and/or preconscious levels of thinking and feeling, of justifying beliefs and becoming a more authentic learner (Cranton, 2002; Scott, 1997; Sinnott, 2005; Taylor, 2008).

As transformative learning has matured as a theoretical perspective, since its establishment by Mezirow in 1978, its discourse has developed into specific lenses. Taylor (2008), Merriam (2001), and Baumgartner (2001) have discussed these lenses in their respective publications. Individual dimensions of transformation are described through psycho-critical, psychoanalytic, and psycho-developmental lenses. TLT has also been discussed from an intrapersonal standpoint through a social emancipatory lens, originally discussed by Friere (1984), involving learning through social equity, ‘conscientization’, and anti-hegemonic purposes to resist and counteract oppressive thought and power. More recently Taylor (2001, 2008) has discussed the growth of newer lenses of learning including the neurobiological, cultural/spiritual, race-centric, and planetary perspectives. At this point I take a closer look at
two different perspectives: Mezirow’s psycho-critical lens, and a cultural/spiritual lens, followed by my own conceptualizations of this theory.

**Mezirow’s Psycho-critical Lens**

The field of transformative learning has grown substantially over the past decade. Taylor (1997, 2007), who is viewed by many in the field as the biographer of this theory, conceptualizes shifts and themes within the theory. In his original review of the literature in 1998, which involved looking at approximately 40 dissertations, Taylor found that TL was effective at capturing the meaning-making process of adult learning, that critical reflection was essential for transformative learning, and that publications within the theory had relatively little investigation on how to foster TL. In 2008 Taylor completed an updated review of the TL literature. This review demonstrated an explosion in publications within the theory; this review was based on the results of 41 peer-reviewed empirical, qualitative journal articles. He found that the primary conceptions within the theory utilized Mezirow’s psycho-critical approach, depth psychology (see Dirkx), and/or a critical/emancipatory approach (see Friere). Briefly reviewing Taylor’s (2007) findings, it was found that the primary purpose of the theory was to inform practice, that most studies took place in formal settings, that essential components of the theory included: self-reflection, relationships, and context, and that research designs within the theory were becoming more complex (Taylor, 2008).

My conceptualization of Mezirow’s psycho-critical theory is based on a review of the following sources: Mezirow (1997, 2003), Dirkx, Mezirow, and Cranton (2006), Merriam (2004), and Taylor (1998, 2007, 2008). According to Mezirow, TL is learning that transforms problematic frames of reference. The base unit of Mezirow’s theory is the individual; this conception is based on a logical/rational, cognitive, constructionistic view of learning through the use of discourse, and an interpretation of experience, values, thoughts, and beliefs; the
impetus for transformative learning is a trigger event, followed by a period described as a disorienting dilemma; critical reflection and critical judgment are viewed to be essential to the process. In Mezirow’s earlier writing he described three types of reflection, including content, process, and premise reflection. Content reflection is a description of the problem; process reflection is a review of problem solving strategies use; premise reflection takes place when the problem itself is questioned (Cranton, 2006). This learning theory is one that is viewed to be inherently adult, requiring higher developmental reasoning, which are discussed by Merriam (2004) to be formal operations; this would ensue that all adults are not capable of transformative learning.

Transformative learning is described by Mezirow to require critical thinking where awareness is developed through a meta-cognitive process. The purposes of TL is to understand meaning in the experiences of adults, to develop autonomous thinking, to effect change in frames of reference (e.g., associations, values, feelings, and conditioned responses), and the goal of learning is to develop socially responsible acting citizens. The goal of educators is to foster awareness, help learners to identify frames of reference and effectively utilize discourse, and to synthesize points of view. Learning is accomplished through problem posing and solving. Key points to Mezirow’s conceptions of TL is that this process is focused on the individual, primarily utilizes a thinking function to learning, and is based on an interaction of discourse, experience, and incompatible frames of reference with regard to current learning. Mezirow views TL to occur epochally or incrementally.

Mezirow’s original theory of personal perspective transformation published in 1975, based on a study of 83 women returning to college in re-entry programs encapsulated 10 specific phases: experiencing a disorienting dilemma, self-examination, critical assessment of internal
assumptions, relating assumptions to similar experiences of others, exploring options of other ways to act, developing new roles, planning an action curriculum, acquiring new skills to act, experimenting with new roles, and integrating the new roles in a community (Cranton, 2006). Mezirow’s conceptions do not emphasize the importance of culture, the affective, or context.

**Cultural/Spiritual Conceptions of TL**

Over the last several decades a growing body of literature on spirituality has promulgated within the adult education and depth psychology literature. Specifically, there appears to be a preponderance of literature with regard to spirituality and identity, and spirituality/religiosity and health. Spirituality, from an international standpoint has become more accepted and utilized to foster learning in formal and non-formal adult learning settings, and spirituality-based mutual-aid groups, such as Alcoholics Anonymous, have become increasing recognized as beneficial means of social support, especially from the professional treatment community and criminal justice systems. Although these authors provide an excellent framework on spiritual ways of knowing I have chosen to narrow my discussion of culture/spirituality in transformative learning to the authors in the field who specifically make those connections (Baumgartner, 2001; Boud, 2001; Daloz, 1999; Davis-Manigaulte, Yorks, & Kasl, 2006; Dirkx, 1997, 2001, 2006; Dirkx et al, 2006; Hill & Johnson, 2003; Grabove, 1997; Palmer, 1993, 1998, 2004, 2008; Parks, 2000; Titchen & Manley, 2006; Tolliver & Tisdell, 2006; Taylor, 2008).

According to the above cited authors, the cultural/spiritual conception of TL shares commonalities and essential differences with Mezirow’s original theory. Some of the essential differences between this lens, and a psycho-critical lens is an interpretation through a whole-person way of knowing (e.g., emotions, intuition, imagination/fantasy, soma (body), spirit, socio-cultural aspects (such as disability, sexual orientation, or gender), relationships, expression (such
as music, poetry, journaling, storytelling, guided imagery), and the rational/cognitive. To cite an example of this, in Tolliver and Tisdell (2006), Derise Tolliver, an African-American clinical psychologist by trade, writes a beautiful poem embodying how she integrates self (authenticity) into all that she does as a knower, learner, and educator. The following quotation describes the benefit of whole-body knowing to adult learning.

Engaging learning in multiple dimensions, including the rational, affective, somatic, spiritual, and socio-cultural, will increase the chances that new knowledge is actually constructed and embodied, thus having the potential to be transformative (Tolliver & Tisdell, 2006, p. 39).

Before getting more in depth into a discussion about spirituality (or culture) and transformative learning, it is essential that the reader has an understanding as to how spirituality is conceptualized; this is especially true with regard to how it is conceptualized to be different from religion:

…While most religions are orthodoxies – that is, they adhere to a system of ideas, of rules, or words – spirituality is an orthopraxy: it adheres to a set of practices, through which you can come to your own understanding, not one imposed from the outside (Griffin, 2004, p. 226).

Definitions of spirituality from within the field of adult education are for the most part similar. Dirkx (1997) integrates the term ‘soul’ with spirituality in describing the relationship one has with the broader world. This is a relationship of working through human suffering with our emotional experiences. Tolliver & Tisdell (2006) describe spirituality as a way to make meaning and give meaning, to inform life choices, and to develop a sense of wholeness. Spirituality in the world, and in the classroom is not an organized community of faith, but rather a way to develop a more authentic identity. Spirituality is a medium or process to connect one to culture; cultural mediums, as described in this literature include: image, symbol, music, poetry, metaphor, story, myth, prayer, meditation, dreams, etc. (Boud, 2001; Dirkx, 1997, 2001; Grabove, 1997; Tolliver & Tisdell, 2006).
As described above, there are some inherent key similarities and differences between this lens of transformative learning and the original psycho-critical theory described by Mezirow (1997). A spiritual/cultural lens to TL goes beyond the rational thinking function of learning, as previously described; this conception integrates a full array of human knowing including affect, intuition, imagination, and cognition. Individual characteristics and social/historical contexts are essential to a spiritual/cultural lens of TL. Cultural characteristics such as race, gender, ethnicity, ability/disability, sexual orientation, belief system, and social class are very important to how one comes to make meaning through this lens. Learning as interpreted through this lens is based on connections between individuals and social structures, and is represented by how learners construct narratives as part of a transformative experience. Awareness is represented through the process of story on a personal and social level; transformation occurs with others as one revises their stories and creates new, and more permeable, enduring stories. Cross-cultural relationships are essential to learning through this lens (Taylor, 2008).

A cultural/spiritual lens to transformative learning shares similarities and differences with the original theory proposed by Mezirow. This lens is a process of meaning making inherent to adults based on one’s experiences, thoughts, values, and beliefs. Transformative learning through this lens is viewed to be either epochal or incremental, initiated through a trigger event, and developed through a process of disorienting dilemma. TL as described by Mezirow appears to be more discrete and synchronous, where TL through a spiritual/cultural lens appears to be more developmental across the time of one’s life (Baumgartner, 2001); the metaphor of a ‘journey’ appears to be more applicable here. Although there are no rules or doctrines prescribing spiritual ways of knowing, cultural guides and/or discourse are pertinent to development. Three examples of such discourse could include: the 12-steps of Alcoholics Anonymous, an ecological
relationship with Mother Nature, and/or the 8 Precepts used in Buddhist practice (A.A. World Services, 2001, 2007; Griffin, 2004; Tisdell, 2003)

Across the adult education literature with regard to spirituality/culture and TL three themes appear to be paramount in this learning process: mentoring, authenticity, and community. Mentoring occurs through the relational process of working with another person. Historically, this is a person (the mentor) that is respected by the learner (mentee), possesses a quality that the learner finds desirable, and who can serve as a guide through as specific context. Based on initial research by Levinson et al (1978), and later by Daloz (1999) and Palmer (1993, 2004), mentorship relationships have historically been more common with men, taking place in higher socio-economic status jobs, and typically mentors are about 10 years older (half a generation) then their respective mentees.

Authenticity has been a growing construct in the field of adult education. Cranton (2006) describes a 5-facet model of authenticity including: self-awareness, learner preferences, intra-relational development between educator and learner, awareness of educators’ contexts and restraints, and engagement in critical reflection. As previously described by Tolliver and Tisdell (2006), spirituality is important through learning in ‘multiple dimensions.’ Authenticity allows the learner to encapsulate their ‘multiple dimensions’ of self into all of their communities of practice. Being authentic as a learner and educator is about utilizing all of one’s cultural lenses to interpret their experiences and inform their actions. Authenticity allows one to better understand their own experiences and to utilize a theory of mind in reflecting upon others experiences; authenticity informs critical reflection and critical judgment (Chickering et al, 2006; Cranton, 2006; Dirkx, 1997; Palmer, 1998, 2004; Parks, 2000; Tisdell, 2003; Tolliver & Tisdell, 2006).
Lastly, learning communities, or communities of practice, are frequently written about in the spiritual/cultural realm of TL. Taylor (1998) in his review of the TL empirical literature found relatively little research on fostering transformative learning. The idea of fostering TL and creating community appear to be highly correlated. The spirituality/culture literature in TLT offers numerous frameworks, suggestions, and/or guides in facilitating this process. Three such offerings related to learning include limiting the physical presence of hierarchy in the classroom, instilling a conception of educator as co-learner or guide, and utilizing a seating structure of circles. These conceptions welcome learners to bring their whole selves into the learning environment, to share their experiences, and to be open to the divergent viewpoints of others. In closing this section, I would also like to address two other issues related to community. The first is awareness by the educator on the physical setting of the classroom. Does it bring warmth and communion, or does it appear cold and institutionalized? This is facilitated through the use of circles, but it can also be promoted through such acts as lighting candles, having students bring food/drink to share, and utilizing the arts in learning (journals, painting, music, movement, guided meditation, etc.). The second is recognizing student’s unique attributes, celebrating individuality, and creating an open, trusting, empathic environment for learning (Chickering et al, 2006; Davis-Manigaulte et al, 2006; Dirkx, 1997, 2001, 2006; Grabove, 1997; Groen, 2008; Palmer, 1993; Tisdell, 2003; Tolliver & Tisdell, 2006; Vella, 1994, 2000; Vogel, 2000; Yorks & Kasl, 2002).

Chapter Summary

In this chapter I have presented an overview of the most important theoretical and conceptual attributes of this research. Specifically, this chapter addressed the primary tenets of this research, namely, transformative learning from various perspectives, spiritual development,
and the discourse of the AA program. Specific to these tenets supportive discussion was given to various contributors who have published accounts in support of the thesis of this dissertation. In this chapter I made every attempt to show significance to the current state of mutual-aid programming, while giving due attention to the historical developments of the AA program, since its origination in 1935. Pertinent research from the field of psychology, specific to religion/spirituality, and with regard to addiction science was selected to offer support and contrast to the thesis of this research.
CHAPTER 3

RESEARCH METHODS

The purpose of this study is to explore the role of spirituality and spiritual development in learning and meaning making for HSP’s in recovery; this study will specifically look at the transformative properties of mutual-aid program membership in eliciting this learning and meaning making process. This study utilized both transformative learning theory and spiritual development as conceptual frameworks to gain a better understanding for the process and meaning of this learning. As I describe in this chapter a methodology of heuristic inquiry was used in this study. This methodology was selected for this study as the purpose of this inquiry is to gain insight into the lived experience of learning in addiction for individuals who work in human services. Heuristics is also being applied to this study as my own personal experience is very similar to that of the participation population. In this chapter I discuss several aspects of the study methodology including the research paradigm, research design, participant selection, data collection, data analysis, and verification of the study.

Research Paradigm

In rigorous academic research there are three paradigms or kinds of research: empirical/analytical research, interpretive research, and critical research. This study utilized an interpretive or qualitative research paradigm. The rationale for this methodological decision is based on the purpose of the study. The purpose of this research is to understand the individual and shared meaning of learning in recovery, as it is experienced through the life of the individual.
Prior to addressing the themes of qualitative research I describe how qualitative research is different from its counterpart, which is quantitative research. Qualitative research seeks observations, whether via interview, or through documents. The purpose of the observation is to recreate a detailed description of the people, activities, behaviors, or interpersonal interactions understudy. Documents may include, but are not limited to: program records, anecdotes, official publications, cultural artifacts, etc. In the case of my study the documents will include AA and NA discourse. The vast majority of information in qualitative research comes from data grounded in fieldwork. Fieldwork will typically include talking with people about their experiences, participant observation, and taking field notes to create personal narratives, which are then arranged into themes and/or categories (Patton, 2002).

Quality in qualitative research is developed through the skill, sensitivity, and integrity of the research. A primary difference in qualitative research, compared to experimental research, is that in qualitative research the researcher is the instrument; experimental research utilizes systematized, standardized, pre-determined evaluation tools. Another inherent difference in these two methods is the size of the samples under study. As the aim of qualitative research is to obtain detailed, in-depth personal experience, its design typically only allows for small sample sizes. The design of qualitative research is to study purposes or uses of an experience, and has an intended audience. To this end, qualitative research generally either contributes to knowledge for the sake of knowledge or provides information to generate or test theory (Berrios et al, 2006; Patton, 2002).

Lastly, and primarily, qualitative research has the purpose of giving voice to an experience. In the sociological novel Sidewalk, Mitchell Duneier left his university setting and took to the streets of Greenwich Village in New York City to learn about the lives of the
homeless. Through his experience of bonding with and coming to know the ‘unhoused’ (what the homeless prefer to be called), Duneier was able to produce a written account of the lives of this culture. This is the essence of qualitative research. To accomplish this, qualitative research is not concerned with the statistical accounts of percentages, but rather seeks understanding through open-ended questioning. Open-ended questions serve to demonstrate variability of content, understand a world as experienced by the participant, capture the point of view of another culture, and to reveal the emotional depth, thoughts, and perceptions of individuals or groups. In order to accomplish this task qualitative methodologies have specific needs, which include: the researcher must get close to the experience being studied; the researcher must capture what actually takes place; and descriptions must portray what is seen, not what is judged through the observer (Patton, 2002).

Thematically, qualitative inquiry can be sub-divided into design strategies, data collection and fieldwork strategies, and analysis strategies. First, qualitative inquiry is unique in that it is naturalistic, meaning that as much as possible, research occurs in its native environment. For the purpose of this study, this means that observations occurred in part at mutual-aid meetings; analysis of written documents included literature specific to the formal programs of recovery (AA/NA). This design also is such that it permits that adaptation of inquiry as situations change throughout the course of study; this is known as emergent design flexibility. And lastly, qualitative inquiry utilizes purposeful sampling. As this line of research utilizes a small number of cases it is essential to obtain ‘information rich’ resources/participants. The purpose of this research is not to generalize or extrapolate, but rather to understand deeply the lived experience of the subjects. As stated in Patton (2002) subjects are selected because “they offer useful manifestations of the manifestations of the phenomenon understudy” (p. 45). For the purpose of
this study I specifically selected subjects discretely defined to work within human service professions who self-report recovery through their mutual-aid program.

Second, data collection and fieldwork strategies require that the researcher develop a close relationship with the participants in the study. As this study applied a lens of heuristics, it is inherently important that my personal experiences and insights are critical to the phenomenon under study. And finally, it is also important to the fieldwork and data collection in this methodology for the researcher to employ empathic neutrality and mindfulness. Patton (2002) defines empathic neutrality as “a middle ground between becoming too involved, which can cloud judgment, and remaining too distant, which can reduce understanding” (p. 50). Empathic neutrality permits for the researcher to acquire honest, meaningful, and credible findings to the phenomenon understand by instilling cognitive understanding with an emotional connection. Neutrality implied that it is not this researcher purpose to prove his own perspective, but rather to direct the research in the direction of the findings.

Lastly, it is important for analysis strategies to be discussed as a theme apparent to the qualitative line of inquiry. Several factors are important as part of a practice of rigorous scientific methodology. In order for this analysis to be authentic, trustworthy, and credible it is necessary to recognize that one cannot obtain total objectivity, nor have pure subjectivity. Qualitative methodologies lie in the midst between these two poles. In promoting objectivity, the researcher must realize that each case is special and unique, strive to capture rich details of individual cases, and perform effective cross-case analysis or creative synthesis. Phenomena are understood as part of a complex system and cannot be deconstructed into discrete parts. The researcher must be sensitive to context, and critical not to make unwarranted generalizations across social
boundaries. As discussed in Patton (2002) the researcher(s) must be self-analytical, politically aware, and reflexive in consciousness.

Research Design – Heuristic Inquiry

Heuristic inquiry, grounded within a foundation of phenomenology, strives to answer the question of “what are the meanings, structures, and essences of the lived experience of this phenomenon for this person or group of people?” (Patton, 2002, p. 104). The purpose of this line of research is to get at what the very nature of the phenomenon and to understand what it is. Phenomenology was first described as a rigorous science by Edmund Husserl and Alfred Schutz; Husserl delineated phenomenology as how people describe constructs, and how these constructs are experienced through ones’ senses. Although phenomenology as a descriptive term has been widely used in literature, it has been described by Creswell (2003) as a major qualitative tradition of describing individuals’ and group’s experiences. According to Patton (2002), there are essentially three varieties of phenomenological research, which are transcendental, existential, and hermeneutic. Respectively, these are described as the meaning of an individuals’ experience, the social construction of a group reality, and the language and structure of communication. This research study will utilize an existential narrative approach to data collection and analysis to get at the lived experience of the individual participants, and to draw connections to the shared experience of the group. This is evident in that the purpose of the study is to understand the role of identity in learning, which is a social construction.

Heuristic Research Methods

In heuristic research the focus is “on exploring how human beings make sense of experience and transform experience into consciousness, both individually and as shared
meaning” (Patton, 2002, p. 104). The purpose of this line of research is to describe the shared experience of a group of people; this shared experience will be analyzed based on how it is perceived, described, felt, judged, remembered, and discussed. This process occurs through in-depth interviews and direct observation. Heuristics is inherently different from quantitative research in that truth is not based on scientific fact, but rather truth for the individual, which can be both real and imagined. Truth can be empirically measurable or subjectively felt (Berrios & Lucca, 2006; Moustakas, 1990; Page, 2000; Patton, 2002).

A primary assumption of heuristic research is that what we know must present itself to consciousness. Essentially what this means is that the subject cannot be in the midst of an experience; heuristics is not introspective, but rather retrospective, in that it is a reflection on experience. According to Patton (2002) experiences described in the literature have included emotions, relationships, programs, organizations, and cultures. This process of reflection within the tradition of phenomenology, where heuristics has its’ roots, is described as a three-step process. First, one gains understanding from a sensory experience. Second, an experience is described and interpreted through language with others. And lastly, one utilizes shared experiences with others to develop and fortify their perspectives and worldview. The purpose of heuristics is not to explain the ‘how,’ but rather to describe the nature or essence of an experience (Metz, 2000; Moustakas, 1990; Patton, 2002; Wiersma, 2000).

As described by Patton (2000), there are two primary implications to heuristic inquiry. First, this line of inquiry addresses “what people experience and how they interpret the world” (p.106). The second implication of this type of study is that the only real way to know what someone else has experienced is to have a direct experience with the event, as closely as possible. As previously stated, heuristic research, as viewed through a lens of narrative analysis,
attempts to achieve this understanding through in-depth interviews, direct observation, and written documents/artifacts. In conclusion, heuristic inquiry carries the belief that “there is an essence or essences to shared experience” (Patton, 2002, p. 106). The essence of this shared experience is based on there being a core meaning mutually understood among individuals with a shared experience, and that these core meanings can be analyzed for understanding. In addition to shared experiences, each person has a unique experience that they regard as truth, which will determine their behavior.

Heuristic inquiry is being applied as a lens from the tradition of phenomenology as I share the experience with the participants under study. Heuristic inquiry poses the question of “what is my experience of this phenomenon and the essential experience of others who also experience this phenomenon intensely” (Patton, 2002, p. 106). This line of inquiry differentiates from phenomenology in that it directly utilizes the experience and insight of the researcher; in heuristic inquiry the researcher is the primary instrument and the ‘self’ of the researcher is apparent throughout the process (Beckstrom, 1992; Moustakas, 1990; Patton, 2002).

Heuristic research has two essential requirements. First, the primary researcher must have a shared personal experience with the research population, and must have an intense interest in the subject matter. To this end, heuristic research must cover a matter of paradigmatic shift for the individual. Secondly, should there be co-researchers in the study they must also have a similar shared experience with the participants of the study, and have intense personal interest. There will not be co-researchers in this study. For the researcher, heuristics is a process of internal search with a purpose of leading to an understanding of the nature and meaning of an experience, and a development of procedures for further inquiry. This process leads to the researcher also gaining a growing self-awareness and knowledge through the events of the study.
As described in Patton (2002), compared to phenomenological research alone heuristics has additional requirements/differences: “a recognition of that one must relinquish control” (p. 107), meaning that the researcher must have a searching focus and a willingness to make experimental changes; a legitimizing of the personal experiences, reflections, and insights of the researcher; a “creative synthesis including the researchers intuition and tacit understanding” (p. 108); a much deeper connectedness between the researcher and the participants based on their shared experiences; and a utilization of the whole person in the research, whereas phenomenology ends at the experience.

**Background of Researcher**

In the previous section I discussed how my connection to the topic of inquiry, and to the participants of the study, is very important in a heuristic study. I am intensely connected to the context of this research. My connection to this topic is very intimate, as I came to pick this topic through a process of trying to understand my own learning in recovery from alcoholism. Through my experience of sitting in the rooms of Alcoholics Anonymous I began to draw anecdotal connections on the prevalence of persons in human service professions who participate in this program. As I spoke with persons in the rooms known as ‘old-timers,’ meaning that they have had several years of sobriety and participation in the program, my interest in learning among this population was fortified. As a licensed professional counselor I also had interest blooming as to what intrinsic qualities of persons who choose similar occupations to myself make this learning experience different or unique for us. My role as a researcher in relationship to the research design is to better understand my own personal existential experience as a person in recovery, and to verify whether this process is a shared experience among my professional cohort.
Finally, I would like to address how I feel my interest will impact this study, and to share my current views about the topic under study. Heuristic research is purposeful, and therefore my own biases and personal experiences are intrinsic to the context of this study. This study has arisen out of a combination of my own process of looking inward for answers, and by my knowledge seeking with peers in the program. I have my own conceptions as to why learning is different for persons working in human service professions, and these perspectives stand to impact the direction of this study. In contrast to this ideology, it is also essential in heuristic research for a researcher to abandon pre-existing ideologies should these ideals not be supported by the shared findings of the participants understudy. My view about this learning experience is that the human service provider’s role as a ‘helper’ makes the process of accepting guidance from those that hold knowledge a conflicting experience. Persons in HSP’s have acquired knowledge about alcoholism and drug abuse that they must abandon, re-evaluate, and critically reflect, based on this knowledge not working for them as a means of adjustment and change. To this end I feel that recovery for HSP’s may possess some inherent differences, as their process includes a function of unlearning prior to their learning. I also feel that the culture for which their profession lies within may be less tolerant to the helper needing help.

**Participant Selection**

Initially two primary constructs are being utilized to determine who would be an appropriate participant for this study. These qualifying constructs are: one having a history of sustained recovery through participation in the program of Alcoholics Anonymous, and one having an occupation as previously defined as a human service professional. To begin with the first construct, it was my goal to limit participation to individuals who had at least three years of continuous recovery. Secondary to this, it was the goal of this research to have some participants
with at least five years of sustained sobriety. Sustained recovery is central to the construct of learning in this experiment. I am making this judgment on participation based on my own personal experience with recovery, and based on discussions I have had with other members of mutual-aid addiction programs. My goal to attain varied stratifications of recovery is secondary to a belief that learning is different as one matures in their recovery. As an example, early recovery may encapsulate developing coping strategies, making connections with other alcoholics/addicts, and/or experiencing positive health responses as a result of abstinence. Conversely, advanced time in recovery may imply learning through different processes such as helping other addicts/alcoholics, having a commitment to service work, or coming to understand the personal significant of spiritual development.

To attain manageability in this study, I sought approximately six to ten participants. All participants in this study were male. As discussed in Patton (2002), there are no specific rules to sample size in qualitative research. It was important to the success of this study that enough participants are secured to allow for attrition. A very real reality in this population is relapse and death. Relapse does not necessarily entail exclusion from this study, and may in itself offer unique opportunities for learning. For the convenience of conducting research, as face-to-face observation and interviewing are key to the success of this study, geographical participation were limited to the tri-state area of Pennsylvania, Maryland, and Delaware. It has been my experience that meetings across this locale follow a homogeneous format. Literature used by AA and NA, which were available for analysis, is homogeneous worldwide. The setting of participant interview and observation was mutual-aid meeting sites (primarily churches), telephone and e-mail correspondence, residence of participant/researcher, and public community locations.
Various methods of sampling were utilized as needed to obtain participants for this study. Purposeful sampling was selected based on its intended focus, utility of selecting information rich cases for study in-depth; these are all of central importance to this study. Extreme or intensity sampling were selected in cases that were unusual or special in some way. The purpose of this selection was to gain intense insight into specific successes or failures, as these are cases that may offer the most learning opportunities. Homogeneous sampling has been utilized in this study. Human services occupations are too diverse of a construct to get in-depth and information rich data from such a small sample size. To maximize learning opportunities the subculture of social service professionals were selected for this study. Critical case sampling was utilized in case an opportunity existed to find two participants from one mutual-aid meeting group. This opportunity provided the unique perspective of not only gathering information on one’s learning, but also to gather information on what one participant learns from another participant. The primary means of acquiring participants for this study was through snowball or chain sampling. This method of sampling utilizes word or mouth referral and discussion of potential participants by talking with people who are in the know.

**Participant Table**

<table>
<thead>
<tr>
<th>Name</th>
<th>Age*</th>
<th>Ethnicity</th>
<th>Geography</th>
<th>Years of Sobriety</th>
<th>Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>David</td>
<td>60 years</td>
<td>White</td>
<td>Suburban</td>
<td>32 years</td>
<td>Educator</td>
</tr>
<tr>
<td>Ralph</td>
<td>38 years</td>
<td>White</td>
<td>Rural</td>
<td>4.5 years</td>
<td>D/A Counselor</td>
</tr>
<tr>
<td>Jerry</td>
<td>38 years</td>
<td>White</td>
<td>Urban</td>
<td>23 years</td>
<td>Nurse Practitioner</td>
</tr>
<tr>
<td>Thomas</td>
<td>50 years</td>
<td>White</td>
<td>Rural</td>
<td>30 years</td>
<td>Counselor</td>
</tr>
</tbody>
</table>
Data Collection

The quality, rigor, and process of data collection are arguably the most important aspect of performing a qualitative research study. This is the part of the research that will inform the results of the research, and will directly determine the value of the study. In qualitative research, types of data collection include individual and group interviews, observations, and documents (Merriam, 2002; Patton, 2002).

Data collection occurred through the process of fieldwork. In this study fieldwork define based on the literature included the use of field notes, audio recordings from interviews, and document analysis. This study limited document analysis to approved AA and NA literature (e.g., The Big Book of Alcoholics Anonymous, Narcotics Anonymous, Staying Sober, The 12 Steps and 12 Traditions, and The Grapevine) to maintain consistency in information. As this study looked specifically at learning through recovery in mutual-aid programs it is important to limit bias from sources outside of this culture. In fieldwork it is essential for the researcher to capture specific personal and environmental characteristics; these characteristics should include: temporal space (time), physical setting, a description of what was observed, who was present, specific activities, direct quotes and description of feelings from participants and researcher,
reactions to the experience, and insights/interpretations gathered (Patton, 2002). Limitations to the process of fieldwork includes the fact that the observer or setting may affect the situation, bias created through the process of observation, perception of the observer, and that there is a limited sample of activities that can actually be observed in any given setting. Additionally, observation is limited to the aspects of external behaviors; the observer is not privy to internal processes of the participants that are not shared. As discussed in Patton (2002) “interview data limitations include possibly distorted responses due to personal bias, anger, anxiety, politics, and simple lack of awareness since interviews can be greatly affected by the emotional state of the interviewee at the time of the interview” (p. 306).

Interviews were the primary source of data collection for this study; other forms of data collection included: analysis of program literature and regular attendance at various weekly AA meetings. These secondary sources of data collection were utilized to contrast first hand data being received through interview. Patton (2002) describes three different types of interviews including unstructured, semi-structured, and structured interviews. This study employed a semi-structured interview; the semi-structured interview provided a guide of questions that were open in nature (see Appendix A). The benefit to this process is that it offers a format to the researcher to maintain a consistency of content across research participants. This process also permits freedom to the researcher and participant to deter from a predetermined curriculum should the need arise. Characteristics of interviews included: the use of field notes, tape recorded interviews that were transcribed by the researcher, interviews occurring in a community setting or residence of researcher or participant, and an interview length of 2 hours. A copy of the interview transcription was given to the participant for verification.
The process of data collection across participants was interviewing. This study utilized individual interviews as the primary source of data. In the first interview the researcher reviewed the functions of informed consent, confidentiality, and the purpose of the study. The researcher also began the specific curriculum of semi-structured research questions. The researcher concluded the first meeting by allowing time to process the experience of the interview and to answer any remaining questions of the participant. In Appendix A a detailed summary of possible interview questions is listed. Some examples of possible questions include:

A. Do you integrate aspects of your AA program into your professional work?

B. In what ways do you feel your identity as a HSP has impacted your recovery, and experience of AA?

C. How has your story of recovery changed through the years?

Data Analysis

In qualitative research methods a different approach to analysis is utilized depending on the type of study being completed. This study used a phenomenological foundation and applied a methodology of heuristic inquiry. “Phenomenological analysis seeks to grasp and elucidate the meaning, structure, and essence of the lived experience of a phenomenon for a person or group of people” (Patton, 2002, p. 482). This research was specifically interested in the lived experience exemplified in the individual story, as well as in the thematic attributes of the group of research participants. For this reason a heuristic methodology of inquiry was followed, departing from the traditional stance of phenomenology; narrative inquiry was adopted as a means of data collection and analysis. In this section I explain the process and steps that were followed in understanding how the data was analyzed. I first explained the discipline of data
analysis for narrative inquiry as discussed in Patton (2002) and Polkinghorne (1988), followed by reviewing the process of heuristic inquiry, which is similar, with some specific differences. Importantly, it is essential to this line of research to understand that analysis is not a process that occurs at a discrete phase of research; qualitative researchers perform analysis throughout the whole course of the research. In heuristic research, as referenced to Husserl in Patton (2002), analysis is intentional; it involves “the orientation of the mind to its object… the external experience of being conscious of something… that we recognize that self and world are inseparable components of meaning” (p. 483).

**Narrative Analysis: Data Collection and Discussion**

Qualitative methodology offers a variety of formats of inquiry; the specific format selected by the researcher is in respect to the nature of the question understudy. As previously mentioned, and as will be further discussed in our next session, the primary methodology of this research is heuristic inquiry. In support of this primary methodology, a secondary methodology of narrative analysis, or narratology, has been selected specifically for the purpose of data collection, discussion, and analysis. As described by Patton (2002) narratology serves to answer the question “what does this narrative or story reveal about the person and world from which it came?” (p. 133). In addition, a secondary, or follow-up question being “how can this narrative be interpreted to understand and illuminate the life and culture that created it?” (p. 133). Narrative inquiry or analysis appears to be a very appropriate format in which to gauge the phenomenon being addressed in this study. I support this statement with several rationales. First, narrative, or story, is the format that has remained consistent across all four editions of *The Big Book of Alcoholics Anonymous*, which is the primary text of the program. Additionally, as delineated in the 12th step of the program, one alcoholic reaches their hand out to another in need not through
the giving of advice, but through sharing his or her own story. We, the members of Alcoholics Anonymous, are a program of identification; the process of identification is projected through the telling of our own story to another. Therefore, this methodology serves to pay respect and homage to the original traditions of the program understudy. Additionally, with respect to spirituality, the art of the story is a principle laid out in many of the historical religious and spiritual texts (e.g., The Bible, The Koran, and The Way of Life).

Narratology, like heuristics, stems from the foundation of phenomenology, with the “emphasis on understanding lived experience and perceptions of experience” (Patton, 2002, p. 115). Narratology accomplishes this task through the process of in-depth interviews, transcribed into transcripts, life history narratives, and historical memoirs. The texts chosen to support this research, which represent the backbone of the program of Alcoholics Anonymous, are referenced as a check to maintain the credibility and dependability of the narratives provided by the research participants, while at the same time adding depth to their stories. This also functions to add an essence to the stories of the participants in this study, in that they all share knowledge of a discourse guiding their common purpose... to help the alcoholic who still suffers. The assessment and discussion of narrative looks to themes of the psychological, sociological, political, cultural, and historical to personify the individual represented in the text (Patton, 2002).

Narrative is a form of meaning making. It is a complex form which expresses itself by drawing together descriptions of states of affairs contained in individual sentences into a particular type of discourse. This drawing together creates a higher order of meaning that discloses relationships among the states of affair. Narrative recognizes the meaningfulness of individual experiences by noting how they function as parts in a whole. Its particular subject matter is human actions and events that affect human beings, which it configures into wholes according to the roles these actions and events play in bringing about a conclusion. Because narrative is particularly sensitive to the temporal dimension of human existence, it pays special attention to the sequence in which actions and events occur (Polkinghorne, 1988, p. 36).
In the discussion and interpretation of the stories shared by the participants of this study we cannot understand life experience outside of the context of the specific participant, and the culture and historical climate from which they belong. As stated by Patton (2002) narratives are stories that offer “translucent windows into cultural and social meanings” (p. 116). To this end it is the primary function of the researcher to deliver the story from the participant, to the reader, in a format that will optimally restore the original depth that it had when first told. To this end the researcher has the demand of absorbing not only what was said, but also to deliver various aspects of cultural context, reference to in-culture language, story environment, and unspoken dynamics that may have taken place between the storytelling and storycatcher (in this case, the researcher).

Narratives, or story, have a format to them that are unmistakable to the human ear. We take to them as not only do they convey information such as facts, timeline, and persons, but they offer a qualitative feature of meaning. In this dissertation the work of Christina Baldwin and others, with regard to the art of the story is discussed. Story is unique in that it not only offers information, but it delivers the presence of the subject. It possesses a meaning of how the character(s) develop, and represents what cognitive and emotive entities unfold from beginning to end. Narratives possess a temporal space, but it is the responsibility of the researcher to deliver, but not recreate, what was learned in the process of the story; to elucidate whether the story or narrative is one of despair or resiliency, failure or triumph, and to deliver as many culturally rich details as were present first hand. To offer the audience enough context to understand an in-group account, yet still allowing the audience for form their own interpretations of the narrative. Given the heuristic nature of this research the researcher must be disciplined to
offer insight, without recreating the story into something it was not at origin (Polkinghorne, 1988).

In heuristic research, the purpose of the study is expounded upon as the researcher has a more intentional, intimate relationship with the phenomenon. The phenomenon is specifically selected by the researcher to develop a more complete understanding of their own experience, shared with the research participant. Patton (2002) references Moustakas as describing this process as a highly personal experience. Heuristic research follows a five-step model that will now be described.

First, through a process of immersion, the researchers function is to “contact the texture, tone, mood, range, and content of the experience… to savor, appreciate, smell, touch, taste, feel, (and) know without concrete goal or purpose” (Patton, 2002, p. 486). Patton uses personification in describing this step as the researcher is applying his or her own personal experience to the phenomenon. Following a process of immersion, the research moves to the second step, which is incubation. This step can be described as a meditative, temporal experience of process, which Patton (2002) identifies as “quiet contemplation… allow(ing) space for awareness” (p. 486) and understanding. This step is completed as meaning and awareness comes in their own time. Following incubation, the researcher proceeds to the third step, which is illumination. Illumination is somewhat similar to the step of imaginative variation, described earlier. This involves the researcher coming to know the phenomenon by its essential parameter and scope, drawing out the essential themes and patterns of the data.

The final steps of heuristic research are explication and creative synthesis. The process of explication occurs through mindful focusing, self-dialogue, and critical reflection. The
researchers goal in this step is to make new connections and redefinitions through the universal elements or themes of the experience. The process of data analysis in heuristic research is completed with creative synthesis; this step involves the depiction of experience and the portrayal of the participants, along with the insights and experience of the researcher.

Moustakas (1990) in his text *Heuristic Research* offers delineation between heuristic research, and the roots of its foundation, phenomenology:

Whereas phenomenology encourages a kind of detachment from the phenomenon being investigated, heuristics emphasizes connectedness and relationship. Whereas phenomenology permits the researcher to conclude with definitive descriptions of the structures of experience, heuristics leads to depictions of essential meanings and portrayal of the intrigue and personal significance that imbue the search to know. Whereas phenomenological research generally concludes with a presentation of the distilled structures of experience, heuristics may involve reintegration of derived knowledge that itself is an act of creative discovery, a synthesis that includes intuition and tacit understanding. Whereas phenomenology loses the persons in the process of descriptive analysis, in heuristics the research participants remain visible in the examination of the data and continue to be portrayed as whole persons. Phenomenology ends with the essence of experience; heuristics retains the essence of the person in experience (p. 39).

In conclusion of this section on heuristics it is important to elucidate the multiple levels of shared experience present, which may be encapsulated in the individual stories of the participants. I do not place this attributes in any particular order, as they may come with different identity salience values only determinable by the individual participant. These identities, which I aim to bring alive in the personal narratives that follow include: being alcoholic, having profession in the human services, participating in the program of Alcoholics Anonymous, having understanding for the discourse of the primary text of that program, conceptualizing meaning through spirituality and/or religious practice, and gender. Other identity saliences may unfold as we venture through the stories of our participants.
Verification/Trustworthiness

Historically, studies utilizing qualitative research methods have been under scrutiny by other research communities with regard to the value and validity of the research they produce. As qualitative methodologies have matured and become more popular as a recognized rigorous academic process, it is important that each study assess itself as to the degree that its results are confirmable, credible, dependable, and transferable. In this final section I will be reviewing the definition and application of these individual processes, as they relate to this study (Merriam, 2002; Patton, 2002).

Confirmability

Confirmability in heuristic/narrative research, and qualitative methodologies as a whole, has two essential definitions. First, confirmability deciphers the degree to which the results are from the data itself, and not from the bias of the researcher. And second, confirmability is the extent to which the results of a study can be validated by others. In this study several measures of confirmability was utilized including audit trails define, triangulation, and searching for contradictions. Audit trails are documentation (field notes) recording on how results (data) were received, analyzed, and maintained. The recording of this data permits for authentication and replication by other researchers. As discussed earlier in this chapter, the benefit of triangulation is that it adds power to the data by reinforcing shared results between different data resources. This stands to facilitate the reduction of risk of researcher bias. Triangulation also facilitates the researcher’s ability to search for contradictions in the research (Patton, 2002).
Credibility

Credibility, as discussed by Merriam (2002) refers to the congruence between study findings and what actually happened. This can be referred to as internal validity, truth-value, or believability from the participant’s perspective. This study utilized several formats of credibility to promote its truth-value; these formats included triangulation, peer debriefing, member checks, and prolonged engagement. This study utilized all three types of data collection in a process called triangulation. The benefit of triangulation, according to Patton (2002) is that it utilizes a variety of sources, monopolizes on the strengths of each type of data, and minimizes the weakness of each individual approach.

Triangulation, as previously defined, adds credibility as it reduces the influence of subjectification by the researcher. In this study member checks, which include periodic review of transcripts and process of content with participants, improve the congruence between what is said and meant, and what is recorded. Peer debriefings is similar to this process, but does not involve study participants. This study improved credibility by utilizing peer debriefing with my doctoral dissertation advisor, committee members, and other recognized professionals in the fields of addiction studies and adult education. Lastly, this study used the function of prolonged engagement. Prolonged engagement permits the function of member checks and process reviews with participants, and the researcher develops a relationship over time. This is facilitated in this study by the researcher conducting a 2-hour interview with each participant followed by telephone contacts when extrapolation or further clarification was necessary (Patton, 2002).
Dependability

Dependability is the degree to which the research is able to create reliable, thorough, high-quality, accessible research, with easily understood procedures. This researcher facilitated dependability by utilizing data collection and data analysis procedures that are consistent with the methodologies academically proven format, as published in research. This process has been described in this chapter’s previous section. This researcher utilized audit trails, dense descriptions of research methods expand, be more specific, and triangulation (all previous described) to promote dependability (Patton, 2002).

Transferability

Lastly, it is very important that qualitative research takes measures to ensure transferability. Transferability is the degree to which this research can be applied to other contexts. Through the use of rich descriptive data, measures of reliability, use of purposeful sampling, and audit trailing, future studies by this researcher, or other researchers, will be able to extend or extrapolate upon this research. Qualitative research is purposeful; this process adds power to understanding a specific lived experience, yet also poses limits on this studies transferability to other populations. Based on this researcher’s experience, and based on research, this study may inform learning in mutual-aid groups as a whole. This can be said as mutual-aid groups share the common themes of being run by their own members, following a similar spiritually-based 12-step curriculum, and addressing a common malady experienced by its members. Some examples of other mutual-aid programs include Overeaters Anonymous and Gamblers Anonymous. This research may also be transferable to studies in the fields of
addictions, as mutual-aid groups are the primary means of recognized recovery, and research and theory development in adult learning.
CHAPTER 4

RECOVERY STORIES

Over the course of approximately 4 months I have had the pleasure and honor to meet with the following seven men; the eighth story is that of this researcher. The process of meeting with these men involved traveling through three States: Pennsylvania, Delaware, and Maryland. Proximity of participants ranged from 2 to 200 miles from my home. Various environments housed the discussions that took place ranging from churches, outdoor cafes, coffee shops, professional offices, the homes of participants, and the home of this researcher. I truly believe that the differing environments offered new flavors of interaction across the interview. Throughout the interviews you will witness discourse specific to our program; I have found this common speak, inclusive to the members of AA, to be implicit to the learning that is constructed. This goes vastly beyond just learning the particular sayings. Our slogans infiltrate the mental filters in our minds that separate emotion, thought, and behavior. These saying include, but are not limited to: ‘keep it green’, ‘keep coming back’, ‘turn it over’, ‘don’t miss the miracle’, ‘one day at a time’, ‘share your experience, strength, and hope’, and ‘I’m a friend of Bill’ (one of the co-founders of our program), just to name a few.

Throughout these stories I believe you will also sense the camaraderie and humanity that is collective between the men and women of our program, whether the discussion is between long-time friends, or new acquaintances. As a description of this I would like to share an interaction I recently experienced at a meeting. A gentleman was sharing that he found the negative thoughts he had in his head as disturbing and restricting; at the end of the meeting another man in the meeting handed the first man a slip of paper. On the paper the following
statement was written… “never say anything to yourself that you wouldn’t say to a six year old child; I love you, and God loves you.” The man who shared on his disturbing thoughts not only had a change in his thinking and a way to reframe the uncontrollable mental constructs of his mind, but in sharing this event he also touched the hearts, and taught a new way of knowing to all the members in the room. In the AA program it is commonplace to hear alcoholism described as a three-part disease: a physical allergy (dependency), a mental obsession, and a spiritual malady. Please also keep in mind that the group conscious of recovery is very different from that of abstinence from alcohol. You will hopefully find in these stories that abstinence equates to not imbibing alcohol; recovery and/or sobriety has a personal meaning that one lives by a particular shared code or discipline; that there is a group conscious of collectiveness through this way of life; and that a spiritual transformation or vital spiritual experience has occurred that has equated to a psychic change in ones’ belief system or frame of mind.

Recovery is about ‘living life on life’s terms’, and taking the responsibility to keep ‘ones’ side of their road clean’. In reading these stories try to keep in mind these three attributes (the physical, mental, and spiritual), and how they pertain to the individual stories. Lastly, I have deliberately chosen to leave the interviews (stories) as untouched by the editor’s pen as possible. I have chosen to do this based on my own beliefs on the value of the whole story; essentially removing content removes context. Additionally, there is confirming literature in adult education, and the humanities in general, which backs this belief (Boje,, 1988, 2009; Moustakas, 1990; Polkinghorne, , 1988) in their discussions on heuristics and narrative inquiry discuss the nature of the whole account of the story, honoring the original manuscript for its full meaning. In essence, as discussed by Polkinghorne (1988) regarding heuristic inquiry “the basic source of evidence about the narratives is the interview”; my goal is not to recreate an account of one’s
experience based on what I feel is important, but rather to present the story in its original form for the readers’ interpretation and meaning construction. In general, the following stories followed semi-structured questions from the researcher pertaining to professional roles, learning and adult development, and experiences as one made the transition from addiction to recovery. A more detailed account of the interview questions can be found in Appendix A. With this… here are our stories.

**David**

Prior to recovery I had several positions. My first position of course was a teacher. I taught biology and history for a high school in Jamestown, New York. I left there and went to work with the Pennsylvania State University at the York campus as a director in adult continuing education. I held that position until 1967. In 1967 I left the university, finished my master’s degree at Temple University and became a chief of academic programs for the bureau of community colleges for the Commonwealth of Pennsylvania. I was responsible for allocation of funds for academic programs; which was then ten community colleges in the Commonwealth. From there I moved to the director of bureau academic services. From that point on I was responsible for allocation of funds and for the fourteen state colleges as well as the thirteen community colleges, so there would be no program duplication at the state owned and state related institutions. In that capacity I was also responsible to review the budgets of the state related institutions; Temple, Penn State, Pitt and Lincoln University. I reviewed those budgets for the secretary of education in order that the secretary may be confident that the funds being spent for programs that these state related universities were using were to the benefit of the Commonwealth. For a period of time I spent in the development of a large medical center in Pennsylvania; I did minor work there primarily to establish the Commonwealth’s position
relative to medical education. UP (University Park) until that time the research showed the Commonwealth in Pennsylvania in 1981 and 1982 provided approximately twenty-eight percent of the nation’s physicians and the majority of the physicians coming out of Pennsylvania did not serve and practice medicine in Pennsylvania. The issues that we were tempting to resolve were how the surrounding states that did not provide medical education for physicians would participate in some support to the universities in Pennsylvania that provided medical education. This unfortunately didn’t go anywhere (chuckling).

From that I left. I was invited by a national accrediting commission and a Washington DC organization that was undergoing some problems regarding accreditation. It was the national association of accredited cosmetology schools. These institutions had issues with the department of education relative to financial aid issues and other issues that related to their ability to perform effective educational processes. I was asked to come in and establish criteria for this association that would enable institutions that were members of the accrediting body and the accredited by that accrediting commission to achieve their stated goals as well as to be in compliance with the accreditation processes that were approved by the department of education in Washington. I served in that capacity until 1990 in which I decided to come back to Pennsylvania and assume the presidency of an institution in which my family had been or had established some years earlier. I became the president of a technical school in 1990 and still serve in that capacity today. The institution now has approximately 450 to 500 students. It provides programs in medical assisting, pharmacology, pharmacology assistance, primarily assistance in the medical field as well as culinary arts. And that’s about it. [Switching to experiences with alcoholism and learning sobriety].
My work and professional experience most during that period from 1959 to 1976, I was either working on a master’s or working on a doctorate. In terms of the alcoholisms itself, I was a product of the alcoholic family. My father was an alcoholic and my grandfather is an alcoholic. I recognized that there’s a direct relationship between often the parent being an alcoholic and the child being an alcoholic. So I was conscience of that all along. During that period from when I was in during my master’s or doctorate work, apparently I didn’t have time to drink. I drink in college of course, didn’t drink alcoholicly then or whatever but when I left college I was married the following year and the responsibilities of the job plus the fact that I was in the university structure which required going on for an advanced degree was inheriting a position so from that period on, I really didn’t have the opportunity to do much playing. I think understandably, people that have been through the research period often have this, I don’t know how to describe it, other than you’re guilty because you’re not doing something. If I were at home cutting the grass I felt that I should be doing research. If I was doing research, I felt as if I should’ve been home cutting the grass. I think that’s a simple way to describe it. Every time I was some place, I felt I should be someplace else. And of course the responsibilities and the time constraints listed that everybody has. Not only did I have a full time job and sometimes a responsible position I reported to the secretary of education on several occasions on sensitive matters, so I had this ability to do this, but I also had to keep a clear head. When you’re dealing at that level in terms of whatever has to be done, you don’t want to get mixed up with alcohol or any other mind altering drug and I didn’t, just through discipline and I didn’t even think about it.

When I finished my doctoral work in 1976, I felt a release of this. I had been drinking on and off but never alcoholicly during this time. I would drink wine and so forth, but I never really had time and plus the overriding burden of being able to continue this work, my work. So I
did that. After that I kind of relaxed. Then I felt like I had earned something then I was falling into a pattern because I no longer had to run to the library. Run here, run there, do that. I could relax more and I began to take drink when I came home and progress to the point to where it became two and three and three and four daily and then everyday and every night and so forth so I really felt that I was doing ok and then I realized at one particular point that I was drinking a little bit more than what most people drink. My wife who was alive, my wife has passed since that time, explained to me that you’re not really acting like you used to act. I didn’t quite know what that meant and she said you seem to be angry and ultimately find fault with either the children or something. She said that, “this is not the way you act.” So I took that as most alcoholics would and said the problem’s not mine, the problem is yours. Your perception is not correct.

After a period of time I was involved in several incidents in my work and because I had the responsibilities of the job that I had and it directly affected the college’s performances both financially and academically. Often times I was sent out on missions that were in respect to defend the Commonwealth’s position on certain issues and to represent the Commonwealth in Pennsylvania on construction or program development or whatever it would be. The Commonwealth was primarily the back stop for many of these institutions. In one particular incident which I learned it was a turning point is that I was sent on a mission to a large university and I met with the vice president and the president and indicated to them that something was going to change and I was going to make sure that it changed. Really I had been drinking the night before and when I went through this session, I was not feeling well, and in fact I was hung over. And I began to take issues outside the question itself and the poor people had no defense because ultimately I had the power and they didn’t and that was it and I found that when I
returned home that this is indeed unfortunate for them that I should do that. And that caused me to think about doing something about my alcohol and alcohol consumption and I picked up the phone and called the number. Went to a meeting and decided that these people there were how you say that, I said to my wife, “I have more teeth in my head than the whole room.” I thought that was very clever and she came back with an understandably rational remark, that they were sober and I wasn’t, which caused me to think that I had no retort, which caused me to think that she was right. So I went to meetings and proceeded through the process and that was now 32 years ago and I have not had any interruption of the sobriety through that time.

My sponsor who has now passed, I got great guy as a sponsor, he said to me you’ll miss it at first and of course during that period of time we purchased a home in Rehoboth, Delaware. Spent a lot of time in Rehoboth and the gatherings of the weekends in Rehoboth were always filled with alcohol and so forth. I indicated to him after being new in the program, ‘am I every going to have fun again’. He said you’ll miss it for a while, but after your sixth or seventh year it won’t be important and I accepted that not believing it, but I accepted it. And he was right, after a period of time drinking during any period of stress or during any period of upheaval, it just wasn’t even considered. During my sobriety during these 32 years, I lost both of my wives and my oldest daughter to cancer and I at no time during that period did even think of taking a drink or using some mood altering substance. That’s it. [Switching to sponsorship]

[My first sponsors] name was Hal. And we had totally different back grounds. Hal came from Illinois. He was a radio announcer at a local radio station and had been sober for since 1960 and had some time in sobriety. I found that Hal was fundamentally a nice person; and he always seemed to understand how I was feeling and what was going on and seemed to have the right touch and often said very little, but said just wait ten minutes and it will go away or do
something silly like that and normally he was just a marvelous help. I miss him at times because he was after a period of time, not only was he my sponsor, but he and I became friends, close friends. We didn’t socialize together because somehow that didn’t seem to fit to mix but we saw each other. His wife and my wife on one or two occasions had breakfast together following a meeting or before a meeting however, we never socialized together. It just wasn’t that kind of relationship. It was a relationship which I cherished and primarily helped me through some difficult and impossible times. And you know he was not well educated which didn’t bother me at all because he was primarily an expert on how to recover and that was it. So I think that was the attraction if there was any. Hal had been in the program sixteen years, no eighteen years, he got sober in 1960 and I got sober in 1978, so he had been in for eighteen years prior to becoming my sponsor. [Switching to a discussion on learning opportunities in AA].

Hal recommended the Big Book from the very beginning. In fact he gave me my very first Big Book, which I gave away… I forgot who I gave it to. He gave me the Big Book and said I think you should read it and come back to see if you have any questions and we’ll see if you see any relationship between your pattern of drinking and the alcoholism of the people in the Big Book and we would have those discussions. He would say ‘read this’ and then would ask what I thought about it. He knew the passage. He was pretty helpful in explaining certain things. The other thing you said… the conviviality between the meetings after the meeting. Primarily when I first came into the program I remember, I vaguely remember… I came into the program in 1978 and at that time Alcoholics Anonymous in central Pennsylvania was relatively sparse in terms of meeting. There was a York area group which was an overriding group of meetings, but there weren’t many meetings. The meeting that were held were daily held at a meeting room at the York area group rented on Beaver Street and you probably heard people talk about Beaver street.
This is where we all went to the meetings. This is where people went before and after the meetings. At Beaver Street the meetings were at 8am and 12pm noon, 4pm, 6pm, 8pm, and on Fridays after the 8pm meetings there was some relaxation. There were 11pm and 12 midnight meetings on Saturdays. On holidays there was various alcothons (events, generally held on holidays, were a meeting is scheduled every hour); in fact they started there and they were 24hrs., and primarily this is where you met a lot of people.

It was a very diverse group. As an example when I was chairman of the York group in 1981. We were holding our first and chairman was really… of the group that paid rent to the house. The groups never paid. The groups paid us rent and we let them use the house, but I was chairman of the York area group. We’re getting ready for the first alcothon and a catholic nun came in for a habit and I thought that it was for the 12 o’clock celebration, but she said no, she was an alcoholic. There were priests, there were rabbis, and there were men that came in from all different walks of life. I think that you also realized in the process of recovery it’s a very democratic centered society. Gays, nobody was discriminated against because of orientation through. We had gays; we had lesbians, self-professed transsexuals, and people that… we just didn’t pay attention to that. They were alcoholics and I think that was the fundamental issue. No one was better or smarter than anybody else and I think that was probably because they all recognized that they came from the same spot.

So that had something to do with your recovery. If you want to call it the after meeting, the meetings never really ended. We just picked up. If you were around for the six o’clock meeting, by the time you’re done having a conversation the eight o’clock meeting would start and then the eight o’clock meeting so on and so forth. I was a very supportive mechanism for somebody in the program; a lot of the people got sober at Beaver Street. I got sober there. That’s
where I went to meetings; I went to meetings there for eighteen months and I made coffee. I was first asked to make coffee by my sponsor. He said it would be good for you to make coffee and I asked him for how long should I make the coffee and he said until I tell you to stop. Now I was quite honest. I said I don’t even know how to make coffee. I never made coffee before in my life. I always had a position in the program but I never had made coffee… I told him that my secretary makes my coffee! And Hal was very nice, very nice… He said Dave, try it and you’ll do it. The reason he said make coffee is because you go to a meeting so every day except Saturdays and Sundays because I said I have to do something with my kids. I would be there at 8 o’clock in the evening to make coffee. I’ll get there at 7:20 and make coffee in two big coffee urns and empty the ashtrays because there was smoking at that time and so forth. People came in and we talked as I made the coffee. There were some people that described that they also had an epiphany that Bill W. described that they came there because they felt that God had spoken to them to come in. No one really felt as unusual about that. It was a very good training ground for an alcoholic that wants to remain sober and also find somebody that has the same desire, the same issues he they have. All three helped.

I was in Washington. I went to Washington in 1985 I believe and I soon found out there were meetings close by in Annandale. These were clubs in Washington because of the population, the size of the population; Alcoholics Anonymous was really divided up into clubs and these clubs were groups of men and women. They would take over a building and rent it to the various groups that wanted to meet there. Maybe fifteen groups meet a day. I met at The Independence Club and a young man named Peter came there and he was just recovering he had asked me to be his sponsor and he was going through a pretty rough time, a divorce, and losing a job, primarily he came there and Peter was… we called them pigeons, they didn’t like to be
called that, but that’s what they were called. So we call them pigeons. He was a pigeon for twenty-five years. Peter moved to York. He was originally from Hanover, he moved to York. He lived about a half of a mile from me. We lived down in Virginia and we were about two miles apart and through the incidents that occurred in his life he moved to York just because he has a job here. He lives in York now and we see each other every Wednesday night, and have lunch on Friday, and traditionally shared things other than alcohol, I mean he wanted to do some things. We just talked about family things and he’s done very well. I’ve used the same process as Hal had done with me; get the big book, if you have any questions call me. Don’t’ drink go to meetings. Sponsor people. He did, he sponsored people in Hanover, where he was from, his home town. He celebrated his 25th anniversary on the 17th of March 2010. [Moving on to talk about his story of recovery, and how it has developed].

[It is] much easier [for me to tell my story] because I’ve told it so many times. I think each time that I tell it, I’m also reminded by the feeling of things that went on at that time. Growing up in an alcoholic home, learning that alcoholism was now part of your life, rather than something that you said you were never going to do because of something you saw and I guess the story itself is a consistent reminder that you’re never cured from this disease and it’s never over. Ultimately there’s temptation when life gets pretty dull or pretty bad; things happening. I mentioned my wife dying and my daughter dying, both were a tremendous upheaval in my life. Of course we think about things and how they affect us and not how they affect anybody else, but you know, they were and when I tell the story, I think that it inspires other people sometimes to think that, if he can get through that, I can get through that.

Initially what we would talk about in our stories were holidays because a lot of people came into the program with resolve [around the holidays]. The first of January, they came in at
Christmas time, usually the Thanksgiving and Christmas holidays had finally done them in, you know they lost their jobs, lost their families or lost them both. So then they walked in pretty well cleaned out on the first of the year so you get people to come in. So then you begin to tell them that they don’t have to do that and so on and so forth. Then the next holiday really, is Easter and you get through Easter then you tell them to get through The 4th of July and Labor Day, and you get them through the holiday because holidays traditionally were time off from jobs where you could drink and that really becomes what occurs and you simply tell them your story and how you did what you had to do in order not to drink on that specific time. You know holidays are usually times set aside for celebration and celebration in America primarily means alcohol, wine or something to go with it. That’s the story, to me that helps them.

There were two incidents in my life and I think that you may have heard the one about when I sponsored Peter in Washington and Peter was going through a pretty traumatic time in his life. His wife was suing him for divorce, he lost his job because of his drinking and he had enormous bills that he had to pay. And through the luck of it he managed to get a job with a company in Washington called George Sexton and I think they supplied food. He provided food. He sold food to restaurants. The job required him to get a car to use for his job, so primarily he had an old car which he was using and not taking very good care of and he could sale in usually the company car. He invited me to go down to the Autoquan which is an area south of Washington and he found a kid that was going to buy his car and he asked me to ride along with him whiles he went to pick up the check. On our way down he was going on about some of the things that were going on in his life and I said, “Why are we going here?” And he said, “To pick up the check for the Oldsmobile.” I said so then you sold it and he said yes, the kid is going to buy it. I said did you tell the kid about the transmission? And there was a sixty second pause
and I asked him again. I said Peter did you tell him about the transmission? And I looked and seen Peter had tears coming down his cheek. He said Dave, I’m broke. I don’t have thirteen dollars to my name. That’s what I have in my pocket as change. He said I’m behind on car payments, I’m probably coming up against a rental bill to my apartment and I have to sell this car. If I don’t sell this car, I don’t know what I’ll do. And that’s when I said, “What do you think this is all about?” He said what do you mean? I said when we go to the Independence Club we go to meetings. We’re honest there. We tell the truth and we bare our soul but then we turn around and we come to sell a kid a car that has a bad transmission, but we don’t want to tell him about it because we want him to buy the car and then find out later that he has a bad transmission, but we aren’t going to tell him that. So it’s not a question on honesty, it’s a question of what are you all about? He said nothing, so we got to the gas station. Peter got out of the car and he didn’t say anything. He got out of the car and the kid walked over to him and he said, I want to talk to you about the transmission and the kid says, yeah, my boss took a look at it and he said he tightened the bands and it’s fine. Peter turned to me and said David, “F-U.”

It turns out we both learned our lessons that day. I mean, cash register honesty is something we strive for because primarily in our addiction, we didn’t practice honesty what so ever. We always had a story and as often times I can hear, the only time you can tell an alcoholic was lying is when his lips were moving. The other thing that reminds me of how this disease works is that… I was working in Washington, I was downtown in my office on 20th Elm Street and my wife had called and said that my daughter was having some kind of girl scouts or something that was called fly ups. It was a big deal, at least to my granddaughter, I mean to my daughter it was. My wife called me at about 2 o’clock and she said are you going to be able to
get away, it was Friday afternoon and this fly up thing was at the church that night and I said yes, I’ll be able to get away. So primarily things happen as they do, my job required me to have an extended phone meeting with some people in California and of course, in California it was three hours early and I was looking at my watch and it was quarter to five and they were looking at their watch and it was a quarter to two, so I finally got off the conversation and it was like twenty to five when I got out of the office and if you leave Washington at twenty after five on a Friday afternoon, you better be prepared to wait and I wanted to get back to York, but York was an hour and a half away. So I started up New York Avenue to get to the Baltimore-Washington highway. Just before I got to Balt-Wash I came to a tie up and I looked and I saw two DC garbage trucks parked side by side in the road and right next to them was DC liquors, no, New York Liquors, because it was New York Avenue and I was furious because I knew I was going to be late and two, because they were getting a drink.

So what I did as most rational alcoholics do is, I went over the curb and back on the other lane and back on the other curb and went on my way. I was steaming. I could feel the hair on the back of my head was standing up. I looked and there was a car in front of me that said, “Easy Does It.” I thought you know, that’s true and I flashed the lights at him, just kind of a recognition so that he would know and he put his turn signal on, we were on route 95 and he pulled over, so I pulled behind him and I went up to the window of the car and it was a young black man in there and he rolled his window down and he said, “What the hell do you want?” And I said, I belong to a fellowship and the sign… And he said, “Are you gay?” And I said, “no, I’m not gay!” Your bumper sign said ‘easy does it’ and I belong to a fellowship that uses that. He said I don’t know how to get it off. He said I bought this car from a barber and he said the sign was baked on there from the sun and I can’t get it off. I said I’m really sorry. He said, “Well, what are you?” And I
said, “It doesn’t matter.” I turned around and he turned and said something that I’ll never forget. He said, “I don’t know who you are, but people have been blinking at me all day. It must be a hell of a lot of you out there.” So I went on home thinking that everybody out there is one of my fellow alcoholics, so those two stories primarily, there are people out there that are suffering in silence or continuing their sobriety in silence that you’ll never even know about because they’re ‘practicing these principles in all of their affairs’ (common AA slogan/reference). Ultimately it becomes the reminder that prior to 1935, we had nothing. Religion failed us, psychiatry tried and certainly failed us and all the well meaning people in families had failed us. And not that they did anything wrong, they just didn’t know the way out of this was primarily the fellowships with other alcoholics. [Transitioning to discussion on becoming a more authentic individual].

I think one of the things that happened is that, first of all you feel more responsible for the things in your life. That’s one of the cornerstones of this program. You have to learn to accept responsibility for your actions. You can’t just fluff it off and say someone else did something and the second thing is the honesty you have to be with yourself. Each day when I shave, I look myself in the mirror, I have to understand that everything that happens today is my responsibility and I better be honest with myself and with other people, and often times it’s difficult because you want to say something that will make the situation easier, but it’s not true and so even in this position that I have, I have five people that work in admissions and before we give them a position, I meet with them and I tell them, we’re going to be honest in every way in what we do here. The idea is not to recruit as many students as you can, it’s to recruit the students that one, wants to come here, and two, are fully knowledgeable about their responsibilities relevant to their education here. Not only to their education, but if they’re going to borrow money, you tell them that it is a loan and you will pay it back. This is often times over-
looked at many institutions, but when you’re honest and the students that become upset later on and say I didn’t know this was a loan, we say oh no, you knew it was a loan because you checked off when the guidance counselor told you that you were going to take a loan out for the amount of dollars and you checked saying, yes, I understand that it is a loan, but those kind of things… It makes life easier. When you tell the truth, believe it or not, you don’t have to remember everything and everything is ok, well it’s not ok, but it’s ok. I don’t feel afraid about what goes on in our admission office or what goes on in our classrooms, because tell the truth and then you find it when somebody gets upset about it, it’s the truth, but they didn’t want to hear it and ultimately we did what we were supposed to do. With this number of students, obviously the students say you said I’ll get a job right away paying $50,000 a year and I never said that and will take issue with someone on my staff, whoever said that.

If it works in the program, it should work here, and it does. I want you to keep in mind that we’re not talking about pleasant stuff, we’re talking about unpleasant stuff, but I told you what I believe is the truth. After a while people respect you for it. People understand that you’re not going to lead them… If someone does a good job here, I tell them. If someone does a bad job, I tell them because they know if they heard me and they’ve done a bad job, it’s not personal and basically those issues with the program… I’m not sure how I would react if I were not in the program, I’m just saying that I attribute this to the issues in the program. [Integrating principles of morality]. It [working a 12 Step program] just made me use what I already knew. We all know it. My grandfather used to say, you know right from wrong, even though you don’t want to look at it, it’s some voice inside of you and he used to call it your little voice and you know it’s wrong, but you go ahead and do it, but you knew along it’s wrong and you’ll tell people you thought it was right. I don’t know what that is. It’s a moral issue. People call it the soul. You
know what you’re doing. You may not want to convince yourself, but you know. So I guess that enhanced it. I don’t think it was created by my fellowship in AA, but it was definitely enhanced by it. [Concluding discussion by drawing reference to his favorite and most meaningful step, of the 12 Steps].

[It’s the] 11th step… you want to know what it is. ‘Sought through prayer and meditation to improve my conscience contact with God as I understood him… praying for knowledge of his will and the power to carry that out’. Yeah. That one, ya know, I kinda do… it’s an everyday step, but it’s important. When I chair meetings, I’ll call it an 11th Step meeting and I’ll have people repeat it before they talk. During the meeting I’ll have them repeat it so it comes up rather than say it at the beginning of the meeting and have everyone comment on it. I’ll say, repeat the 11th step and then comment on it. At least they learn it.

Ralph

My work history has been ultimately what’s been available. I often took the easier, softer way. That’s not to say that I didn’t have good values and morals. I was given them early on and for some of that I think it is part of you. It’s not learning stuff; it’s just part of you. I’ve always been what I consider to be a good employee over all; usually a strong work ethic; if anything [I] wanted to excel… to want to be acknowledged and that type of stuff. Not to be the bottom of the barrel… complex or something. I never had any trouble once I got jobs and I never had any trouble getting jobs but my first real job was in the dining services at Washington College at the age of fourteen and I worked there through my early years of college which was community college which was mostly weekends and some evenings and then when I went to Salisbury I didn’t work at all during the school year. During the summertime I was fixing cars for a local
radiator shop… the guy (owner) was actually a neighbor. I kind of got caught into that, me and my twin brother couldn’t afford to fix our cars so we had to learn to do it ourselves and it turned out we had a knack for it. It’s still a huge part of my life. I like to do that in my spare time. Out of college I had no real work skills. I had kind of an arrogance that people will be knocking on my door asking me for a job and when that didn’t work I ended up working for a guy in Princeton, Maryland. I left that job after six months of being relative unhappy and I did the same thing in DC. As they say in the program… if nothing changes then nothing changes, so I did that for nine more months after that. I left that and came home and I actually started working on cars for a guy I know locally. I did a lot of mechanical stuff there, as much as I could get into. I did that for about six to nine months then I went to a dealership and did that for nine months. Left that to rebuild transmissions for another dealership on the western shore and after that, things began to change.

I applied for… I always wanted to do something with my education. I was never completely happy with fixing cars; I always felt like I was missing my calling but between drinking and being young I just couldn’t quite get away from stuff like that. As circumstances would happen, I was off one day and I had an interview with parole and probation and on the way home from that, I stopped at a plastics company in Maryland that is no longer there and threw in an application… ended up being offered a job there, but not at parole and probation. My drinking was getting out of hand and I came home… I got a job at a local human service office who provided adult day care to people with mental retardation; I was very happy with this job as it was in part very similar to what I went to school for… sociology. The better part of my addiction got the best of me. I became incapacitated I couldn’t move around anymore and I could not keep that job. I ended up getting sober there.
[I got sober on] August 14th 2006. I left there (my job) in December 2009, so I spent three plus years, three and some change, which is probably a good place to spend in sobriety. I wasn’t fit to be around early on, but that’s often the case. Fortunately I was working, as things would happen in the process of getting sober and working the program. Some affirmative pushing from my sponsor to realize what I wanted to do in my potential, clearly he knew that I was being underutilized and I was still scared after having had enough pain, I left that job. I’d been planning on doing something different, just hadn’t made any formative plans. I quit that job on Dec. 24th 2009 and enrolled in Del Tech for two courses. I had been talking in the past year or so to some people that I knew in the addiction field, particularly some counselors that came along very similar to the way that I am right now; they got sober and decided to do something different with their lives. Went to school and got into counseling that way, so suddenly things aren’t so unattainable you know. I’m given one potential view of the future and possibilities. I had begun to look at what the state of Maryland required for education and realized while I may not have had enough, I was pretty darn close.

Certainly as time went on, speaking and sponsoring people, not only did I from time to time been told that I would make a good counselor or something of that nature. I began to actually like it and began to see for my own, rather than just a part-time gig. In the course of taking these two courses at Del Tech a job came open almost right after those courses ended as a direct care assistant at a local treatment facility which ironically I was not going to apply for because I wanted to be a counselor. The better part of my existence gets a hold of me and says maybe you should try to do something different and start at the beginning instead of jumping right in. I applied for the job and it really didn’t surprise me that I got it as the only requirement was a high school education, but it was exactly where I was supposed to be and once I got in
there and I think not having going to treatment myself other than outpatient I didn’t even have a knowing understanding of what inpatient might be about. I was quite frightened because I didn’t know what I was jumping into but I think the people that were pulling me along and trying to give me the go ahead for what I thought I might want to do, clearly knew more than I did and once I got in the environment it became very clear to me, and it has, at least it seems it have. The past three months, I’ve been working inpatient and just the other day was giving the approval that I had been accepted into the process of training. I knew I was accepted by the state of Maryland, but the local facility has a position that ironically was created when I showed up, so that I could come along.

I’ve really enjoyed the plastics jobs [in the past]; what I didn’t enjoy was being away from home so much. Part of finding out who I was and who I am and what I’m interested in doing with my life entailed a thorough inventory and one of the things I don’t want to do is travel for work. I don’t mind occasional travel. I would be away from home for a week. I would be home on the weekends, but that’s just… I like to be home. I like to be part of the community and that’s just... In these other jobs, I’ve been losing my sense of community and in recovery you began to get some of that back and then some because you’re not the same idiot you were before, you can actually relate to people and you’re actually surrounded by decent people who have similar interests. [Switching to talking about parents/family].

My father was an attorney, but he was also an alcoholic. My mother did not [drink]. My sister is an attorney. My twin brother is [an alcoholic], he works for a local repair shop, but he taught high school for auto mechanics for a few years, Queen Anne’s county and Anne Rundle County... Not in that order, but… My mother’s sister was [an alcoholic], she worked for a clerk’s office in a town in Massachusetts for her entire career. My mother has always been very open
and very loving and she’s always encouraged me to be the best that I can be, clearly in a loving way and not in a demeaning way by any means, in fact, I’ve been enabled just a little bit from time to time, but I don’t think necessarily that that’s been a down fall. That’s probably one of her assets, but until now other than working in plastics, I hadn’t had a sense of fulfillment. [Talking about the difference between being a mechanic and working in human services]. If you’re not helping people particularly in recovery, I know where these people are coming from and I know if they can hang on and do what’s recommend… what’s suggested and I don’t mean just from the perspective of a twelve step program, but behavioral modification… there’s a reason we professionals urge certain behaviors and discourage others. It’s because we do know ideally we want the best care possible and I like to provide that particularly for people who are interested in it. Certainly can’t help anybody [who doesn’t want help]. The ultimate joke is, don’t worry, if you don’t want this you won’t get it, but in my experience, when I needed help it was there. And sometimes I got help that I needed and wasn’t aware that I really needed as much as I got and ultimately that’s what got me to this point. I could… my feeling is that I could never repay what I was giving freely to me… just some small way I could make some contribution out of living.

Some of the other attributes are environment, physical environment for sure and emotional environment. It’s no surprise I grew up in an alcoholic family and my dad was at times not around and at times that he was around was not a very pleasant person to me. Not everybody got to see that fortunately but the family typically gets to see it of course as the one you love the most gets it because it’s the closest thing to you and I know what that’s like and I know it doesn’t have to be that way. [Switching to the elements of the AA program].

Service work. One of the recommendations is for somebody to pick a home group which is a group that they attend on a regular basis. And when I say a regular basis, I mean pretty much
every week, every time it’s held unless something really happens. That’s my point of view. It’s like a job you should be there. If you pick a home group, you should be there. At my second attendance at this home group, and it just happened to be this guy that I had asked to be my first sponsor, which I go back to. He told me I should make coffee at that meeting. 7:30am on Saturday morning which meant I had to get there at 6:30. I love to tell this. The joke is, I thought I had done something wrong. I thought they were picking on the new guy. What I didn’t realize is that they were doing something for me that I couldn’t do for myself. Now ideally I could’ve said, no I don’t want to do this or I could’ve came up with any excuse or just not showed up or whatever the case was, but I was… I knew I had to make a change if I wanted to feel better and that’s what they been telling me and it was very clear to me that I felt bad. Not because of what someone had done to me, but for some other unknown reason and these people seemed to understand me and knew what it took for me to feel better, so I listened.

So service work, I’ve always had a job in the four years I have been sober and they gave me the treasurer’s position for this group, which is kind of the snooty group of the area. There’s a lot of long term sobriety in this room. Now you see some doctors and lawyers in there that you don’t see at other meetings and it was quite an honor to do that for me at least that’s been my point of view of it, but on the flip side, no one else wanted to do it. It’s pretty thankless job, but other than that, up until this year, I usually keep two service positions which have included speaker seeker or secretary of a meeting or whatever the case may be. I don’t carry the alcoholic… I carry the message. So I’m not interested; I will not give anybody money. I give rides from time to time, but I am certainly not a taxi service. I’ve been asked to sponsor guys. I currently sponsor one that’s doing anything, so I believe that’s a huge part. Staying involved; if you get in the middle you have a good chance of staying sober, making this a part of your life.
Behavior modification; if you stay on the outside and you continue to look in and don’t participate, such as service work or whatever it may be, I don’t think your chances are that good. I can point the finger around. I’ve seen a lot of that. After 72 hours, you don’t get any more physically sober than that. So what do you do with the idiot that’s still available (referring to oneself)? You got to treat the idiot and that’s where it comes to working the twelve steps.

I continue by sponsoring guys, I continue to question or evaluate my actions or motivations. I make sure that they’re genuine and clear and helpful. It’s just my job to carry the message and to do no harm which also means to do good for these guys and give them what they need and if I see they need something other than what I can provide, I need to let them know that I don’t think that I could be helpful in this area and it’s up to them to find somebody or something else… I can help them with that. It’s one of the things that I strive for and I think it’s key to remain partially detached because you can’t get somebody sober and you can’t get them drunk either. So, their success while it may be attributed in part to you and certainly some credit is due… it’s not as much as it’s often viewed. Failures are also not belonging to… They’re belonging to the sponsee. Ultimately relapse happens long before somebody picks up and hopefully a good sponsor will see that, but somebody who doesn’t want the help… they’re not going to get it. It’s kind of a fine line between helping and hurting. I believe in letting people feel their own pain because I learned pretty well through pain. I seemingly don’t learn any other way.

[I think we can be] enabling, yeah and we can, we know all about that. We’re very good manipulators and I also have to be careful about being manipulated. It’s easy for sponsee’s to do that. I don’t mind doing some small things for people because I want to be of service. It’s my job to model behavior so that hopefully that would be returned not to me, but someone else. Hopefully the chain won’t be broken, but it’s also not as you mentioned… it’s also not
conducive to sobriety or future good behavior to do too much for people. That’s dangerous as well. [Experiences with manipulating others and/or being enabled]. I totaled a car when I was sixteen, intoxicated, and that car was given to me. It wasn’t a very nice car, but it was given to me. It was not replaced. I didn’t very much like that. I would’ve liked another car but I had to buy one at that point and things changed for me. At least initially and after a while just before my 35th birthday, I managed to wreck another one. This time it was a very different situation, but at that time I couldn’t stop drinking, but at the age of 16, I could, but I didn’t want to. If I could, why would I? I believe that the using the literature is non-negotiable (referring to reading AA literature). The steps are outlined in the basic literature or text. For me, as student of sociology, that creates a common bond; it’s a common reality between people who want to stay sober, and for that matter, people who don’t. If you read the literature not only does it give us something to talk about, but it gives us some not so strict guidelines on how we want to do things. And people recover from that. It’s not a mystery that it works. You see many counseling steps or modalities in the big book; anywhere from behavioral, cognitive behavioral, existential. It’s not a mystery why it works and by sticking to the black print is a guarantee you will do it the same way as everybody else has done since 1935. [Switching to how literature is used in recovery program].

As we use steps I have my sponsee read out of the Big Book and the Twelve and Twelve (a piece of daily reflection AA literature), so that we’re both clear about what the instructions are. And then if there’s any interpretation there, I offer up what I think is a good ideal…a good approach, and often times that is the way my sponsor showed me how to do it. It doesn’t mean that’s exactly what’ll work for him but it’s what worked for me and if he needs something different we could come to agreement there, but usually I know better than he does, because I already worked the steps. [Commenting on non-AA literature]. I’ve read a couple of books, but
that’s been freelance for me. I’m not sure if any of them are approved (by the organization of AA; certain literature has been approved by our organization to be included in meetings). One of them is called Drop the Rock. That’s on the 6th and 7th step. It’s about character defects. There’s another one…I can’t even remember the name of it; I haven’t picked it up in so long; I haven’t quite finished it. I also read, very early in sobriety, a little white paper back called “Under the influence.” That explains a lot of the physiology of an alcoholic and what happens to us and how our bodies metabolize alcohol and how sugar mimics the by-product of alcohol. It’s kind of funny seeing us eat sweets after reading that book. You recognize what the feeling is. [Moving on to another element of our program, which is being sponsored/mentored].

Absolutely, that’s a non-negotiable aspect to sobriety, particularly early sobriety. Because most people when they come into the group they don’t even have a nodding acquaintance with what’s going on here. And if they do if they’re just coming back, clearly they’ve missed something. It’s important to get somebody who understands and you don’t have to have a Ph.D by any means for this. I know a lot of guys who I think have fabulous sobriety who are not exactly ‘Big Book Thumpers’ (the guru’s of the text) but I think that they really understand what’s on these pages and could take somebody through the process and help them stay sober and help them recognize the whole point is to recognizing your part and I can’t stress that enough. If you don’t recognize your part in sobriety, you’re doomed, you’re absolutely doomed, you might as well go ahead and drink or drug or whatever it is you choose to do because you see your part and we’re not talking about just using, we’re talking about fear and resentments and ego. The chief activators, as the big book says. We’re all very much a like even though when we come in we often feel unique. That’s a terminal uniqueness. If we don’t get past that, we have a lot of pain ahead and I experienced some of that. I stayed in a job way too long but I had to have
enough pain for motivation and quite frankly I don’t think any earlier in sobriety I would have been capable of being a counselor. I just don’t… things happen for a reason.

I had one sponsor initially who was very good for about a week, or a week in a half. Then he wasn’t being responsive. He wasn’t calling me back. He made it clear for him to be my sponsor we would work the steps. I said yes because I didn’t know what else to say and when he stopped being responsive to me I knew that was not going to work because I was a very sick person. I wanted to drink and I was sober. I needed to do something and I had in my head that I was going to ask another gentleman. We’ll call him John, to be my sponsor and I knew I would see him on a Saturday morning so I had it all planned to ask him… this was very interesting. I was making coffee and this guy showed up to make coffee early to make coffee. It was another guy, it wasn’t John. I was telling him that I needed to find another sponsor and we were discussing the situation. I thought that I would be doomed if I didn’t and immediately it occurred to me that I wasn’t supposed to be asking John, spiritually, I knew I was supposed to be asking the guy that I was telling the story to and he is currently my sponsor today. So it’s often times… he’s been very gentle with me.

Sponsorship is for as many different people as there are in the program there are that many different sponsors or different ways of sponsoring. I don’t know what wouldn’t work for me and I don’t know what would have. I know what did, which is the way I was sponsored. He had a fair amount of time in… he was almost 30 years sober when I had talked to him. I knew he had a way about him… an ease. He knew the program, I had seen him around for a while, and I knew he wasn’t coming around for an ego boost. It was never like… “well I’m sober and you’re not”… he’s not a Big Book thumper. He’s in his seventies I think. He’s retired from the CIA, although he wasn’t a gun toting investigator… he spent some time in Japan… had something to
do with… he’s fluent Japanese… I think he had something to do with translating the Big Book in Japanese. He’s an intelligent person and that is one of the things that drew me to him… but he didn’t flaunt his intelligence… he didn’t need to. But you could tell that he had been around and that he was willing to use it. My sponsor was very big because I found that I had rather strict requirements for people; but I’m also guilty for not being as good as I can be from time to time. One of the speakers that I listen to says that I’m often guilty of requiring people to get too good too quick, and I have to remember that. My sponsor always says “cut people some slack” and that’s good cause then I can also tell myself to cut myself some slack when necessary; that doesn’t mean sloth; settling for patient improvement instead of immediate perfection. It’s about living life. Switching discussion to how perceptions have changed since being in recovery].

My level of acceptance has been dramatically impacted. I would also say in part my level of understanding, but I think I had a good level of understanding before but I just wasn’t utilizing it. I may have had a good idea of where people were coming from but didn’t have any patience or tolerance. I often thought I might know what people were thinking, but what I found was that I really had no idea and just by being open minded and willing to change has been absolutely huge… sometimes the best action is no action and that has been huge (recognizing the new perspective that not doing something is a decision too… not doing something, and doing nothing, are not the same). Not having to be the center of attention, not having to control everything, and being willing to look at things from a different point of view. [Talking about perceptive skills prior to recovery]. I think that I had them. Clearly they’ve grown substantially (spoken with emphasis). I know that later in addiction I was absolutely unable to use any of that. The emotional sickness was very pervasive compounded with the need for substance abuse, the lack of control… couldn’t stop drinking… it was a vicious cycle and your world becomes very small
and after a while none of that matters… clearly it doesn’t matter. Your efforts are spent functioning and not growing; you’re in a constant regress situation trying to heal and not being able to. [Transitioning to the conceptualization of morals].

I thought that I had good morals and values; in fact I did. But I was not practicing them and was certainly not able or capable of looking at things from a consistent perspective as the disease progresses and use (drinking) increases… you become mentally incapacitated more often than not even when recovering from drinking. You’re just not capable of making these moral decisions, and you’re also accepting more situations that have been formally unacceptable. It’s a constant ah, what’s the term I’m looking for, not re-evaluation, but… you turn a blind eye to things just to be ok. Ya know it’s ok to think that somebody is a bad person because they don’t deserve the car their driving but a buddy of mine says I hit my bottom when I started decorating. A level of acceptance, for lack of a better term is just the pitiful and incomprehensible situation that we find ourselves in. We say we would never go to jail or we would never lose a house or wife and fortunately I never did any of those but I was becoming very close to that. I was finding myself in situations that I didn’t recognize the person that was in action… I’m not talking about blackouts… I was never really a blackout drinking person that I recall, all jokes aside, but for example I don’t believe in fighting… no one ever wins a fight, but from one particular instance I found myself in somebody’s space daring him to start it… and thank God it never happened cause things could be very different for me today. The renegotiation of morals I guess, that’s an interesting term. It’s not ok to do this, but it’s ok for me to do this in this situation and that to me a level of insanity and I see that a lot in the people that I deal with today… the self centered fear (spoken with emphasis).
And that’s one of the things that enter into my mind today before I make a decision on something. I have this filter in place that wasn’t in place before that I use before my mouth comes open and words come out of it that didn’t use to be there before… it’s the ability to screen what may or may not be forthcoming and when it comes to morals and values there is no negotiation right now, and what I mean by that is it is an unconditional behavior; it is not acceptable to do certain things no matter what… no matter what. Its practicing love and tolerance unconditionally even to the guy that’s tailgating you… recognizing where you are and where you want to be and not-not falling for a re-prioritizing of things because of the current situation. Obviously if you end up in the hospital for some unknown reason priorities do change… but keeping your eye on the goal. It’s not ok to sign up for school and miss class… regardless. I do some sort of physical activity weekly and what I find is that I don’t really negotiate with myself… I do a certain amount and at times I need to be able to cut myself some slack, but I also recognize that I can’t cut myself too much slack… then I’m not achieving or working toward the ultimate goal whatever that may be; it’s a consistency… that’s a great word… consistency regardless whether you’re driving your car or in the grocery store. Um, whether you’re in the bank line or getting your car repaired… its amongst all people… men, women, children, race, sex… it doesn’t make any difference…. It’s a consistency and recognizing when it’s tempting not to be consistent and what is appropriate why you feel that way. That’s a part of sobriety, and if it isn’t it should be. [Switching to discussion on the spiritual nature of AA].

It wasn’t hard for me [making sense of the idea of a higher power], I’ve always believed in a power greater than myself. I grew up going to church but I don’t go to church on a regular basis today by any means. Ya know, as an alcoholic when I was doing what I thought was ok it
took a lot of work and a lot of control. It’s easy, at least I think to mistake how much I was controlling for who was in control. I was very mistaken there and the cars only line up so long and then things get way out of control. It’s quite a rude awakening. I can’t imagine what it’s like to wake up in a hospital or in treatment and not even knowing where you are. To me that is clearly out of control. My sponsor says that when people are making major decisions about things in your life and you ‘ain’t got no say that’s powerlessness’. I thought I was in control for the longest time… I hadn’t lost a bunch of stuff. I had a lot of never’s or not yet’s so I could look at that and justify a lot of things.

Now for a higher power when I first heard that 3 lettered G word…. God. I thought ut oh, I’m not sure I want to be a part of this but I knew I had to do something different for me and I thought this was the last stop till thing got really bad…. till you end up in jail or homeless, or in treatment… God forbid treatment (laughing). But, ahhh, you become your worst enemy and recognize your worst fear. A higher power is just recognizing that you’re not in charge. To me, the best description I can come up with is harmony. If you’re not in harmony with your own environment you’re not recognizing a higher power. Simple put a lot of people say here’s what you need to know about steps 2 and 3… there is a higher power and you ain’t it. I heard somebody from New Jersey say once there is a God, you ain’t it, He (God) never believes he’s you so don’t ever think that you may be him… that’s all you need to know. It’s that simple. Somebody in the room says their trying to find God and you say back “God’s not lost”. I look back on situations in my life and clearly this is reframing just in a spiritual way. When I wrecked my last car I knew I was going to have a court date so I stand up in front of the judge and I’ve been sober ever since and have been trying to do the program. I hadn’t gotten it yet and I was still sober and things were moving along rather well. I was right where I was supposed to be and
this was my first DWI and he (judge) says I’m going to give you PBJ (probation before judgment) which was what me and the lawyer were looking for but he also gave me 18 months supervised probation and I thought that was excessive. How excessive is 18 months of probation for somebody who has just totaled a car drinking and driving a car and could have killed somebody. Clearly I was mistaken about a higher power. Here’s the funny part… it took me up till I was close to a year sober till I began to have a real spiritual awakening. And part of that was to recognize seriously and internally, what I am and who I am, that drinking had not always been injurious to me, but I knew it had stopped working because I was just drinking to get even and I was drinking to survive. I had one or two good days and that was about it. And that’s not very spiritual and I didn’t know what I was experiencing.

At about a year I gave up fighting (mentally) and entertaining the thought that I might be able to drink normally, and I don’t know why, but I had done enough with the program, I had done everything they said, and finally I was tired of fighting it. I can drink, I’m just not going to drink today, and that’s when things started to change for me, so ideally, the judge knew, he didn’t know, but the judge knew that he had to give me a certain period of time to help me, to help me get to a point where I could make rational decisions on my own. It takes the human brain other than that of an alcoholic or addict, I guess, at least 6 months to internalize change, I mean real change. We’re not talking about going from eating a cheeseburger to eating a salad for lunch, were talking about ya know real spiritual change, living your life in a better way; changing ‘people, places, and things’ (common AA saying). And it took that amount of time for me. So, spiritually, when you reframe some of these things… situations, that I don’t have any part in when I look at my current employment situation, when I can say poor me about having to give up that other job where I was suppose to own the other part of that business… which was
the whole point of me coming around, I was suppose to learn it. I can look at myself as the victim or I can look at this as an opportunity; clearly it was an opportunity to move on and to grow. So spirituality comes in in a whole bunch of different ways and a huge part of it is just your perspective. I hear some people say that they get up and pray, and go to bed and pray, but I know when I need to take a minute and re-evaluate things when life gets out of control or if I’m letting some situation get ahead of me… I have that ability today to slow things down. Suddenly certain things I’m not trying to do anymore… their automatic.

Jerry

I started working at the rehab that I went through in 1988 and worked there through around 1992… that was probably my first job working in human services and that has been 18 years I guess. I started working to kinda get exposed… my initial pull was just kinda through the help that I received… I was new in sobriety and getting therapy and being in rehab and on in a halfway house, although I worked as a nurse prior to this. Prior to being a nurse I got kicked out of a college, living at the beach the summer before, that and working at an ice cream store (laughing). Um, and first got exposed to the 12 steps and basically got confronted that I have coping skills that are dysfunctional and that I use drugs as an escape from dealing with my feelings, and my thoughts, and life, and that I probably have some underlying issues with anxiety, and inadequacies, and life. So that was my first intro to why I did what I did. I was about 19.

They (the treatment facility) had suggested that I go into a halfway house near Wilmington where I lived and I wasn’t too hip on doing that initially being young and being from the suburbs and my perceptions on what a halfway house was like… like a flophouse, like a
homeless shelter kind of place that why would I go there when I could go back home and have my meals cooked for me and all that good stuff. Ya know, I got this recovery thing, ya know, I’m gonna go to AA, get a sponsor, work the steps, make friends, I already had friends in AA that kinda steered me into AA that steered me into recovery. After being home for over a week or so I quickly…. I wasn’t in rehab anymore, I wasn’t in that safe shelter, I wasn’t protected, my old friends were calling me and I was doing everything that I was supposed to be doing for recovery but I was still essentially that same person with all those perceptions about life, myself, and other people that all came together as this big negative view of myself which just perpetuated this cycle of depression and anxiety. So I decided to go to the halfway house after I began to feel unglued so I went and stayed at this place for about 13 months with 16 other guys, group 3 times a week, individual therapy... I started almost every day with a certified alcohol and drug counselor, and thank God for him cause he spent a lot of time with me not so much in working step work but more so fundamentals of why I am who I am. In my life up and till then what made me into who I am; we did this daily for 6 to 8 months; I kinda see him as like a mentor; I held him in high esteem; he had been sober for about 12 years and was probably in his early forties; he was a Brother of a Catholic church.

[The therapeutic work done with my counselor was] more like feeling identification… thinking back, that was our overall theme… identifying my feelings and the connection between what my brain was thinking and what my body is feeling. It was routine for him to ask me how I felt and for me to respond “like shit”. Then he would come back and challenge me with “ya know shit is not a feeling”. He’d give me the rainbow of all the different feelings and I would put my finger on whatever the feeling was…. for there would be ‘why are you feeling that way or what brought on that feeling’ and there was more of an identification process of my issues. I felt
afraid because I thought that somebody would figure out that I didn’t think much of myself or maybe that they would actually realize that I really was a piece of shit… I don’t know what I’m doing… ya know it just all boiled down to inadequacy, anxiety, not feeling that I was enough, not feeling like I fit in and all of that. It was from there that I felt I had identified the problem of where I’m coming from cause I had no idea at all as to where I was coming from. My best thinking before I got into recovery was that God made me the way that I was, he made me this way, I believed in God and I prayed to God to take me out of my own way to give me a better life, and that never happened so I figured that it was His will for me to be the way that I was, feel the way that I felt, think the way that I thought… and all that.

That’s what I came up with, but I knew better than that obviously because I asked for help. My friend Eric in particular that was in recovery for about 18 months who I had partied with, ya know, done a whole lot of… so… I knew that he had… and I had partied with this guy… so I figured if anybody could understand where I was coming from it was him. If he had been successful with this for 18 months then maybe there was a chance for me. Maybe he could give me some answers so I called him and that’s how my process of getting into recovery started. It was through him and relating to somebody else’s thing and that’s a lot of how my early recovery was fueled by identifying myself in other people… I got a lot in that knowing that I wasn’t the only one who felt this way; a lot of validation. I could see progress from where he was.

That kind of grew into my identifying (with Eric) to identifying with everybody I came in contact with within the program; there weren’t a lot of young people in AA at the time, but in the older group I could identify with the things they were going through… it was just later on in life. I benefitted from their experience even if they may had been drinking through things that I was
going through, and it also reinforced that I was making the right choice because they had waited 10, 20, 30 years later than I had and lost jobs, houses, families, which I hadn’t thought too hard about acquiring yet… but had lost all that stuff… but it reinforced that this was the right way…. Everything just seemed to fall into place and felt right. [Returning to talking about the halfway house].

I got there in 1988 and initially you don’t really do much of anything you’re just there, show up, going to group, you have to be home for dinner by 5:30, you had to go to a meeting every day, there were phases that you had to go through, everybody had a house job. After you had been there for a while you talk about getting a job or going to school to gain some skill; I actually went to voc rehab (State Office of Vocational Rehabilitation) for about 6 months; I got trained as a bookkeeper; I benefitted from them dramatically, they even gave me money to put gas in my car, and eventually I got a job at PNC bank. I got the job of senior resident about 13 months into my halfway house stay and at that point your main responsibility is just making sure that everybody does their job… you really got to know the guys in the house… talk about diversity… black, white, Hispanic, gay, straight, young, old, I would say out of the 15 guys there I know at least 4 that are dead… 3 suicides.

[Relapse rates in early recovery are fairly high]. I think if relapses or SLIPS (acronym for ‘Sobriety Loses It’s Priority’)… same thing…. If they were maybe taught in a different way. I heard that relapses are a part of recovery which I don’t totally agree with…. They don’t have to be…. But my biggest… I think it is harder especially if you’ve had a little bit of time because people in AA place so much emphasis, whether they admit to it or not, I know for every one person that emphasizes how much time they have there are two people who say that time doesn’t matter ya know it’s one day and blah blah blah but I’m telling you as alcoholics were egotistical,
self-centered, that shits important to us ya know time is important to us especially the longer the amount of time that you have… it’s a pride thing… it’s a guru thing. It’s a status in AA that you don’t get anywhere else in life, but you get it when you’re in AA and you knew who the old-timers were when you went into the rooms ya know and I think that was everybody’s goal to be where they were, or at least to what the idea of them was. I’ve been sober for a while and have come to realize things very differently… that they knew what they were doing but they don’t have the answers anymore than I thought they did. [Switching discussion to learning through time in sobriety].

Early in recovery there is this urgency to learn it all… to know it all… um to get it, to understand it… consuming knowledge…. So that I could be comfortable, safe, and adequate, and I could feel balance as much as I saw in the people that were sober for a while…. There was still this anxious pang of get it done, get it right, be perfect ya know don’t let other people know that you don’t have the answers and stuff um so that changed slowly and evolved into an I don’t care as much about getting it all or knowing it all… in my experience it never will…. My biggest quest in recovery is just to be comfortable in my own skin. Quoting the big book and knowing exactly… I had this idea that these old timers (persons in continuous recovery for many years) had this knowledge about the steps that I didn’t have um like there was some intimacy involved with what they knew… oh what’s that saying in the Big Book… the intuition or being intuitively able to take care of the problems (or situations) that use to baffle us. Essentially it changed from having to know or sensing that I had to be this good AA member and I had to do everything right… like I was being judged by these other drunks (laughing); like I really cared about that so much… because they always had this hanging over your head… that you might drink…. Ya know, and here’s Bobby Jo and Mary Ellen, and look what happened to them…. They didn’t
work the steps, they didn’t do a fourth step (the personal inventory of deficits), they didn’t have a sponsor, they didn’t have a home group, and that’s what happened… I think there is probably more to a relapse than that…. Then not doing a 4th step… I know people who have been sober for 20 years and never did a 4th step… that have not had a sponsor since their first anniversary in AA. I myself didn’t have a sponsor from about year four to about year sixteen. I didn’t feel like there was….., I don’t want to say that….., I didn’t want to make a commitment to somebody or to get that involved.

This has kind of been my learning in AA and my experience with AA early in recovery. Probably about the first ten years was more of the same thing. Um, the circle of young people grew to about maybe twelve or fifteen of us. Um, they were all between the ages of sixteen and twenty-four I think….no…probably my one roommate was twenty-eight I think. Um, we were all tight. We did like, we went to meetings together, we had our own young people’s meeting that my friend Dave and I started. We went on ski trips together. My friend Roy had, he was a little bit older, um but he had a nice place and on Friday and Saturday nights he would have us all over. We stayed Saturday night until Saturday Night Live was over. We had popcorn, soda, smoked about a pack of cigarettes each in the time we were there, um, there wasn’t any step work, there weren’t any Big Book readings, there wasn’t any real service work. I would say that was not completely true, occasionally we would go to , um, places like Meadowwood Hospital, which is an inpatient Psych facility, um, Rockford Center, um, which is the same thing, um, stuff like that. And I was approached for, trying to remember who it was by, somebody involved with the school system and I kind of got on the, um, school circuit there for a little while and I spoke. I would kind of go in and I went to a school in northern Delaware for a few years and boy’s Catholic school, and where else did I go, a high school. Um, basically went in there to just kind
of tell my stories to the kids, kind of like, you know, don’t do what I did type of thing. I remember... it was like health class or something like that. [Changing discussion to sponsorship/sponsoring].

The reason I came back to getting a sponsor... and it was always still with me real early that if you don’t do these certain things in AA you are going to drink again, um, or you’re not going to fully benefit from life, um, or self-actualize was my idea of, you know, doing all the twelve steps you are going to come to this greater knowledge and this spiritual awakening and God is going to finally love you, and um, all of these absolutes. That if you don’t do this kind of stuff, and I did a fourth step when I was, and this is how it kind of started, um, when I was about six months sober. I had no idea why I was doing it, um, all I knew was what I had read, you know people, um, you know people who had done this fourth and fifth step, um, found that as they were, you know, talking about all their resentments and the parts they played and, you know, all that stuff, that they started to melt from minute to minute, and got this from the book probably (AA Big Book), but my idea was that the skies opened up and the sun shone down, and I finally felt everything I was looking for in recovery, which basically I was looking for a high in doing this and that didn’t happen at all, because I don’t think I was mature enough, I didn’t have the insight enough to really realize what the fourth step was, um, or how, and the way it was taught to me was not completely correct either. So it was always, you know, I felt like I should do another fourth step. And that went on from six months in recovery to fifteen or sixteen years of recovery. I would talk about it, um, at meetings. I started going to around maybe 2000 (calendar year), I started going to this men’s meeting, um, on Friday nights and it was just this, it was at a church where I went to my very first AA meeting. There were three meetings there and the one I had gone to kind of dissolved. It was a smoker’s meeting and it kind of unraveled, um,
and then there was a seven o’clock and an eight o’clock and, um, the other smoker’s meeting was an eight o’clock meeting so the other one, the one I started going to that I hadn’t gone to before, was kind of like an old-timer’s meeting and kind of like the grand poo-bah meeting.

There was kind of like five or six old dudes and I figured they were talking about their guru stuff, you know, all the stuff that they knew that everyone else didn’t know. Didn’t really feel welcome there at nineteen or twenty, you know, um, but again, there was my friend Eric, same dude, who stayed sober also. He was going there, and um, it was either that meeting or this working class men’s meeting, um, which was very full of ego and self-centered, it was just too much for me, I didn’t like it. So, I started going to this meeting and I found out these guys, no later, where guys that were my age now who had been sober for about twenty or twenty-five years and had all gotten sober young and gone through stages of almost everything that I had gone through, getting sober as my sponsor talked about living in the AA fast lane, going to meetings, diners, and dances. Yeah, yeah, yeah that was the AA fast lane. Um, and that is what I did. Whenever there was an AA dance we would go and the diners and all that stuff, um, that is what these guys had gone through and my sponsor was on ten years recovery and because he knew all the answers, there wasn’t any more that AA could offer, um, and then not all of them, but a lot of guys in this meeting, their stories were very similar to mine where, you know, they had gotten sober on fellowships, um, you know had gone through how AA changed their lives, um, you know… become responsible, become accountable, um, but never worked the steps and never dealt with ego or self-centeredness, or pride, or um, any of that stuff and when they did there was like this whole other doors that opened up that became much more important.

The humility, tolerance, you know, facing your ego and doing the things. It was tough to do, which basically is to questions my motives like why am I doing certain things. So all of this
kind of came back around again and it was kind of like I loved going to this meeting, and I loved, you know asking this dude to be my sponsor and I ended up doing another fourth step and it was correct, you know, where I listed my resentments. I listed the reasons why, um, and what my part of it was, what defect of mine was part of this and that is something I had not done. I had not opened those doors or shined a light in there for a very long time. And I wasn’t running around being pissed off or angry at people or feeling self-righteous or anything like that, um, you know, but I was still self-centered. I was still that. [Switching to the role of the literature/discourse in recovery].

Well back then… not a whole lot. I could probably recite at one point ‘How it Works’ (see Appendix C) from chapter 5 (AA Big Book) cause at one point I had read it so many times. Um, and portions of step one… or other different steps just from going to step meetings and stuff like that, um, back actually like absorbing it and um and I still am not someone who reads the literature like everyday… maybe once a month, but as far as working with a sponsor, it was integral in understanding it more because that’s what we would do when we would get together is sit down… we would talk with this guy Eddie… he’s 45… aside from his relapse um he’s probably been sober for 25… 26 years, or something like that, and this guy has the intimate working knowledge of the Big Book, and the 12 step book (The Twelve Steps and Twelve Traditions); he’s more of a book kinda dude, and working with him, or anybody that knows the book, knows portions of the book, that can pull up a paragraph based on what it is you are talking about, or going through, at that time, and it all points right back to me… my ego, my part, my responsibility. That’s what that book speaks to me… it’s keeping all of that understood, and keeping the light on my part, um, the person that I put out there, the energy that I put out there, to other people, and I don’t know if this comes from the book or not, ya know, even not on just
little things… I don’t know if this is appropriate or not for your dissertation but he has been married for 12 years or so and he does not masturbate because that takes away from the relationship he has with his wife, and that’s something like…. [a moral]; he made a commitment to his wife, to honor her, and to make her feel secure and doing that…. and she might never know… but say that night and he comes home and she wants to have sex and he masturbated that day and he doesn’t feel like it and that in turn is gonna effect how she feels about her and him and yeah, and I can throw that in there to, so yeah, morality, also, ya know.

Here is another example… after I became a nurse at the rehab, I worked there initially, before I had gone to school or anything, but then went back to work there for about 6 years and the President of the place was a kinda hard ball dude and he had changed the program over there from ‘chemical dependency’ to ‘co-occurring disorders’ and ah he upset a lot of people when he did that cause there was this homey atmosphere… anyways… I’m digressing… the dress code there was business casual and I would wear scrubs usually just cause it was just easy… and on the weekends… I would work every other it was pretty common for people to wear jeans and everybody did it and I did it too occasionally. One particular weekend he decided to come in and ya know, and do a little round about inspection and he was just fuming cause everybody was wearing jeans and how dare they and blah blah blah. I was the charge person that weekend….

Um nursing staff whenever the other clinical staff was gone… nursing staff is in charge to make clinical decisions and stuff ya know it was me and somebody…. I can’t remember who I was working with but he was looking at me as the responsible person and I was wearing jeans… and he said to me as I was leaving that day “Ya know Jerry character is doing the right thing even when nobody else is watching” and I mean I was just pissed cause it cut right back into… you’re worthless, you’re inadequate, all those things… and he was right, ya know, when it comes down
to stuff like that when people say things to me ya know, that piss me off… I mean I have to take a look at that… that is something I learned in AA… whenever you’re pointing a finger at somebody else you always have fingers pointing back at you. I thought about that… that was just another…. oh what’s the word…. just something along with… it just resounded with me… doing the right thing when nobody else is around is a definition of character and ah that has absolutely changed me…. and it wasn’t necessarily just because of his statement, ya know, 15 years ago if I threw something in the trash and it didn’t go in and nobody was around I probably would just have said screw it, but now I have a hard time walking away from that… it may sound silly… but that kinda speaks to it… and even more so as a nurse. [Changing discussion to applying AA to life].

My overall pull is to do what I’m doing and giving back… I’ve found that giving back feels just as good as getting, ya know, again like part of what I felt my responsibility is and based on things that I’ve heard, ya know… there’s a time to take ah from AA or from the members in the rooms, and there is a time to give back, um, and I kinda feel like I’m past the taking stage although that’s probably not true, but it feels good to get help when you finally let down your guard, and you say I’m not enough, and there’s 10 people there pulling you out of wherever you’re at, ya know, and a lot of times just with a silent ear or words of encouragement, or words of advice, or statements to you that stick with you like things that I mentioned… and then giving back and realizing that as I’m speaking to somebody I’m wondering who is this talking and it’s a combination of um just people that I have grown to love and respect, my sponsor, my first sponsor, my counselor when I was in the treatment center, um people that have no relationship to recovery at all that I have gotten to know that just stand for something, ya know, they just stand for something and they do the right thing. And so these things are coming out of my mouth that
I’m saying to people that are the synthesis of everything that I learned about myself and other people that have just kinda grown into my own understanding about people now is that we are all totally connected, that we’re all not all that dissimilar, recovery or not recovery, as human beings were all not that dissimilar, how I respond to certain situations is how most people will respond… there are just varying degrees of emotions that are either proportional or disproportional to situations, if that makes sense.

We’re not all that difficult to understand ah (referring to alcoholics)… it still irritates me when I here…. When I sit down with an patient and um and if it’s a recovery thing, and they ask me ‘are you in recovery?’, and I know exactly what their thinking… if you’re not in recovery, I’m not going to open myself up to you, cause you can’t possibly understand where I’m coming from and I can probably say 9 times out of 10 I tell them that I am cause I know where that mentality is but I might follow it up with ya know, where not that difficult to understand, were adults in 12 year old mindsets who want what we want when we want it and were insecure, depressed, anxious, and we don’t know how to relate to people cause we haven’t been taught or we’ve had bad teachers, but I think we’re all completely capable of learning all the lessons and all the coping skills cause it’s not… it ain’t rocket science; their feelings provoked by situations and stimuli that I think again… fundamentally we all kinda respond to things the same just at different levels ya know and a so yeah. [Switching to sharing recovery stories].

Telling stories; listening to stories. The thing that I always…I love to go into speaker meetings because that’s kinda how I got sober through kinda identifying with other people, especially when they would talk about their feelings during situations and um and what I also got out of and still get out of hearing other peoples stories is the depths that they went to and the things that they lost… how close they came to dying or losing everything has been just the
reinforcement that I’m doing the right thing. And telling my own story which I haven’t done in a
while; I think it can be um ego feeding and on the other side I think it can be kinda cathartic ya
know… where I kinda go over everything all over again and as long as I’m not saying ya know I
drank and drank and hurt all these people and did all these things but look at me now… I’m
doing great and got all my shit together and um…

The way that I want to tell it [my story]is from a more humble place where I have learned
to be a more moral person um a less ego-centered person and even call attention to the fact that I
have been that person, and can be, and still am at times, but I’m so much more aware of it and
that’s not the person that I want to be because to be that’s not being a man, and standing up, and
doing the right thing, being where I say I’m going to be and doing the things that I say I’m gonna
do; ya know… being responsible in essence…. Being a good husband to my wife… getting
married was in essence a huge for me especially to a woman who has 3 kids, and making a
commitment to her and what that meant and having a sponsor ya know who kinda…. he just
kinda made me realize things that I think I kinda already knew and then having someone to kinda
emulate was helpful in kinda making this commitment because I was always afraid of making a
commitment to somebody cause I did think I could be… I didn’t think there was any one person
I could stand (laughing) for the rest of my life, but yeah but making… I mean knowing inside
that this means something more… it means… it means being a man, and to me being a man
means doing what you say your gonna do, being where you say your gonna be, providing for
your family, trying to be a good role model, and I can’t do that when I’m talking out of both
sides of my mouth, especially when there are kids around cause they’ll be the first ones to let you
know when ya know you’ve said something or done something that isn’t what you’ve tried to
teach them and ya know… you don’t even have to say it, you just see it in their face… ya know,
freakin’ out driving down the road, or criticizing somebody that you don’t know… those are the things that I think about ….

Thomas

Quite a few years before that (referencing his sobriety date) in 1974, I was finishing up the outpatient [treatment] and starting at the University of Delaware, September of ‘74, so my undergrad was 74 to 78. I was free of drugs at that point and during my college career I picked up drinking again and at that point, I mean in that era, the outpatient was not saying don’t use alcohol, they said use it responsibly and I wasn’t capable of that over time. Starting out I was pretty responsible. I graduated high school in 1969. I was actively addicted, so I got in trouble. In 1974 I was motivated to enter. Started at the University of Delaware and did undergrad in psychology, got my BA (bachelor’s degree) and began working full time. By the time I hit that, I was very motivated and my life was a mess and I was working very hard to change that. By the time I entered the master’s I was using drugs and I completed that program. I was still very motivated, but I was losing control again. So I graduated with a master’s in 1980 and then got sober in 1983 after things got really bad. I got sober and I was working in an outpatient setting. Actually I think the law (licensure for counselors) passed in, I’m guessing 1988 that it allowed us to be. You couldn’t with a master’s degree. I went through a process. It took me a long time to get my license because I had criminal charges that they wouldn’t accommodate in the licensing process, so it took a superior court decision. So I ended up fighting and appealing; that was at least a three year process.

[Today] I have several jobs. Outpatient I do part time. I’m just starting up a practice closer to home. Not my practice as an independent contractor with an agency and then I have
another one like that. So I do two nights now and I work full time in a different job so… I do outpatient for clients at night, probably after work. Maximum of two nights a week; I don’t want to burn out. I try to keep my identity as a human service professional out of the rooms of AA and I think that I do a pretty good job of that; to the point where my home group is up in Wilmington (about 1.5 hours from home). After years I was talking to a friend of mine that identified me as a person that worked at Amtrak. So he thought I was one of those guys. So I don’t generally talk about what I do at work in the rooms (‘the rooms’ is common language for an AA meeting). Some people know it but most people don’t, so I try to keep that out of there. Being a member of AA very much impacts how I do my professional work. I’m not overbearing about that. I don’t force that on people, but it’s definitely part of how I operate. It’s kind of behind the scenes. Some people pick up on it if they had experience in the program.

I rarely use self-disclosure in my work. I did initially as I was learning by example and generally my agency that was part of knew who I was. In that agency people knew me as being a client and a counselor later. Since then (early in my career), I rarely do. He was a client for more than a year. When it came time for him to return to work he ask me for that letter. For some reason I commented to him about something… ‘I said in my addiction’ and I didn’t even realize I had said it and his jaw dropped and all of a sudden it looked like he had a stroke or something. His mouth was open and I was like what’s up and he said, you said in my addiction, you’re in recovery. Generally unless there was some reason or what I might have thought was a reason 20 years ago, isn’t a reason today. When you’re new in the field, I mean part of that was agency reinforced back then. I’ve have had variety of positions over the years. The residential program I participate with in jail people knew. I don’t know if I told them but they just talk in residential…
they figure it out and they know that. So when it’s like that, I’m much more open or disclosing about it on a more regular basis.

I don’t think it helps the person most of the time and it can become a reason not to talk to you because you’re just one of them that drinks that juice or whatever. That Jim Jones juice… so they pigeon hole you pretty quickly… or they can. So I found it works both ways. It’s really my issue as opposed to helping them and if it’s not helping them then why would I be doing it?

[Commenting on the purpose of therapeutic disclosure]

I’ve come to think that it’s not the case all of the time obviously, make blanket statements, but it’s convenient for the people that do it and it’s part of their life. It’s part of who they are and it’s wrapped up in that I think as they grow or increase their education, they’ll be less inclined to do that. In the beginning if you don’t have the education that’s your connection to having anything to offer somebody, so as you grow past that you’re free to not necessarily use that. [Commenting on differences in professions who get sober before their career begins versus those that get sober in their career]. Getting sober first would apply to me if I didn’t relapse. You know the interest just deepens, you get closer to it in recovery. When I was on probation the first time, I was thinking, you know I would like to be a probation officer, so you identify with who you’re around. I use it (personal knowledge of recovery). It’s more behind the scenes today than it’s been in a decade. It definitely impacts how I take care of myself so it’s a huge advantage in guarding against burn out and getting involved, and that kind of thing. So it’s huge in regard, but that’s not something a client necessarily notices. [Switching to finding recovery and experiences in recovery].
This was the last stop. I wasn’t in a lot of trouble but right when I got sober I’ve been in much more trouble ten other times, but I was finally sick and tired so I was backing up 7 years of probation and 650 hours of community service and I had gotten all of that stuff and now all I had to do was do it (my program). I was just sick of the way I was living and I also knew that I would likely not be able to do that (my professional career) if I was still drinking. At the point that I was getting sober, not that I wasn’t using drugs, I would smoke a little of that if people had it. I wasn’t pursuing a lot of that. I had eliminated a lot of the heavier drugs just because I had burned a lot of bridges so I was left with alcohol and I was getting sick of it. I was hanging around people that I didn’t want to be with and in my life that was the way that was going to go unless something dramatic happened and that wasn’t going to be good either so I knew that and then I started making effort to get sober again. I didn’t come up with much myself. I watched and I was exposed to a lot of good people. I heard one good guy in the ACOA (Adult Children of Alcoholics program) which was huge back in the 80s; Harry, and I later became a good friend of his, but I wasn’t at the time; Harry described that he was becoming a better version of him(self). Harry, as a result of taking on pieces of the best he saw around him (improved himself). If I saw something good I try to make it me. So just subtle little things like that. We’re talking about paramount experiences… I’ve have huge things happen; my mother’s death, my two brothers’ death. To go thru that process made working the program much more intense and as a result of that… handing it over, having the faith and then just seeing that there seems to be a plan. There seem to be; even in a really horrific event there could be growth so to see that once is huge. I’ve seen it three or four times in my recovery. (Switching to a personal definition of ‘working a program’).
(For me), not doing it my way is the first example of that. And then doing what people have been teaching me in the beginning. I didn’t get it the first time, I didn’t get it the tenth time, but when I started doing it their way, which was ‘don’t drink in the beginning’, the first couple times I tried it; to do it my way and to get a couple people off my back and that never worked, but when I finally started doing it their way, I was abstinent and then you know that creates a huge void and then just doing it their way. Having a sponsor, talk to a sponsor; I’m not big on asking for help and in the first year or two I would talk to them a lot but usually after I had already handled the problem; you know, this happened then I did this. I was in a half way house and I had a lot of support. I wasn’t doing it on my own certainly but I’ve gotten better over the years asking for help when I see that I need help… when my brothers were dying for example. Well, one of them was rather sudden, but when my one brother was dying I got a lot of help from the people around me. I’m not one to ask for help very readily. Well I wasn’t in the past. So that’s a huge change, so doing it AA’s way… working the steps, going to meetings….

I was pretty proud. I wanted to handle it. I’ve always been that way and I would notice that and it became a joke between my wife and I. She would say Ken called or Ken needs your help when I was out of sorts so that would be her way of encouraging me to call so it came out pretty open between the two of us and then the more that I could do that in our relationship, so that was relational too. You know I can be more open with her but I wasn’t necessarily asking for any help from other people. I was more sharing with her because I wasn’t asking her for help. I don’t know so over time that changed when situations got more demanding. When my brother was diagnosed with HIV you know I had a huge… I was primary caretaker. I knew in my family that I was going to be the only one, so it was overwhelming and I needed help and he was down in California so it was really huge. [Transitioning to discussing sponsorship].
I had three (sponsors) probably before I got sober. I go through the motions. One appointed himself to me one time coming out of rehab; that didn’t go well. And then I knew who I would ask when I was finally… So he had been around AA for forever and he was the kindest, gentlest person I know. So I asked him and until he died, he was my sponsor and then… So I’ve have three within the 27 years. He and another guy co-sponsored each other, so when my sponsor died, I asked that guy and he was my sponsor until I relocated down here. I would say that he still… we have a close relationship that I would call him my sponsor. I haven’t fired him, so I guess he’s still my sponsor and then I have one down here that’s been coming up on 9 years here.

The longest person (sponsor) was Ken, he was around 30 years (sober), but he was a retired English teacher. He was the kindest, gentlest person I knew. He cared about people and he found a way to touch peoples’ lives where it meant something and he used to drag me around into the prisons to do 12 step stuff and I would be in there, even with those guys, he would challenge them. We were in a room one time in the prison in Smyrna and it was about 75 inmates blocked inside of the room, so the only door was through them and no, I don’t think there was a guard there. This guy stood up and said he was in for murder or some horrendous crime and went off on some rationalization and he challenged him (Ken/sponsor) and I was just thinking… We are not getting out of he here, but he was the kindest, gentlest person I know, but he was also firm and delivered that in a loving way that quieted that person and any detention around it so, he just had what I wanted. Once I got sober, I was good at picking who had it (gentle-kindness) so of speak. [Switching to discussion on working in human services and being in recovery].

I’ve always been careful to take care of myself and to keep that separate. I had concerns and I’ve burned out or I had periods where I was burning out, so that lends you to feeling like
you’re at the end of your rope, so more personally I didn’t… I’m forgetting what the question was but I was concerned about my role as a counselor and how involved I was getting and that eventually lead to taking care of myself more. I think I’ve been good at it in the beginning, but it would kind of erode over time depending on the demands of each respective job. I would care about people and would get overcommitted or over involved and then you bounce back. [Moving on to learning in recovery].

I’m big on getting it (information on recovery) from people more than reading it. I’m 27 years down the road (from entering sobriety) and I never sat and read the Big Book cover to cover. I’ve probably read the Big Book cover to cover in pieces whether you could say that I was even reading once in a month… however long it would take you to read that kind of book. So I don’t study the literature, I listen, I have a sense of what’s good and I try to emulate that. I rely on... When I got down here I wasn’t even going to step meetings (meetings where they focus on one particular step) either. Not that I never went, but they weren’t a regular part of what I did.

My favorite meeting is my home group (meeting in which one holds a service commitment). Well my home group here is a step meeting. I prefer discussion meetings and I guess the one that touches me the most is 11th step meeting, so a mixed 11th step meeting would be my favorite because I had great experiences with that over time (The 11th step: ‘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’). There’s one about to start up so I’m pretty excited about that. The Big Book is awesome, like I said I’ve been more to Big Book meetings since I relocated down here. I carry around a step book, a little pocket version and I tend to go to the 11th step and occasionally I’ll flip through it… it’s in my car somewhere. I saw it the other day so I know that it’s there, but I haven’t opened it for 6
months, but I go to regular meetings. Step work and the Big Book is what touches me and it is what means the most in that they have the most powerful stories. I’ve come across some great stuff in the Grapevine (monthly AA publication). The Twenty-four Hour a Day book, I read every day and probably for the most of my recovery… so that’s very powerful. It gets me started on the right foot… taking me out of the self-centeredness first thing in the morning. [Transitioning to the process of storytelling].

I’ve learned it helps me to tell my story because it makes it more real. I have to even acknowledge that I feel that way so it confirms whatever process I’m going through for me. And sometimes when I hear myself say it, it reinforces me. I might not quite be clear and I journal quite a bit early on so that was very powerful too. That was hugely powerful actually. I can’t believe I haven’t mentioned that yet. I have done that in the past around this time of year (his anniversary in recovery), I would look at when I was in rehab, so I kept at least a twice a week journal for my first 2yrs, so that was huge, it’s one thing to hear somebody describe something they went through and it’s another thing to see your own handwriting and to know it’s you and you’ve been uncertain, scared, anxious and overwhelmed and then you did whatever, step three (3rd Step: ‘Made a decision to turn our will and our lives over to the care of God as we understood Him’) or eleven or something and then you somehow made it through some horrific thing that you didn’t think you had it in you to do. It kind of inspires yourself when you can put yourself in that big picture. [Switching to doing service in the program].

It’s always surprising to me that people will… I’m talking about the 12 step services I guess. People will trust you with their problem and that’s a huge honor to begin with, it’s a huge responsibility and I’m inclined to help people. So, that just reinforces this… it just feels great to do that. And that’s part of who I am. Part of … In my addiction, I wasn’t a people kind of
person. I didn’t talk about the things I did around people and that’s kind of who I was. So when I can help people, it feels good. It reinforces what I’m about and what I think I should be about. So that so much transcends issues, so that I can take that kind of perspective above whatever my problems are, so that’s powerful for me and I can’t say that I… Well I wear a necklace that’s a flute, a dolphin tale, so I’m very much connected with the nature, like kayaking with the dolphins and that kind of stuff and they’re very human like, so when you encounter them, those kind of things, but I don’t have a… for some people it might be a cross. Nothing says it all for me. [Switching to reflecting on the history of AA].

I’m always fascinated with the history of AA, but I don’t pursue it. I’m not a big reader. My sponsor has given me books and that’s about the extent that I’ve explored that or been exposed to, or pursued that because people will talk about it. I don’t do a lot of reading. The most that I do is interaction with people. That’s what excites me. I’ll read, but it’s kind of like when I was in college, the only way that I could clean my apartment is when I had three papers due and a lot of studying; anything but that. I don’t know really how I got through school, but I managed to do that. I’m always amazed when that’s pointed out [considering AA from a historical perspective]. Whenever I’m exposed to that, I’m very grateful it’s there for me and had a lot of the bugs worked out. That it wasn’t some type of trial and error. It was a trusted process that worked. I tell people when I refer them to AA; you know I wouldn’t be doing my job if I didn’t refer them there with this issue. AA is what works best for most people. It may not apply to you, but I want you to go there long enough to figure that out.

To the point… I had a guy that was having trouble with AA, chronic, severe alcoholic, pain issues and he was taking all kinds of potent drugs. He was having trouble and we were working on weaning that down. He was talking about spiritual experiences because that’s what
was hanging him up and what stuck very much for him… I said to him ‘was what Bill saw (our co-founder Bill W., in his writings, describes having a spiritual experience with visions of his higher power) something in the middle of DTs (delirium tremens). Is that a spiritual experience or is that hallucinating? [Questioning whether Bill W. was merely delusional]. And that’s sometimes possible. It could be a transformative spiritual experience, but it’s also possible it was a withdrawal and DT experience. It could’ve been. I don’t know, I wasn’t there, but I have a good way of looking at things like that. People do that with us…. People ascribe to great things. [Transitioning back to an example of a past spiritual experience].

My brother was dying and I was around him a lot every day. I was amazed that somebody in that bleak of a situation, he was also a recovering addict in AA with two and a half years of recovery… He was spiritual and in the twelve steps; we were raised Catholic… and right at the end, he connected with a priest. I saw him lose his job, his apartment, and then come back being independent with the family on the east coast and he had more and more limitations and couldn’t get out of bed, and then some how he was putting all of his affairs in order and then getting hopeful. He appeared in his last days, I mean two weeks before he was pretty despondent but somehow he transformed and it was awesome for me to be a part of that in that bleak of a situation where your life is slipping away, that you can come to acceptance. That was clearly a powerful moment of awe. It was hugely impactful to me. It’s a lot of situations with people, where they overcome situations. In nature, very much in awe… where I could be kayaking with twenty dolphins and they’ll all be surrounding me, and jumping up; if they are already fed they’re interactive and connecting with people. So that’s a lot of awe with that in the sunrise cause you got to go with that before the life guards come early in the morning, so there are things about that, that’s meditative.
Connor

I started at a treatment center working in the human services field; I was...really I was 10 months clean prior to taking the job. The director of my halfway house was changing jobs and he was going to be the director of another rehab facility; I asked him if he knew if I could get a job. I really didn’t think that it was possible that I was going to be hired, but he invited me to come and work there and I’ve been working there for the past almost 2 and half years. I also have started at another treatment center here on the eastern shore in Maryland at a 28 day rehab facility, and I have been working there since June of 2010 so... what, just over or just about 4 months, I guess, 3 months. I guess what started me... I actually didn’t want to get into this field. When I was in a halfway house which is where I got clean and sober, I always told my counselor that I wasn’t going to get into this field. I said oh, I am never going to work in a rehab or be in a treatment center. I said it’s just too much, I said you really have to have a big heart to work in a treatment center. I mean I really couldn’t imagine, my heart would be broken every single day, you know, to watch people walk out, and so when I started working in there I really started to enjoy it.

It was heartbreaking at first though because I was really early in sobriety. The director, who is basically like my mentor, he taught me so much about working in the human service field, about caring, but also detaching yourself from the patients, the clients, and he taught me things about saying no. You can always take back a no, but you can’t take back a yes. Just like really amazing things and I’m actually still in touch with him, he works at a substance abuse treatment center in the Baltimore area now and he has been one of those people in my life who just ultimately changed my life. So anyway, I guess he’s really my inspiration in what I really wanted to go into. I wasn’t originally ever going to go into anything like this. I was going to go
into finance; I graduated from college with a math degree and I started working at a bank … my addiction really kicked off after I worked at the bank. I basically did loan administration and IT (information technology) stuff I didn’t work there for very long, but yeah, it’s somewhat to do with the customers of the bank and having to deal with them. So that’s what I was planning on doing; I had no sort of interest coming in this field really… but it’s funny because my first year of college I was a Social Work major.

I really enjoyed being around people and working with people. I really enjoyed that kind of stuff and then I guess what I am planning on doing now and I have been talking about it for a while and I wasn’t sure if I was going to stay in this field, but I think that after really considering it I am going to stay in human services and complete masters degree in social work. I want to stay with a non-profit organization now that I’m here. I think that this is my calling. I feel like, you know, even though I sort of, it didn’t fit into the realm of what I wanted to do… I think that my realm was wrong all along. I think what I thought was right for me was wrong for me the whole time and that the power greater than myself pointed me in the right direction and I just fought it a little bit.

I do believe today, which I never believed before that I have a purpose in this world and I have… I feel that God doesn’t have anything ahead of me to hurt me. There is nothing in God’s world that is a mistake. That God has some kind of intention for me and it’s my job as a child of God to, you know, point myself in his direction instead of my own, and that’s what I mean by a ‘calling’. There is a power greater than myself that has something for me to do in this world and it’s just up to me to row the boat, I guess. He just has to point me into the right direction.

[Switching to a personal identity as a human service professional and being a person in recovery].
Well, without a doubt they are intertwined. It’s funny because my jobs… my 2 jobs they have different protocols, not the one here but the other one says that you are not suppose to really divulge anything about yourself if you are in recovery… really keep that stuff to yourself. Basically because of the fact that patients or clients tend to discriminate against those who don’t have experience in recovery, which is unfortunate for those people who decide to become….I mean, you know that’s just what I’ve seen is that they say ‘oh you’re not a recovery… you can’t help me’ and it’s really awful so that is part of why they don’t allow us to divulge too much information about it. Here the 28 day rehab they encourage you to talk about it… but I also don’t really; I don’t divulge too much because the patients or clients have a tendency to use it against you sometimes like if they know too much about your recovery, so I think that they are ultimately so intertwined I mean I feel like I am able to help somebody because of the experiences I had which is an amazing, amazing gift.

[Reflecting upon self-disclosure in therapy] I remember somebody saying they didn’t like something that I had said to them. I don’t know if I was telling them to clean up the hallway or whatever and he said ‘you don’t know any more than I do. I have been clean for a year and a half and you’ve been clean for what… a year’? And really he kind of got into my face about it and I was really… I don’t know, vulnerable, at that point in my recovery so it really hurt my feelings. There has been a lot of instances like that where somebody said something like ‘what do you think you know’, or ‘how much time do you have’ or ‘you think you are better than us’, or whatever… things like that. Just vicious things that you know in early recovery you can say to another person because you are feeling pretty crappy about yourself. I think that as far as working in the human services field and working in recovery, my recovery and how it’s affected… I think that it is tough living in the same town you are working in, in a treatment
center because I feel like I sometimes can’t get away from them. This is my first experience with this so I’ve had to go to different meetings and it’s just sometimes frustrating. Justin, my co-worker, will tell me what meetings they are going to so that I will know what meeting I don’t really want to go to that night because my recovery is my recovery. Even the meetings that I take patients out to… those are not my meetings even though I can gain something from them… it’s not the same as the meetings I take the effort to go out to where I go and fellowship with; it’s just different. So they can often get intertwined though, but it’s a blessing though, it really is, to be able to help someone and share my own experience. [Transitioning to applying experiences in AA to work/employment].

[Learning] acceptance, giving it over, and knowing that I can help especially like with my sponsee’s. I think when I started sponsoring people in the program it was really difficult for me not to own it all and say ‘oh my God’ when they when back out; I felt like I had to do everything. I spent every second with them; that’s an exaggeration, but I spent a lot of time with them and being able to say ‘ok’, this patient walked out and maybe it just wasn’t his or her time. You know maybe I can’t cure them. They have to be moment, and be ready for this thing and I can’t control that. You know, it’s so hard to like recognize everything in the program that I’ve learned, but I am able to put it into different areas to my life.

[Sponsoring versus counseling] I put more of myself out there with the sponsee and obviously I mean there are certain ethical boundary issues that I just can’t with counseling. You know, there are certain things that you just can’t do with the patients. There are certain things that you just don’t do with the patients. I mean I guess there are some very big similarities between sponsoring and counseling somebody. With ethics, I don’t know ethically… I just can’t put too much of myself out there with the patient or client. Obviously I am not going to be
picking them up to go to a meeting or showing them the steps. They ask me and say ‘hey I am having a problem you know, my mom can’t get off, she’s really bugging the hell out of me’ or ‘she’s always reminding me of all the shit I didn’t achieve’. I can show them that acceptance paragraph in the Big Book. I can do something like that but I am not going to be willing to work the steps with them. They ultimately have to decide what sponsor is going to work with them, you know. Oh, that’s another thing, you know I would be freer to call them out on their crap as their sponsor, then like I would with a patient. I will be much freer to say something to a sponsee where you know if I find that they are lying to me I would say something to kind of wake them up. I am not really going to put up with this kind of stuff. You are going to start being honest with yourself so that you could start being honest with me so that I can help you. Whatever, so I think I’d be much freer to say or be open with them (sponsee’s). That’s what I am trying to get at. [Switching to how he came to AA].

I started going to meetings when I was in college. I went to my first rehab in college when I was in my late 20’s and I went to meetings when I got home from a 20 day rehab and when I got home I started going to meetings and then… But I didn’t understand AA at all and I really didn’t have a desire to stop drinking because drugs were a huge part of my story. I started off with alcohol of course, then with marijuana, then it went to pills, to coke, then it went to crack, then it went to heroin, then it went to everything and that was during my college experience. I was with a girl who, you know, sold drugs and stuff. So that’s when it got really bad and I went to my first rehab and meetings around here, but I would still drink after the meetings. I would go to the meetings and me and my friend would go down to the bar and I had no concept of AA at all at that time. But those were my first experiences with AA and I looked at the steps and thought to myself that is easy peasy stuff. Everybody should know that sort of stuff.
How are these people going to help me? I didn’t understand any of it. I didn’t understand sponsorship. I didn’t know that there was a Big Book at that time.

My second time going to a rehab was here at the center where I work now and that was after college… after the bank. I started to smoke crack and shoot heroin and I was stealing for my addiction and I got incarcerated about 3 months after I graduated from college. This is crazy when I think back on it. I went to a rehab, my parents bailed me out, and I left after 2 weeks, but I also had experience with AA there. My third time going to treatment is when I went back to jail and the judge… I started going to halfway houses and I actually started having the desire to stop. I was so beat down at the end. I was in so much pain at the end, it was bad. So I went into a halfway house and I am so grateful I went into a halfway house. I don’t think that I was completely honest at the time. I still had those behaviors inside of me. The halfway house insisted that a part of the rules were that you had to have a sponsor and that you had to go to 2 meetings per day and that was really where I started to open up and I found a home group (a meeting one regularly attends) and I felt comfortable there and went through a couple of sponsors and I found a sponsor that I felt comfortable with.

It is amazing when I look back on sponsorship because it is a couple of sponsors that had before the one I had now, even though I thought that they were crazy at the time and thinking ugh… this is not the right person for me, one even fired me. They all taught me something. One of them taught me the 3rd step prayer when we were doing our step work, or the 2nd step, and he taught me to, you know, pray, because I was raised in an atheist home; well my father is atheist and my mom’s like… raised protestant but never goes to church. I think that she believes in God… I am not sure. I think she does till this day, but I believed what my dad believes and my dad didn’t believe in a God. He believed that religion was a science. I really had a hard time
finding a higher power. My sponsor told me at the time, Can you control the rain? Can you control the tornado? Can control all these sorts of things in nature? All of a sudden I said to him I can’t control any of that stuff. He said well that’s a power greater than yourself. He said can you look at that as a power greater than yourself? He said you can’t make that flower over there grow and I was like no I can’t. He really opened my eyes to that and that is how I started to believe in a higher power and that was really paramount in my recovery.

I mean the spirituality and the program, you have to have it. And you know you just have to have some sort of spiritual life and continue to grow on that and continue to seek that higher power. Whatever you choose to call it (your higher power). So anyway and then my 3rd step prayer (3rd Step Prayer: God, I offer myself to Thee – To build with me and to do with me as Thou wilt. Relieve me of the bondage of self, that I may better do Thy will. Take away my difficulties, that victory over them may bear witness to those I would help of Thy power, Thy Love, and Thy way of life. May I do Thy will always. Amen.) and that was a very important part of my recovery too. It was more of the terms he told me to keep saying it and saying it. I would say it without really understanding it and then there was one day I was saying it and I finally memorized it and I said it out loud and all of a sudden I felt like I was washed with relief… like thank God I don’t have to do it anymore. It is not all on me anymore. So I think that, that was one of the most important parts of my recovery that I realized that I don’t have to do this by myself. That I just needed to surrender and say okay my way doesn’t work and accept help. That was paramount, so I think that with those two moments, with finding a higher power, and giving my will over, were some of the most amazing parts in my recovery. There has been so many but in the beginning you know, it’s so hard. My mind was like so closed to everything in recovery and in AA, and for my mind to actually open up and actually listen to other people, and actually
hear what they had to say to me was like I was given a new set of eyes and ears and I could hear things for the first time in my life and that was such a gift. [Returning to the recovery process and discussing incarceration].

It’s funny because when I was first incarcerated… when I first got arrested it was like a ton of bricks fell. Because I remember my girlfriend at the time, we were just a mess. I had been fired from my job and we were living in this apartment that was just disgusting and we had robbed this dentist. Basically his office was behind our apartment. I remember my girlfriend at the time saying ‘I think there are cops over there’. I thought that I was so invincible. I really thought that nothing was going to touch me ever. I didn’t think that I was ever going to get caught because a lot of my story my parents had sheltered me from a lot of the consequences that I should have felt. They thought that they were doing the right thing and so anyway… I have been drinking and snorting coke all night. Basically I opened the door and the cops were right there and it was like a ton of bricks hit me in the head. I was like ‘oh my God’, I am never going to get caught. So when I got arrested it was weird because my mom was coming around the corner. She would often come by the house to check on me to see if I was ok. She saw me in this cop car arrested and she just looked at me and she just looked so sad. So when I got to jail and they told me how much my bail was… $35,000 or something crazy like that, I thought my parents were going to bail me out right then and there, I didn’t think that they were going to let me sit in there. I remember calling my parents, this is how insane the drugs and alcohol made me. I told them, you just have to put up the house, that’s all. I was talking like it was a normal matter, like it was no big deal. My Father got on the phone and stated that you are upsetting your mother too much and we are not going to talk to you for a while.
This is also the insanity of my incarceration. This just shows me how the phenomenon of craving comes about and had taken a hold of me. I wanted so badly to use (meaning drink or drug). That’s all I wanted, to use and to drink. I wanted to get out of myself. I could not stand it in my own skin at that point. I was disgusted with myself and I wanted to use so I started writing letters to my girlfriend, her mother, and my friends that I knew who had money, and I told them that my girlfriend was pregnant, because I thought that that would make them want to come get me out… and that is insanity. I almost believed my own lies. Nobody got me out; this was when I finally faced the consequences of my actions and really got to look at myself. My parents eventually did get me out just to go to a rehab. I went to rehab for 2 weeks then I got out and went down to Texas, and went on the run. I got extradited and the cops came down to Texas… I couldn’t believe it. I was like I can’t believe they are down here. Honestly I was relieved because when I was down in Texas it felt like I was so hollow inside. I knew I haven’t talked to my family.

I have a really close family. I am close to my parents; I have 2 brothers and 1 sister and I am really close to every one of them. I really never had any really bad altercations with any of them. Except for the fights about using and I haven’t talked to them for a very long time, and I felt like, I don’t know how to describe it other than hollow. I just felt so sad inside. I felt like a part of me was missing… my family knew that I was on the run somewhere. They didn’t even know if I was alive. I was living at some crack motel at the time. I remember thinking to myself that I almost wanted to get caught because I didn’t want to live like this anymore. I just didn’t want to live like this. I was so sad inside. I don’t know how else to describe it. So when the cops came and got me, I couldn’t believe they were there but I was so relieved they were there because I knew that finally I didn’t have to run from myself anymore and I didn’t care how much
time I had to spend in prison. I just wanted to see my mom. I wanted to see the sunset on the Chester River. These are the kind of things that I remember from when I was in jail and I still don’t forget these things. There were 3 things that I wanted to do while I was in jail and that was to see the sunset on the Chester River, I wanted to hug my mom, and I wanted to drink a Coca Cola and smoke a cigarette. So when I get ungrateful today, I remind myself of those things. It is such simple things but it is like really amazing. When I get on my pity pot, I remind myself of these things.

My mom is funny because she wore an orange sweater when she would come and visit me (the prison outfits were orange). For one of my anniversaries she would put a piece of the sweater’s thread into a locket for me. My dad didn’t talk to me for a long time after I had been incarcerated because I mean he was just really angry. He didn’t talk to me for a year into my recovery. It was a long time rebuilding that. He didn’t come and visit me. It was definitely tough to see my mom. It’s hard because you can’t even help them. It’s almost like after all this time you start to realize how much human touch means to you. It’s just like a simple thing of, you know, getting a hug from someone that you love so much, and you can’t do that. It was definitely a turning point for me and it needed to happen. I needed to find out the consequences in my life. My mom and I kind of kept a lot of things from my dad. So for me to finally face consequences was so important. [Transitioning back to discussing recovery, and working in human services].

I think that it (being in recovery) has only helped it (working in human services). I think that I have seen a lot of people get into the human services field and there is even a lot of men at the halfway house that work there that were in “recovery” and they didn’t go to meetings still. They did a good job talking the talk, but when it came to walking the walk they didn’t really do anything. I promised myself when my supervisor accepted me to work at the treatment center… I
promised myself that I was not going to become one of those people. I am going to go to my meetings. I’m going to do the stuff that I need to do for my own self. Fortunately, it hasn’t happen thus far where my recovery… I haven’t felt threatened with my recovery by my jobs at all actually. I have seen a lot of counselors that have relapsed and I am really grateful for those people because I have learned so much from them. Sometimes your recovery becomes your job and I don’t think that is what it was intended for, but sometimes that’s what happens to people. It’s like, I am getting recovery in my job and it keeps me green (‘green’ is a term used in the rooms to mean “close to how it was when your addiction was at its worst”) and then all of a sudden whatever happens, you stop going to the meetings, you stop talking to your sponsor.

[Switching to discussion on relapse].

I have never had a real relapse. I think after my first treatment center I was maybe 2 months clean. I wasn’t drinking that time. I had stop drinking and stopped using all together and I was 2 months clean and I wasn’t in a program though and I didn’t feel the guilt that I think people in the program would feel. Thank God I haven’t relapsed. I remember when I left rehab, everybody told me when I got out of rehab… they said ‘don’t go back to school it might be a bad thing for you’. I said I was going to do my will… I was going to do what I wanted to do. I remember self consciously I was attracted to people that used. I remember meeting one of these people in my math class. I thought she was so smart and all of a sudden I got to her house and she pulled out some oxycotin… I thought ‘here we go again’. I was like 2 months clean at the time, 2 months or 3 months. I wasn’t working a program. I wouldn’t really call that a real relapse. It was a relapse but not like a relapse that I have seen in my recovery from the ones that have been around me. I guess I am just grateful that I haven’t. [Transition to discussing elements of our recovery program].
It’s interesting because I just moved back to this area in February, so 6-7 months now. I am not sponsoring anyone technically around this area. Service work… I really haven’t done any since I have been back in this area and that has been a little different for me. As far as the fellowship it’s just interesting because it is not where I got sober. Back in western Maryland where I got sober, I was really involved. I was involved with the inter-group (inter-group is an organization or meeting that provides oversight to a group of meetings or a particular geographical area); I was the literature representative for my home group. I sponsored 3 guys from the halfway house that I went to. It’s been really different for me from that experience. I wasn’t really as much interested in it. I didn’t really enjoy the politics of inter group. Discussing for 2 hours how much money we are going to need for our service. You put a bunch of alcoholics in the room they could discuss if they wanted do aluminum or bronze chips (some meetings give chips/tokens to recognize various lengths of sobriety) for 5 hours (laughing). I think that at this point right now in my recovery I have kind of stepped back from service work, but the sponsorship of the guys that I have sponsored is still so important; they are sober still which is really amazing and I still keep in touch with those guys. I am actually going to meet with one of them in a few weeks. I think what is amazing about sponsorship is that you gain so much from the other person. You revisit all these steps and going through the 12 steps and the 12 traditions and going through the Big Book again and it just brings back everything that I have been taught and reinforces it so much more, which is the amazing thing about sponsorship. Often I have learned so many things from being a sponsor from the guys and learning how to be assertive with them and learning how to set boundaries. Those have been some amazing gifts. Just them telling me about themselves, being able to listen to another person tell me their story.
Trying to help someone else, it’s indescribable; there are no words for it. I think that sponsorship is one of my favorite things. I haven’t been able to sponsor any of the guys around here and that’s really unfortunate, but the fellowshipping is also one of the things that has been really different for me. When I was in western Maryland I was a newcomer (someone in their first 0-6 months in the program); everybody welcomes you and everybody sees you grow up in AA and all of a sudden when you move away from there those people aren’t there anymore. It’s like your family is no longer around you even though you could get them by phone or email or whatever, it is not on a daily basis. I miss them a lot. Here I wanted to make good friends. That has been a challenge sometimes, but it’s really interesting. I have really been a lot more conscious about who I become friends with lately. Actually just being able to see what somebody else’s program is like, not trying to take inventory (appraise them), but for me to be friends with somebody and fellowship and being able to hang out with them at the bowling alley afterwards or whatever. It’s been a challenge I won’t lie, but it has been a real learning experience for me being able to make friends in the program this time around. I do have a couple of good friends; we all hang out and it’s nice to be able to talk to these guys about what’s going on in my life. I gain so much from the fellowship. The thing is… if I am open minded enough to hear what they have to say or being open minded enough and not judging others, I could gain so much from the fellowship. When I start thinking ok… they seem strange or whatever, making judgment and starting to think that I am different from them, that’s when things get dangerous for me… taking another’s personal inventory. I need to look at my pride and my ego. The character defects that still resides in me, I am trying to ask God to remove them is what I am trying to say.

It’s kind of a weird experience. Honestly of course when I first started my head was like oh, this is different and that is different and this person seems like a maniac. I was making
judgments and so I had to stop doing that. I talked to a friend in Hagerstown and he told me to keep an open mind and try to be really open to others. It’s amazing because actually one of my old high school friends moved here a month after I moved here and she is in the program. It’s been really awesome to have someone that I knew from the past that is in recovery now. There are different expectations. You come into rooms and their like ‘oh how much time do you have’. You come in and you are like ‘oh I have 3 years’ or whatever, but they don’t know you like that. It’s not the same relationship I guess. Certainly people that know your history, and how you got to where you are today, have a different understanding of who you are. I’ve met some really cool people but it is just a different experience and I am still getting use to it. When I think back on early recovery it was just a different feeling in the room. It was because I had built relationships up. I am still in the process of trying to build those relationships up with the people in the rooms here. I still have the sponsor I had when I was in western Maryland. Another thing is that I have been trying to find another sponsor around this area so it has been a learning curve I guess. I just keep continuing to try to seek what my purpose is here. That’s what my sponsor told me, he said you have a purpose there, just continue to do the right thing and you will find out what it is.

[Switching to discussing the impact of the literature].

My sponsor taught me everything out of the Big Book. Today what I use it for, the Big Book… I mean, is to stay connected to the philosophy of our program. The Big Book when I first started reading it… I really did a lot of comparing out, and I couldn’t see myself in it. When I read about Bill, I was like how do I relate to this guy when he started talking about the World War… I was like this is not me. It’s amazing because you read it today and you are like that’s me all over that book. I would say I don’t read the big book on the daily basis. I would say that I do a daily meditation, like the 7th step prayer (7th step prayer: My Creator, I am willing that you
should have all of me, good and bad. I pray that you now remove from me every single defect of character which stands in the way of my usefulness to you and my fellows. Grant me strength, as I go out from here, to do your bidding. Amen) and the 3rd step prayer. If one of my clients or patients in the treatment center says something that connects with what I know from the book, we will go back to the Big Book for clarity. It’s amazing because at the men’s meeting when we are reading something it is like reading it all over again and seeing something different. You see different things in it that you didn’t see before which is really, really cool and that is what I use the literature mostly for. The last piece of AA literature that I remember reading was ‘We Came to Believe’. I did a lot of reading with these books in the beginning. I wouldn’t say that I use them as much now; I try to expand on the literature with what I read today. I think I am continually trying to seek the spiritual part of the program and I don’t think the spiritual part of the program just lies in the Big Book, and it doesn’t just lie in some of the AA approved literature that we have. It lies in so many other things so I would say that’s what I do, continually trying to seek my higher power. [Switching to symbols that have been meaningful in conceptualizing my spirituality].

I wouldn’t say that there was just one symbol there because it encompasses so much more. I would say that on a day to day basis I can see my higher power wherever I choose to see him. Like I am driving down the road and I see that it is spring and the flowers are starting to come up. It’s funny because my first sponsor, the sponsor who told me that you are not more powerful than the rain and the sun and this and that. Even though my higher power search has changed from that, I think I still kind of see my higher power in nature. I think everybody’s higher power is different. I don’t seek a religion of any type but it talks about that in the Big Book. We don’t say don’t go near a religion; for me, one of my sponsors started talking to me
about a higher power he said he wanted me to think about qualities that you would want in a best friend or a good parent: non judgmental, good sense of humor, loves me when I do right or wrong; all of these characteristics… that’s sort of how I started to think about my higher power. Today I think that I can be grateful for the smallest things and I think that is what recovery is … There is just not one symbol that I think of for recovery. I mean everything that is around me, the relationships that had changed in my family, the littlest things like my sister wanting me to take care of the children. These are the huge things in my life that recovery has given to me. So I think that I see my higher power in all of the smallest things in my life today, even when it comes down to the leaves changing colors for the fall or a patient being able to see the light or you see that light go on in their eyes. I think it’s the simple things that I can stay grateful for, that is the symbol of my recovery. The gratitude that has been given to me that I continue to hold on to.

My dad thought at one point that I was just morally corrupt. Today I think we are closer than ever. I think that ultimately the program is such that it leads us to think. My dad use to say these little things to me that would drive me crazy and would make me want to use. Just little nasty remarks and I would want to use so bad after he would say these things. Today I am able to not get angry and not react impulsively or yell at him. I am able to talk rationally with him or just ignore his crap… whatever it is. What a gift… it was never like that. Every time he would say something to me it would annoy me so much… like why don’t you become a math major? Okay that sounds like a good Idea. I thought that everything he said was the right thing. So I guess that has changed so much. I have been able to become my own person and realize my own beliefs and really come into myself which I didn’t have before. I really know who I am and I can stand by what I believe in today. I never ever had that before. I was such a people pleaser. It’s just a
180 on every little part of my life today. [Transitioning to thoughts of peak experiences, as they relate to ones’ spirituality].

They told us that we were going to have a spiritual awakening during our 12th step. I think I had a combination of spiritual awakenings during my recovery and I think that like I was saying with that 3rd step prayer that was the spiritual experience that I felt relieved like I didn’t have to do this by myself. I think without a doubt that that was a spiritual experience. I think that there have been so many miracles that I have been able to witness in my own life and in so many others. I think that those are all moments of awe. For instance recently there was an experience we were talking about getting to know people in this program around this new area. There was this thing with this girl. She works with me and she hasn’t worked in this field for very long and was having ethical problems with patients and I knew inside myself that it was wrong what was going on. I didn’t say anything and she had asked me to sponsor this patient’s friend and all sorts of ethical yuckiness. Inside myself I knew that I shouldn’t have done that but I did it anyway because it was ego. I eventually had to break it off. This guy taught me so much about myself. I think that we have this God conscious inside of us that told me the whole time that I shouldn’t go against my feeling and that it was wrong. I had to be assertive, go against what feels comfortable inside me, and do the right thing.

Experiences like that have really brought me to know myself. Sometimes they have to be painful for me to finally learn. Its little instances like that; a lot of the time it’s painful, but ultimately I learn something from it and those are moments of awe. This is who I am supposed to be and this is who God wants me to be. There have been so many moments of awe. Going back to court and I had a felony on my record and got my record expunged. Just craziness, I can’t even tell you the gratitude I feel today. I didn’t ever think that was even possible for me. I
was living in the halfway house, I just kept waiting for the other shoe to drop and I thought when am I going to fuck up, I am use to fucking up. Finally I saw a sign and my home group said expect a miracle and I just started doing the work and the miracle happened. It’s been so many awe moments that happened I can’t even put my finger on one. It’s been the people around me in the program that have shown me so many of these awe moments. I’m trying to think of all the awe moments (laughing). There are just so many of them. It’s just simple stuff that I am so grateful for. I’m so grateful for what God has given me today, It’s so amazing, more than amazing. Working in the human service field has just reinforced the gifts that I have been given and the gifts that I can give and how lucky I really am.

Joshua

I came into the field as a part of a mid-life switch related to circumstances and a desire to really get involved in the counseling field. I started at a small outpatient mental health facility who had really taken a chance on me. I interviewed with the director and she just saw something she liked and they gave me the opportunity to start and as a result of being employed by that agency I started to take classes. I earned my Delaware Drug and Alcohol Certification and progressed in that agency and ended up being a program manager after I have started for 2 ½ years. My last job with the agency was managing their methadone program in their lower slower Delaware location. That was a challenge; that was a different spin on things.

My story with sobriety is I was in financial services living in Wilmington. Alcoholism is my thing. There are some sides in there but the majority of my recovery story is around alcoholism. I initially went to rehab and 1985 and went back to financial services and was supported by my employer. Got sober was in AA and was sober for 5 years, dried (‘dry’ is a term
in the program for not drinking, but not working a program) for 7, then relapsed for 4 years, which was pretty awful, then came back into recovery in 1996. I was the Vice President of a bank, which is not all that impressive because there are a lot of Vice Presidents in a bank, but I managed a call center operation for credit cards. I was living in Maryland sober. My company was bought and the options were pretty limited in terms of staying in the area. I had 2 parents who were relatively old and ill at the time and I came down to the Delaware beaches to see what to do next, and ended up staying and fell into this job. I found this job because in my home group somebody knew that I was unemployed and he said why don’t you go check that out. [Switching to educational background].

[My education was] very [based in] liberal arts… [I completed a] bachelor’s degree; I graduated in 1977 from Wells College in upstate New York. Initially I thought about going to law school, but I don’t like school very much or I didn’t then. Then I thought about getting a masters degree in Social Work. So social work has always kind of been my heart, but I sort of fell into this banking thing; then once I got into banking and I started to do well I got locked in by the money and backtracking from financial services to social services didn’t seem financially like a good idea, but then the universe conspired to make it all happen for me. So there you go.

Here comes the warm and fuzzy part. I think that what had happened to me is a result of trying to work a program is that I have become more compassionate and less judgmental. Another thing that I think I bring to the table is I absolutely know that people can change. No matter how awful the circumstances are because I’ve seen that time and time again. I think it is very hard for me to separate myself from AA because I think so much of who I am as a person is because I have been changed so much by that program. I actually use the principles of AA in business and counseling. In terms of managing people when I was actually put in charge of
managing a group of people who are losing their jobs as a result in this acquisition. I think in terms of we are powerless over this. This is what we can do, just that whole spirit of showing up and doing the best that you can regardless of the circumstances. Not getting resentful… that type of thing.

[The first two or three steps of the program] can be very effective in business when you lead with those standards in place. Sometimes people think that you are a little odd, but it is alright. I think in terms of practicing in the human services field, basic principles of the steps in the program are so much a part of me I figure I would use them every day, in terms of honesty, open-mindedness, and willingness. I am not somebody… because I absolutely believe that although my recovery is based on a 12 step program, that is not the only path that everybody is going to take and clinicians have to be careful about not being seen as Big Book thumpers and we need to wear your program very subtly. That makes sense. Working with substance abuse clients doesn’t in any way shape or form counts as 12 stepping (working the 12th step). I think that I’ve seen people get into a lot of trouble with that, specifically not taking care of their own recovery. I think that, that is really important for people to keep their minds, so that’s very separate to me. It’s too easy to say I don’t need to go to those meetings… I don’t need to do that, I do this every day. No. That’s dangerous territory for me. Employee’s at my agency are not highly educated, they are more so counselors with real life experience, so there is more of a potential for that to happen. I think anybody who really makes a beginning in recovery and plans to stick and stay will want to go out and save the world for a period of time… they say here’s this magical thing so. [Transitioning to contrasts between counseling and sponsorship].

I think that with sponsorship I am much more a person who will present options and allow people to make their own decisions. If it is a counseling relationship some of what or how
I’m going to approach someone is going to depend on where that person is. I have been in counseling relationships much more directive… sometimes then I would be in a sponsorship relationship. In a counseling relationship I have called family services. In cases where I was the sponsor I might not have been so quick to do that. Um, almost more parental in a counseling relationship if that’s what was appropriate… and more inclined to say no you can’t do that, or you have to get them out of the house, as opposed to I’m softer and letting them make more decisions because of the 12 step role.

[Discussing how he is more apt to use 12 Step literature in sponsorship, but not so much in counseling]. I probably should have mentioned that right off the bat. And I actually have a situation where, as I mentioned to you I have retired from my job… I actually had an ex-client track me down at a meeting and asked me to be his sponsor… so he gets a Big Book, he gets a 12 and 12, he gets all this direction about reading and so on and so forth and directed to continue to go to the clinic, and go to see your counselor, but my job is to take him through the steps; in counseling it’s more of a presentation that these are the steps. [Switching to his recovery story].

My mother is a raging alcoholic who tried for… I can remember her first rehab was in 1964 I think and I remember that… she tried very hard to get sober and she adored Father Martin (clergy who ran a rehab) so I knew all about AA, I knew all about the steps and I knew from my very informed position that none of this worked… based on my experiences with my mother, but I knew that I was an alcoholic when I was 27 years old and kept drinking for another 3 years and then it was getting bad enough so that it was starting to ooze into work and I knew I was going to lose my job or get caught… which is a terrible thing… so I called my mother and she got me into Father Martin’s, so I had exposure to AA and the steps from the age of 9 on but wasn’t ready until I was ready. I was the 753rd patient so it probably opened in 1983… it was very 12 step
based, very 12 step based. Father Martin was in recovery himself but I was extremely inebriated when I got dropped off and the next morning I was like oh dear God I’m in a rehab with a priest and I… so no it wasn’t… he worked with the literature of Alcoholics Anonymous; we read from the 24 hour a day book and he was very open to people finding their own way. It was hardcore 12 steps.

There are little things I remember… sitting in a church basement and I was in the middle of something… in the middle of something and I just remember that feeling of it’s going to be ok… ya know how you have that out of body experience and you say who is that… and I just… it was the oddest sensation and I realized it was about trusting faith and that was a real turning point for me. Another huge turning point for me was when I was 2 years sober and found myself in the position of wanting to drink… just terrible and it was 4 o’clock in the morning and I couldn’t find anybody… I ended going out and walking and I realized…. there was a couple of things I realized; I realized that if there was anything in the house I would have had it… so I learned for me that it is not ok to have anything; I learned, I think I learned that that was really the day that I learned about powerlessness…. kinda like callous powerlessness where if you start drinking you’re not going to be able to stop, but I never got powerless in terms of that before.

It was definitely a divine force being present… there was a sense of something around me and behind me… I mean I know it was a big deal because I can feel… I can remember it like it was yesterday… like an aura. Yeah. Yeah. So, and then other things I think… ahhh, I mean the first day that I realized that I couldn’t go on drinking… that was huge and I think that’s a biggy for everybody… that day when you drive past the liquor store and you realize my God I did that without thinking about it, um, all the little things that I mean… cause I came into AA, pretty much I think that almost 100% of us come in Agnostic anyway… I really wanted to be an
Atheistic but I couldn’t quite get there so I think this whole… everything that supported my understanding that there is a power greater then myself has been… the little things along the way. That’s the miracle… the hard part is just holding on long enough for it to finally happen. [Switching to impact of his career on his recovery].

One of the reasons that I left my job is because physically… I’m a big believer in the HALT (hungry, angry, lonely tired) (common AA acronym) and for me tired is a huge piece of that, and for me balance in my life is a huge part of it and when work gets too big it’s very big… it’s very hard for me to back off and take care of myself so yeah, yeah, and I think working in a methadone clinic… that clinic opened at 6am which means I spent a great portion of the past 3.5 years getting up at 4am, spending the winter months totally in the dark all of the time, and that’s just not good… that’s not helping. So for me it’s been about awareness… self-awareness. Oh yes, absolutely. I think that our job as recovering people is really to not discount all that stuff and I think that I’m not overly educated in the field but I look at that original literature and oh boy I think it is spot on… I have found that that original Big Book, if you pretty it up, is a whole lot more then the edition we have now because they were dead on with this stuff, so I believe this. (Note: Some of the Big Book has changed over the newer editions, and some has remained the same; the first 276 pages are in their original format; the second half of the book has changed, in recent additions, including more timely stories.)

[Learning that stemmed from relapse]. I learned that for me I’m… I didn’t get sober to spend my life sitting in AA and I think that’s… and in the beginning I had to do that… that was the only safe place I had. For me, and I think I’m hook, line, and sinker into this physical, mental, and spiritual led philosophy. I’m not this organized church type of guy. My spirituality is very wrapped up in attendance at meetings and I know I need to attend a certain number of
meetings a week for me… just to stay in contact with my disease and my recovery. I also think that part of this whole gig is about service so if I’m sitting at home watching television how exactly am I providing service to people. I need to show up at meetings and be counted, and have my hand out there; when I initially got sober I use to sit in meetings and I would be ruthless about people who relapsed, and I would say that I could never do that, how stupid could they be, blah blah blah blah blah, so I really learned a lot about being judgmental um it softened me… when I initially came into the room of Alcoholics Anonymous it was really steps 1, 2, and 3. I picked up the phone, I asked for help, and I said please take care of me for 30 days; after relapsing I really came in on step 3 and for me at that point it was really about, ok, here’s the decision… you’re going to live or you’re going to die… um, and that was another one of my paramount experiences actually… I got busted at work and they put me in counseling and I was still drinking… and I just could not stop and I didn’t want to and then I got caught again so I ended up in my bedroom having this conversation with God and the obsession got lifted and that was pretty extraordinary, and that was not to say that I didn’t want to drink again, but that ruthless pounding thing was lifted, so I think relapse softened me a lot. [Transitioning to a discussion about moral development].

This is kinda one of my favorite subjects actually because I have kinda struggled with this with my clients because I’ve always said that for many of us we have something to go back to… there’s kinda this core base of morals and ethics and for some people if they didn’t have this opportunity in childhood then there is nothing. For me I stopped, I stopped doing things that I was ashamed of doing, and should have been ashamed of doing, and guilt was totally appropriate with that. What has happened… I think that before I even started drinking, just growing up in an alcoholic household, I was such a shame based person that AA helped me lose the guilt of the
things I had done as a result of my own drinking that I should have been guilty for, but AA helped me address the shame that I brought to the party that was always going to get in the way of my recovery. It really allowed me to be the person who could figure out who I was… If my memory serves me… its steps 4, 5, and 6 that really relates to shame and guilt, where we really related to… we do an inventory… Step 3 is the one that holds the closest place in my heart but yeah, yeah, 6 and 7 are the defects of character ones, and um, I think 4, which is the inventory step… I think what happened for me is because I saw people laughing and sharing about stuff related to the junk they had done while they were out there I was able to start laughing at myself, and I think humor is a really important part of this whole thing… you got to be able to laugh at yourself and when I came to AA I absolutely identified myself with what I use to do as an alcoholic and none of it was very pretty.

I learned to separate the bad stuff that I did as a result of the disease and understand that that was not who I was, and that took time. It doesn’t mean that I wasn’t accountable for it… and I had to use those amends steps frequently, but I learned that I am not… I am not defined by those things that I did in that period of time and the steps gave me the opportunity to say… I like this about myself, this is probably a good quality; I can build on those things and you don’t have to be perfect; that was a biggy for me. I think that as a child growing up in an alcoholic family, and that’s not a dis on them, I think when you have a mother that’s an alcoholic in the 50’s and 60s, and I think that as I child I probably thought that it was my entire fault. If I could only be better then they wouldn’t do this… ya know, they did the best they could. [Switching to learning through the elements of a 12 Step program].

Initially, I had a huge issue with trusting anybody and they told me to get a sponsor and I did, but I didn’t necessary use him; I got who I perceived to be the toughest person in the room.
For me, and actually this is true both times, that connection with a home group was probably the most valuable thing to me in the beginning, cause I’m a reader… I read a lot. Not necessary the AA literature, but about recovery, probably when I first got sober the book “Under the Influence” was probably…it was a huge turning point for me because as a man in the mid 80’s… I could spout out that it (being an alcoholic) was a disease, but I believed that it was a moral weakness, but with this book, which is so very medical…I was able to say “ok, I got it” “you got a disease, you’re not going to be able to fix this” so literature, that piece of literature was hugely important to me; sponsorship, I love working with new people. I don’t like… I’m not a wild fan of big groups… I like having a small group of people that I go to… I don’t know if that’s still residual trust issues or something else but I have a core group that I use and I don’t think I took a look at it and said that I was going to try and manipulate something else. I mean it’s more, because the core group, sometimes we are the group, and sometimes there are individual interactions with people, but I think that if you’re open to it you learn, like right now. Sponsorship for me has not been as much of a piece of the pie, as the literature and the group, and when I came in I used the group as a higher power, ya know the spirit of AA, and stuff like that, cause I just couldn’t do that God thing.

[Drawing reference to meaningful passages in AA literature]. I love the ‘Dr. Alcoholic/Addict’; the passage on acceptance… acceptance is the answer to all of my problems that I’ve read time, and time, and time again. There in the forward, there’s a piece that talks about contempt prior to investigation, and that just, I always think about that; contempt prior to investigation kept me from getting sober for a very long time; contempt prior to investigation shuts me off from all kinds of experiences. There’s another passage in the Big Book that talks about pretty much every second of the day how recovery starts somewhere where somebody...
sticks there hand out… I think that’s pretty profoundly beautiful. The stories, well, here’s another example of the stories of the big book of AA. I went to do my 4th step and in the quest to be perfect I ordered every single copy of other AA literature you could possibly imagine; I mean it was awful, and I ended up going back to the Big Book and going back to the basics of things and I, and that was very helpful because I will complicate anything, and the Big Book was a really good guideline for that; I actually like the steps written in the Big Book better than the 12 and 12 text, and the majority of the meetings that I go to are step meetings, and we read the 12 and 12. I like the Big Book better because it’s simpler for me. I listen to a lot of recordings… then tapes… now cd’s (AA speaker meetings)… I mean a lot. There are times when I spend a lot of time in the car; I’ve listened to the Big Book on tape, I listen to speakers on tape all the time, and that was hugely helpful for me, especially when I had to travel on airplanes which was always a high risk activity for me. I don’t do well in airports. I love Joe and Charlie (very knowledgeable speakers in AA who educate others on how to work the 12 steps). I love them, and their stuff on the 4th step has been very helpful for me.

[Referring to use of meditation and prayer]. I just took a meditation class. That is a work in progress for me. I am not disciplined in my prayer, um, have running conversations with God all the time that are not asking for things, and trying to become more disciplined to meditation; I’m not by nature a sit down kinda person so this is hard; I just now figured out, actually, what I need to do is get up, meditate, and read, cause once I get caught up in the day I don’t do it… and I think a lot when I drive. I mean I think a lot when I drive… I mean I’m a runner… so I’m working on the meditation thing. We’re actually going to start an 11th step meditation thing at a church Thursday nights at 7pm and the format is going to be… it’s going to be an AA meeting but we’re not going to do coffee. We’re going to spend 20 minutes of the meeting in
meditation…. seeing if I can’t figure out how to do some of this stuff prior to everybody else
telling me how to do it (laughing). [Transitioning to the impact of symbols/metaphors].

Symbols and metaphors haven’t had much of an impact of me, but if they did one would
probably be a willow tree. If you had to pigeon hole me into some kind of overall religious belief
it would probably be some kind of Pageny new age thing. I love Native American stuff, and
that’s the other thing, and that’s another thing important to me in AA; I finally figured out and it
took me a while, that I don’t have to measure my spirituality by sitting in a church pew on
Sunday, cause I kinda thought I did, um, but I needed to figure out where I belonged in this, and,
then it occurred to me that no, no you don’t, as long as you’re willing to search and grow
spiritually and you have a relationship with a higher power you do not have to be a member of x-
y-z church. My moments (peak experiences) tend to be just little moments that aren’t
spectacular. I can remember in 1986 taking a walk in northern Delaware and just being
overwhelmed by the beauty of the pavement… the beauty of the grass… that sense of just
wonder and stuff and that was pretty phenomenal. Every time I’m out kayaking and get in a pod
of dolphins it is just an extraordinary sense of connectedness and ahhh it happens all the time…. all
the time. I think that if I had to… I think all of this stuff was available to me… it’s a question
as to whether you’re looking for it… I think it is available to everybody because I believe we are
all connected in so many different ways. It’s just if you’re in… if you’re caught up in any kind of
addiction whether it be gambling, sex, food, alcohol, drugs then you’re not looking for that stuff
and you can’t see it. That sense of connectedness, that feeling of belonging. I think I felt that
almost from the first time I got into Alcoholics Anonymous because it was the one place where it
was ok for me to be who I was and they loved me anyways, which and really, my entire
philosophy of counseling is really, has always been one of coming at a position of love. Reflect
with people on who they can be and methadone clinics tend to be very punitive… tend to be very black and white and I’m not a black and white kinda guy. Sometimes the moratoria type of style is what people need, but sometimes it’s not; sometimes people need to be loved and cared for.

Oh, I thought of another ahhh moment when I was with Father Martin’s. You got me thinking… I think when I came back, coming back to my first AA meeting after relapse I mean… talk about shame, oh my God. I remember sitting at this table like this and I had to say this horrible thing… and I carried this shame for like 4 years… this had been going on for a long time and that meeting which was a 5pm speaker group was so… they were like “welcome back, keep coming back”, and they meant it, and I knew it. So that was kinda like the same thing. To back track a little bit to when I was in rehab I really struggled and I really wanted to get sober; I really knew I needed to stop drinking and I was terrified that I wasn’t going to be able to do it because I couldn’t get use of the word God and I knew the whole thing was Christian-based (the literature identifies AA as a spiritual program although a very large percentage of AA members, in this researchers experience and according to AA polls, identify themselves as practicing Christianity). So I was terrified about this and I said to Father Martin “but how do you know there is a God” and Father Martin said to me “well how can you prove there isn’t”; and for some reason the way in which he said that got me to think about… ok, you’re right, well I’ll take a risk and believe that there is something bigger. And that’s the beauty of Alcoholics Anonymous is if you talk to enough people, enough people, we’re many and varied, so if you’re open to talking to many people sooner or later somebody will say something and you never know when the light bulb is gonna go on; sometimes it takes a long time and I remember sitting and thinking… oh that’s what they were talking about. That’s what they meant… and all you need in the beginning is a little bit of faith… some trust in these people… just a tad.
I think the thing that always… that first had me was all my life I always looked for some place where everybody was equal… and I grew up in a place where I had a relatively privileged background. I can remember going to the Vatican and being appalled that there’s all this gold in the Vatican and people two blocks away can’t even eat; that kinda stuff always bothered me, and in AA we are all exactly the same… it doesn’t matter… and white, black, men, women… it doesn’t matter… this disease takes everybody out and you can’t buy your way through it; when I was in rehab my father came and visited and said… “What do you want, should I get you a new car,” and I thought I just want to be sober. You can’t buy that. You can’t fix this one with money. You can’t throw education at it. I mean money and education really get in the way of getting sober… especially the thinking part.

Matthew

I started working in human services from a very early age, almost as far back as late adolescence. As I kind of got involved in sports, as I got involved in coaching and things like that, I got involved in working with youth through boy scouts and stuff like that. My earliest formal participation was probably as an undergrad doing health promotion, and health prevention work, and then more specifically after completing my bachelor’s degree I got a position working with some children with mental health impairments… going into their homes, going into their schools, working directly with them and their families. From there I had a brief stay working with a psychiatric hospital for about 3 months and didn’t particularly enjoy that too much and was working night shifts, which wasn’t all that conducive as I was going to graduate school at the same time. So I let that go but I came across another opportunity working with adults with profound mental retardation, kind of like an assistant inside of these apartments that were set up for them to live within. So I did that for several months while I was in graduate school as well.
After finishing graduate school, I spent the next 7 years basically doing two positions being a career counselor and also being a family counselor and most recently things have kind of changed to the point where I am doing some of the counseling stuff on my own as well as kind of moving into the field of adult education… teaching students aspiring to enter the human services professions.

Several adults in my family have worked in human services. They never really pushed me in one direction. Maybe they did, I am sure they did. I remember particularly telling my dad that I wanted to be a carpenter because I really enjoyed woodshop and those kind of things in high school and he told me that that would be fine with him if I went to college first and didn’t like it but he would fully support me leaving to explore my pursuits as a carpenter. I didn’t entirely want to be out supporting myself so I decided to go to college. I think it would be kind of false to also look at the fact that my father is a medical professional and my mother is an elementary school teacher. I have aunts and uncles that had jobs such as physical therapists, nurses, doctors, clergy and professors. There was certainly this kind of strong family influence of people doing that in their jobs and I was aware of that but I was never necessarily pushed in that direction, but I was certainly pushed into higher education, at least education beyond high school.

I feel that my work experience certainly had some sort of influence on recovery and participation in AA; at first I almost feel it hindered by ability to gain acceptance. I think that was kind of a double edge sword because on the negative side I kind of felt like I knew enough about alcoholism. I knew I was an alcoholic. It was pretty straight forward with all the consequences I was experiencing. I can’t really pick out a date but I remember keenly being an undergraduate sitting at a bar with a friend of mine joking back and forth on how we are
alcoholics and how we are good enough to keep it all together and go to school and hold jobs and still be alcoholics at the same time… a strange moment. But, spin forward a couple of years again I really knew that I was an alcoholic… I wouldn’t say that I knew I was a true alcoholic in my own mind because I had something like a job; my family hadn’t totally fallen apart and I wasn’t living under a bridge. I couldn’t truly define myself as an alcoholic because I thought that in order to be an alcoholic you had to possess all of those other qualities. So, I think what I did, I think what my knowledge in human services allowed me to do is kind of, you know… rationalize things or think I could fix this myself. I would think that I am not nearly as bad as some of the people walking into my office. I am able and willing to go to work every day. People are coming to me for help and advice so I must not be too bad off. So that was kind of the negative end of the story and the other thing was this element of embarrassment. I think I was afraid to ask for help. I think in some ways I was afraid to walk into a meeting and figure that I might see a client or something like that. I know all of the stuff is supposed to be confidential, but I was afraid to go into a psychiatrist or counselor’s office because I was known in my community as a counselor.

A lot of things were kind of on the negative end of the sword, but I think the truth of the reality to it was that I didn’t want to stop, I enjoyed it… my time spent drinking that is. I drank for an effect; I drank to escape my own mind. There is that too, I think there was a lot of negative stuff just kind of me rationalizing and finding ways to talk myself out of what I knew I really should’ve have been doing. It’s kind of interesting because I don’t like to speak about what it is like for a lot of the people, but for myself as a human service professional. Being a human service professional is a big part of my identity. One of the first things I tell people when I meet them is that I am a counselor or they ask on their own… or that I am an educator, whichever it
may be; it is hard to separate my two work identities as when I’m teaching I am teaching about human services… the there is a clear difference between my relationship with students, and my relationship with clients.

The same thing is kind of true with being a member of AA although we don’t walk up to Joe Schmo on the street and say hey I am a member of Alcoholic Anonymous. Being a member of AA becomes a big part of our core. It’s how we identify ourselves at meetings and we are kind of taught whether it’s overt or covert… we are taught in the rooms that we are alcoholics first and then all of the other things kind of stem down from there and that the most important thing in your life is sobriety because without sobriety you are going to lose everything else anyways. One of my first sponsors said to me if you go up to a bartender and order a drink be willing to hand over the keys to your car, the deed to your house, and your marriage license all at the same time for that drink because that is what you will be letting go of eventually… that’s the decision we make. So both of those things started to intertwine a little bit as these roles and they kind of merge together, and I was able to kind of use what I knew, and from what I gathered in talking with other members of the program. I think that I would also add that the rooms of AA certainly changed the way I look at things. In my practice I don’t know if it’s … I can only see it as this dynamic interplay between both of those major roles. I don’t think that one caused it or the other caused it, it’s kind of the combination of them both. It’s not like I can go back and do things differently to decipher what lead to what.

My experiences in AA certainly had an impact on my professional life. It’s hard to think even how to start with that…. A lot of times when something difficult happens at work it gets my head spinning. I will do what I’ve learned to do through my recovery program, which is to slow down. To get some sense of awareness as far as what’s going on. To really think before making
any decisions; to realize that I don’t have to make a decision right now or even today or maybe not even this week… that I could sit with it for a while, which I never would have done when I was in my addiction with all of those things. Maybe I knew, maybe people have told me before, but I never got it before I went into the program and someone worked with me on those things. So that certainly is a way that AA has infiltrated into my work life. Becoming a more honest, real or genuine individual… kind of getting to know who I am certainly relates to the work that I do as a clinician, but also kind of… when we finally get to the rooms, some of us the first day we get there, some of us take a little bit longer… but it’s all about admitting a fallacy that we have deficits or that we have gotten here because we have been doing things probably the way we shouldn’t have been doing them; that’s kind of another thing I have spun into my work as a clinician… that I am not perfect, I am never going to be perfect. I am not going to strive for perfection but I am striving for this kind of continuous improvement as a person. I’m not perfect, I’ve made mistakes, I make mistakes today but kind of the most important thing is that we learn from it and that we assess where we have been and where we are and where we are going.

All of those things have been a really crucial of my recovery program. A big part of AA is stories, we share our stories, we listen to other people’s stories and I’ve been taught to be a more keen listener about stories in the rooms of AA and I find that I do that much more now as a clinician. I really listen to people’s stories… listen to find what I believe to be the key elements. I listen to hear if their story a resilient story, is their story all about doom and gloom, did they learn anything through the process of their story. This may give insight as to who they are as a person, are they moving through something with resolution or are they in a constant state of conflict. All those kind of things. So really an immense number of things I was able to learn in the program over the last 3 years.
This leads me into how I came to find recovery. Well some people in their spiritual experience, if they have a spiritual experience, identify seeing beaming lights. I saw beaming lights too but they were coming from behind me, they were red and they were blue (laughing… referring to a police car) and uh that was sort of what got me into action… or more accurately… into desperation. I knew that I was in big trouble. I didn’t exactly know what to do. I knew a program called AA existed because I was in a human services profession. I knew that there were drug and alcohol treatments out there. I didn’t really know how to get into them, but I knew I had to do something because I knew I was going to come face to face with a judge sometime soon and it would be in my best interest to show that judge that I wanted to change and that I was taking the steps to change before I actually got in front of that judge. This wasn’t just my intuition… I can’t claim all the credit for it, but it was the intuition of my colleagues, counselor, and attorney.

Very early after the experience of beaming lights I got in to see a psychologist and I guess he knew enough about addiction to know that I had a problem and he sent me to see a drug and alcohol counselor. The addictions counselor told me the first time that I met him that he couldn’t believe I hadn’t been to rehab before and that “you need to go to rehab” and I said you don’t know what you are talking about… I need to work and he said no you need to go to rehab and I was very resistant to it initially, but I started to follow some direction thankfully. I figured this guy knows more of what he is talking about than I do and if I knew what was good for me I wouldn’t be in this mess (laughing). If I was able to make good decisions for myself I wouldn’t be here anyways.

I talked it over with my girlfriend and decided to go and luckily the rehab was such a variety that I could leave during the day to go to work, so I lived at the rehab and it was... I don’t
know if I would call it a peak experience but it was definitely an experience that I will never forget. The variety of individuals within there and I learned that I was rather opinionated and judgmental on some things. It’s very interesting because it was everyone from all walks of life. Whether it was drug addiction or alcohol addiction, it was like this group of 12 guys and we kind of all came together and had to clean up after each other and make dinner for each other and sit in groups for a couple hours a night and everybody had to kind of agree on what to watch on television… it was a really crazy thing. So that was early recovery for me; that was about the first 45 days or so and I was introduced to both AA and NA meetings while I was in rehab and then when I got out I started going to AA meetings pretty much every single day and I met my first sponsor who was… is a wonderful man… I still speak to him today. He probably saved my life, got me through a lot of really hard times and taught me this program, taught me the steps, taught me to live in a lot of ways. Somewhere within that first, you know that period of the first year of recovery I was in and out of jail doing uhm… coming face to face with the consequences with my behaviors… my family and my sponsor helped get me through that. Once I got out of jail I continued to go to meetings and talk with sponsors.

As far as peak experiences go certainly listening to the stories of peoples in the rooms and there have definitely been stories that have touched me more than others. Kind of like the moments in nature, or particular songs that I’ll hear on the radio or that I play that will really speak to me. Goodness, the successes and the failures of others. The peak experience of kind of being able to look at someone in the rooms and how they are living their life and just respecting that… respecting what they have made of themselves, how they have changed whether it is something that I have seen in them, something in their story, whether or not they were included
in someone else’s story and just kind of…not wanting to be them, but looking at them as somebody who has kind of what I want as a person.

I found myself looking to the qualities that they possessed after their years of sobriety. Yeah, I mean not necessarily driving the kind of car they drive or anything like that, just the peace of mind they seem to have with themselves. They accept themselves for who they are, they seem like financially stable individuals, they are not going through crisis after crisis after crisis, they seem like good members of their families, respectable citizens, just those kinds of things. Yeah, I would say those are some of the things. Another immense experience… the birth of my son and being there for that. Especially since I had been sober 7 -8 months prior to him being born, that’s sometimes an event that I go back to… like even if I think it wouldn’t be that bad if I went back to drinking again, I think I’ve figured out what I needed to figure out to control it and I know that that is just crazy. I know that history repeats itself and has taught me that could never be true and then I think about what I stand to lose and I could kind of… that image of that peak experience of holding my son the day he was born and losing that kind of helps reaffirm that I am doing the right thing of living the sober life. [Switching to discussing the elements of the AA program].

The kind of learning that you do is a little different based on the element of the program; for example, literature… literature being something that you either access alone, or sometimes literature is used in meetings. When I use it alone, it’s more of a reflective experience. It’s really not about me at all although sometimes I’ll relate what I am reading to my own life. You know it is personal, it’s why you are doing it alone in your home kind of thing. It’s like this kind of learning that could happen anywhere you know… you have your Big Book in your car or your office or you’re lying in bed, you know, it’s not exclusive to an environment. It’s about learning
through the stories of other people. I also enjoy non AA spirituality literature that is similar; it is about growth and awareness and becoming a more authentic person and those kind of things. Literature that kind of teaches one how to meditate, literature that kind of teaches one how to pray, kind of the difference between prayer and meditation and then there is literature that is used in meetings like the Big Book or the 12 and 12. It is very specific towards a particular step. The way it is really different (when used at meetings) is it is kind of about learning as a group. Something from the book is read and then each person spends about 5 minutes relating to it. Not only are people relating to the literature… they are relating to something that was said before them by another member. It’s not only learning out of the book but also learning from each other.

A sponsor to me is a mentor. Hopefully somebody who has some qualities that you find admirable, if that person doesn’t I’d ask why are they your sponsor. I want somebody who I can see as actually working the program in themselves to some extent; that’s a kind of hands on learning; together whether you are going out doing 12 Step work with your sponsor or whether your are just sitting down flipping through the pages of a book or working on a particular step with each other and that kind of sponsor acting as a guide taking you through that. The fellowship element is something like a social component, but not everyone does it. I do it to a lesser degree. They call it the ‘meeting after a meeting’, it’s when everybody gets together after a meeting and talk for a while. It usually has nothing to do with AA except that it is a bunch of alcoholics standing in a circle. They talk about going out for coffee, going out to dinner, going fishing, some activity that they are going to do with each other. It’s a group of people and they are there for each other. I can’t speak of that too much because I have never really done it. Well, I take that back. It was the ‘meeting after the meeting’ that really helped me identify with this
whole thing. I can remember it like it happened yesterday. I was standing around after my first meeting and 3 or 4 men just gathered around me, introduced themselves to me, and supported the decision I made to show up that night. Then they closed with me by thanking me for talking with them. They told me that I was helping them to stay sober. I really didn’t understand what they meant at that point. [Transitioning to discussion on how work in human services may impact recovery (threaten or fortify)].

This is kind of a hard one. If I hadn’t changed and if I was the same person I was 3,4,5 years ago most definitely, because I think of what I learned in the program about being more aware and speaking up and talking to people when I need to talk… it’s not been so much of an issue. What I mean by that is before I entered the program I really internalized everything and didn’t talk and I let things stew in my mind. Human service jobs by and large are pretty stressful, they are about human relationships, a good day can turn into a difficult day in a matter of a couple seconds and unless you have some good outlets and coping strategies for that it can be quite difficult. I think one of the great things about being in a program like Alcoholics Anonymous is that you learn coping strategies, you get suggestion as far as to what other people have done and what has worked for them and you have a list of like 20 people from the room that you can call up anytime of the day and talk to. You got a sponsor that knows you or maybe even several sponsors that you have had from the past. Maybe you know one sponsor, not that you need more than one sponsor (this is advised against in the program) at a time, but sometimes things happen that you move from one sponsor to another to another and you might come to know one of those people as having expertise in one particular area and another that has expertise in another area and you can kind of pick and choose who you go to so you kind of have like all of these guides for things that come up.
So I would say no, I would say that I don’t think that my role in human services has threatened my sobriety, the only thing I would say is sometimes you come face to face with yourself and that can be difficult. Sometimes not necessarily yourself but something about them (another member) reminds you of who you use to be or how you were living your life. That could be difficult; sometimes it is actually more strengthening than difficult because right in front of you, you have this example of why you are doing what you are doing now. As long as you can sit with it for a little while so that you can kind of get to that mental state of coming to realize that… rather than just kind of making a rash reaction. I think that could actually be quite beneficial but the one thing, and this is one thing that the program or just maturing in my career, has allowed me to do is slowing things down a little bit and looking at the whole thing and not making these initial judgments and knowing when to go get help and knowing that I can’t handle this on my own and that there are people out there that can offer me supervision, mentorship, and wisdom.

Sometimes after a long day at work I will seek this out. Currently I have about an hour commute which gives me time to think, and time to call up another member and just connect. To provide you with a recent example of this… this past week one of my clients committed suicide. I have never had that happened in my life to my knowledge. A client might have left me and gone on to hurt themselves or take their own life down the road, but I have never had an active client commit suicide and that’s been very difficult… but this morning I went to a meeting and I brought it up and I have been thinking should I go talk to a counselor myself about all of this because nobody at work is really talking about it. Just bringing it up in meetings or calling up another member in recovery… and after I said it people talked about how they have had thoughts of committing suicide in early recovery or in their ongoing recovery. They talked about coming
to terms with the reality that addicts and alcoholics do these things and the how’s and the why’s but just hearing how the emotions generated in the room and the thinking generate in the room really gave me some perspective on the whole experience. Then at the end of the meeting several members actually thanked me for bring up this difficult, and often times taboo topic.

I will also often times go to the Big Book for support in difficult times. This is how spirituality has worked in my life. I’ve never seen a burning bush, I have never seen a beaming light from up above, but I’ve had kind of moments where it just seemed like all of the planets were lining up for me. This is how it was suppose to be… like I was meant to be here. I have had that happen to me in a meeting recently. I remember an experience not too shortly before getting sober when I was really kind of in the depths of sorrow and was losing purpose and didn’t know what I was doing. All of a sudden I just had this warm feeling come over me and for some reason all of my anxieties went away and I kind of had this sense that everything was going to be ok. Everything wasn’t ok, in fact things had gotten a lot worse after that, but I think things had to get worse in order to get me thinking that something had to happen. That moment I hold as significant. In the program some people will refer to these moments as God winks. God winks are when you kind of feel like your higher power is smiling down on you. You are doing what you are suppose to do and good things are happening; you are working with another person and the two of you kind of figure things out together. So yeah, I had a few… some have happened with nature where you know the sheer awe of standing next to the ocean or being present for a beautiful sunset. Some of them are like watching your kids grow physically or like their language development… or just bearing witness to the little people that they are. [Switching to discussion on relapse].
I ask myself sometimes if I have every relapsed and I don’t have a very good answer for that. The reason I say that is I got sober November 29, 2007, although about a year and a half before that something had happened that led me to stop drinking. I had gone to maybe a meeting or two at best and had never read the Big Book and never did any of the other things. I think I might have been even forced to go to a couple of the other meetings by the law. I didn’t want to be sober for myself and had no desire to stay sober, and I was kind of just as we say in the rooms… I was a dry drunk, I wasn’t in any program of any sort, I just wasn’t drinking. I don’t really consider that to be a relapse because I had no intentions to stay sober. Other than sitting in the meetings a few times before that I had no intentions on being there. I never saw myself as an alcoholic in recovery, I don’t even know at that point if I even saw myself as an alcoholic, but who knows it was kind of uh… sometimes I was and sometimes I wasn’t. I certainly learned, you know, it’s kind of like this history repeating itself kind of thing. I don’t think that you necessarily need to relapse to learn that your program isn’t working. There is kind of this ongoing debate about that in the room where I go to meetings; we call it a S.L.I.P. That is an acronym for ‘Sobriety Loses its Purpose’.

You don’t need a relapse to realize that sobriety is losing its purpose. If you have some sense of awareness in your life then you could recognize it otherwise… either alone or by being open with your sponsor. As it is growing you can recognize it through working with a sponsor. You can recognize it through your prayer or your meditation or whatever that may be so I don’t really think anything good comes out of relapsing. I haven’t seen much good come out of relapse; if people come back they come back feeling a hell of a lot worse than they did before relapsing. I believe people relapse because they want to drink… its pretty straight-forward. The reality of it is a lot of people never come back or a lot of them end up dead one way or another or
worse; not that there is anything worse than dead but in much worse shape than they were before the relapse… so personally I think relapse is extremely dangerous. I don’t think that anyone goes into relapse thinking well if I just relapse I would learn a lot more about what’s going on here. I don’t really think people have that sense of awareness… if they did they probably would never do it. I think we could learn a whole lot more through not relapsing and talking with other people about the experience that we are going then they are ever going to learn through a relapse. To me all relapse does is make one more likely to relapse again in the future… it’s self-fulfilling.

[On sponsorship and its value]. In my opinion I guess it could be done alone (without having a sponsor), without certain elements of the program. Sometimes ones situation doesn’t permit involvement in the more social elements of the program. But, given the choice I wouldn’t want to do it alone; there is so much learning that occurs together, as a group, which you’ll probably never find in a book. You know people work different types of programs. I think it’s sort of judgmental to say you need to do A, B, C, or D in order to stay sober. For example, there were particular times in my life where I wasn’t able to do step work, I wasn’t able to talk to a sponsor every single day, but I did have access to the literature so I was able to work my program in that way. So I don’t think you need to work all the elements of the program all of the time…. But the more elements of the program you work… chances are you will have a greater sense of wellness and awareness in your life.

Everything is so intertwined. I think intertwined is a great word to describe the process… almost like a spiral. It’s hard to tell what is working when… and more important is knowing when it’s not working. It’s kind of like how do you tell? You can’t really relive that experience all over again. I think it’s also really important to keep the historical framework of things in mind. It’s not like all of the elements of the program were developed all at the same time.
Meetings started very slow. It started off with Dr. Bob Smith and Bill W. meeting one on one with each other at Dr. Smith’s home and that was really the first meeting that ever took place and they kind of stayed in communication but went their separate ways and developed meetings in their respective towns and it kind of grew and grew and grew from there. I mean at that point in time there was no Big Book. It took several years before a book even went into print. There became different elements of the program… there became the meetings, then the literature, and then the idea of sponsorship came, actually sponsorship came up before the idea of a book and it was actually an idea that they had gotten from another program. The idea of sponsorship with regards to a 12 step program isn’t something that came out of AA and I wish I could remember the name of the program, but it was another very early men’s Christian movement…. of yeah, The Oxford Group. Actually I’m sure sponsorship, or mentorship, whatever you want to call it, I’m sure it developed hundreds of years ago as trades were proliferating. The Oxford Group was the program in which AA emulated and got 10 of their 12 Steps from. We have all of these elements today but we didn’t have all of these elements in the early 1930’s when AA was born. The other two steps came from Dr. Silkworth and Carl Jung. [Transitioning to how ones recovery story changes over years of sobriety].

This isn’t just me, per say, but this is something that I have observed and heard in meetings… when one shares a story the program kinda asks that they share their experience, strength, and hope, and this is also something there’s this debate about in AA… does time (length of sobriety) really matter. Some say no, some people say yes; we have sayings like “A Day at a Time”… well if we are living a day at a time why does one with possibly 10 years of sobriety have a greater level of well-being than one with 30 days of sobriety… and there’s no resolution to this debate really but one thing that I have noticed is that stories change over time.
My story has changed; I’ve listened to others I’ve known for a while and their story has changed and the way that I have seen them change is people early in recovery… there story is very near and dear to the time before and very shortly after the time that they got sober and you’re story is kinda all about that… all these events that happened as a consequence to your drinking… what you went through, how hard it was, who you hurt, etc. It’s kinda doomy and gloomy because that is where that person is at quite possibly and you’re rather shortly removed from all that stuff… and that’s what it was like for me. I mean, I was talking about my experiences with incarceration and all the stresses I was going through, maybe some of the aspects of my childhood and some of those difficult experiences.

When you listen to the stories of what we call the Old-timers… people that have been in recovery for a long time, maybe 15, 20, 25 years they don’t talk about that stuff; they talk… you just hear wisdom come out in their stories. They talk about what being sober has allowed them to accomplish in their life, you hear about accomplishments, gratitude, graces, and blessings… how they come to know themselves as a person… this knowledge of self, who they are, the relationships that they have been able to have because of being sober individuals, what being sober has meant to them. So, obviously I haven’t been in recovery for too long… about 3 years, but even in that time my story has changed. I remember when I was going to celebrate my first year of sobriety… whenever you have an anniversary you generally celebrate by telling your recovery story to the group…. You speak at a meeting whether it be 20 or 30 minutes or up to an hour or so and I basically made index cards of what I was going to say… as I was scared to death about what I was going to say. So I developed like this historical timeline of everything I could remember that I could relate to alcohol or alcoholism starting from about age 6 up until that day and so that was really what my first anniversary share was all about… all of these events.
Well, whether it was for an anniversary or I was just asked to share or lead a meeting I no longer plan for it anymore or maybe I think for a minute or so off the cuff before the meeting starts about what I’m going to say, but it’s much more natural and it’s about growth, it’s not about some of these experiential timeline things. It’s about where we’re hopefully heading, or the gratitude that one has based on living a life with spiritual principles. It’s about awareness… sharing about being aware of what is going on today or being a more genuine individual… am I keeping my side of the road clean; living life on life’s terms. Not doing things that I know are wrong. It’s about being honest. It’s about accepting who you are. In AA we have a saying that “we’re responsible”, were responsible for ourselves and being willing to help those people that we see walking into a meeting for what could be the first time. It doesn’t mean that we’re responsible for what they do with the knowledge that we provide them but rather, that we’re there and willing to pass that knowledge along.

Harry

I work at a homeless shelter… a Christian-based homeless shelter for men; I’ve been doing that for a few years now as a drug and alcohol counselor. In addition to that I have also been volunteering at another faith-based shelter, which caters to men recovering from addiction; I go by there every now and then and I speak whenever they have community days there. Other than that I am going to school to get further in the field. I’ve also had some work experiences outside of the human services field. I was, and sometimes still am a HVAC (Heating, Ventilation, and Air Conditioning) Technician but now I work for a company who manufactures restaurant equipment… I’ve also been doing that for the past 3 years. Years ago, working in the HVAC field my boss brought up my recovery issues and how I should give back… and he would just keep telling me “I think you need to go back to school for that” ya know, and I love helping
people; I love giving back; my goal is not to save lives, but I want to change people through my story and my experiences; hopefully they don’t have to suffer in active addiction as long as I did.

[I’m a member of] Alcoholics Anonymous. I have been a member for about 7 years now; I chair (lead the meeting); I’m a member of a home group (common meeting one goes to on a regular basis and has service commitments with); I chair on a Monday basis; I am the longest active member in that home group; I really take pride in the fact that I have really helped to keep that home group alive when participation was very low; they wanted to take it off the meeting list. It’s funny. It’s a very good group and the size varies very often. We can go anywhere from 9 people to 30 people on any given day and I really don’t know what makes it fluctuate; some days its real great and other days participation is real low. This particular one meets once per week. There was another home group that met at the same location; they had a different name (meetings typical have a common name… such as ‘The Monday Meditation Group’), but they had some problems and we’re the only ones that still meet. We meet at a medical center… it’s a hospital, they have 2 conference rooms and they do have a NA (Narcotics Anonymous) meeting their also on Sundays at 9:30 in the morning.

[Commenting on how the setting can influence the meeting]. I’ve never really thought about that. Absolutely! For some reason I think it does. Most of the meetings that I have attended… let’s see, there’s the hospital, there’s the churches, matter of fact I’m running through all the meetings I’ve been to and their either all in churches or at the hospital, yeah, they really are, and I’ve done the whole circuit where they say to make as many meetings as possible early in recovery… I did that… I found that meetings have their own little world too and there is a lot of drama inside of meetings that I prefer not to get involved with so I found what works for me and I stick with that. I’m coming up on 8 years sober and six and a half of that are on the outside
(out of prison) so I pretty much have a routine. I’m not a great big meeting maker… I really
ain’t. What I really believe is keeping AA incorporated in my life and staying busy. Staying busy
really works for me.

[Meetings weren’t designed to be our lives… their purpose was to help give us a life].
Exactly, exactly, and ya know what one of the old-timers (person in recovery for a long time)
told me that’s true… I was feeling some kinda way because there is always somebody in a
meeting saying…. Well one guy quoted he hates it when people with less sober time than him
and makes less meetings than him and I don’t know… maybe this guy saw something in me, he
had like 20 years sober and he came to me and said “listen, it isn’t about how many meetings you
make, cause ya know you’re only here for like an hour, it’s what are you doing for the other 23
hours of the day”. The purpose of AA is to get your life back, so you can live it, not to let AA to
become your life, and we see that so much in the rooms. Ya know, with that, I take what is
needed for me, every individual is different, and you need to do what is needed for you. If I just
kept going to meetings to please other people I think I would have built up resentment, and then I
wouldn’t have wanted to go to no meetings ya know, and that is what works for me. I need
meetings to do my job as a counselor. I really think that being in recovery and going through
recovery and working in human services is an asset. I really do. Stress has always been a part; I
don’t sense being any more stressed in my work today than when I was in recovery working
elsewhere. It can’t be any more stressful than getting sober and staying sober. I can remember
my first year on the outside and that was stressful because it involved the process of learning
how to live all over again. I mean changing people, places, and things. [Switching to discussing
early recovery].
My first year and a half of recovery was in incarceration. So if we want to start with my outside recovery that would be around 2004. I’ve been in prison numerous times. [Commenting on the availability of alcohol/drugs in prison, which is why many people who are incarcerated count prison time as time in recovery]. As soon as I got there seen a guy who I had been in prison with before… he had just come from a visit and the first thing he said was “I got some”. As wouldn’t yeah know that as soon as I got there… but I was so determined for change at this point that I told him “you can keep that and I never want to see that again in my life.” So, ah, from the minute I got to prison I was determined for change. I was going to AA meetings and was no longer sitting in the back and bullshitting with the guys; I sat up front; I actually wanted to get something out of it.

I was in what they call general population for just a brief period, maybe a month, before I was shipped out to an inpatient program called The Key Program. I was sentenced there for 2 years, but at the time the program had been downsized to and you couldn’t stay in it for anymore than a year. I done that program; I was very active; I participated and I really wanted to learn something; the program was great. I think if anyone wants to go through the program with an open mind that there is something to get out of it. Ah, it wasn’t my very first program, but before I truly wasn’t interested in getting sober; I was generally interested in getting back to the streets, because at the time I was going from incarceration to incarceration. These programs are a bit different because they are not really run by professionals. We had what was called a facilitator or facilitators. Most of the programs inside the prison are inmate ran with maybe one or two counselors or prison staff to oversee the whole thing but most hands on is all inmates. The inmates that ran the programs were the more senior members. Probably gentlemen that have
been in prison for a very long time and running these programs for a long time. Most come at you from a cognitive behavioral approach.

One particular program that they don’t particularly use anymore… they use to tear you down first, where they tear you down and then build you back up. I didn’t care too much for it; I really didn’t care too much for it (laughing). It was degrading. Like ahhhh, having you stand there and dumping trash on you. I mean I went through the motions and was thinking “what is this suppose to teach me… how to be humiliated.” But ahhhh, early recovery on the streets was, was, and could be difficult if you really aren’t focused on real change. I was truly focused on change and I was alright with being home but not being out. Like, my last time home, I was home maybe six months to a year before most people knew I was out of jail, because I didn’t go anywhere. I didn’t have any friends that wasn’t drinking or breaking the law in some fashion. Through AA and my job I met new people doing different things and slowly but surely I build a life outside of my past and that enabled me to venture out more. I had to find… finding something to fill up my free time and my addiction… my active addiction I spent all my time chasing the drink and finding the means to get more.

I still live in a community that is infested with crime, alcoholism, and other drugs but nevertheless it is there… that mentality is there, uh, which is probably another reason I do so much outside of the house… I go to school, I work, I’m in two bowling leagues, I volunteer at the shelter. I think it is only healthy to stay away from the environment as much as possible. I think the keys are… they always teach you the “people, places, and things (common phrase in AA)” which is very key. My motto personally is “to captivate, educate, and motivate”. When I go into this particular environment of counseling I think this is what I try… to captivate them with my story and the other stories that I have heard; to educate them from the experiences that
I’ve been through, and then motivate them for change. Most people that I meet now who are still in their active addiction, they’re not motivated for anything different… just like I was when I was in my addiction. I really didn’t think that I would ever get out of it, I really didn’t. Prayer, I prayed a lot. You might find this strange but I prayed in my last bender, I was so disgusted with myself, that I asked God to send me back to jail cause on the streets I couldn’t get sober, I knew I could never get sober if I remained on the streets. It wasn’t like I could just walk into a rehab and try to get sober, I was just too caught up in my addiction, so going back to jail was one of the best things that happened to me, it gave me time to dry up and think… ya know really think. Jail has a way of just slowing you up no matter what you’ve been on. It really does. I did a lot of reading when I was in prison. Anything. When I was younger I enjoyed books about the life in the inner city, especially for Blacks. As I got older I really got into John Grisham books… crime mysteries; I love court dramas, I love those types of books. The only thing related to spirituality that I read was The Bible, and I did include The Bible, and while incarcerated I went to many church functions. I went to church every Sunday and any other functions with outside guests.

Like all jails they had some NA meetings, and AA meetings. Until this last time, ya know 2004 to 2005 I had never tried NA or AA outside of an institution. Ya know I went to them when I was incarcerated, but on this last incarceration the counselor who ran the AA group made it seem very interesting… he sold me on staying sober and clean through AA. He was a recovering alcoholic, very charismatic, and… I remember him saying “if you really want to be sober this is where you can learn to stay sober at; if you’ve tried, and tried, and tried it and it never worked, try AA.” I remember getting out of prison… it was in November, and I went to the very same meeting that I go to today, and I’ve been going to that meeting every since. There is just something about AA… from the very first meeting… the hugs… they were genuine,
unconditional love regardless of where I was coming from. They didn’t ask questions or nothing, they just made me feel very, very welcome. Um, I sat there and I listened, I wasn’t sure what to expect, but, I think what really grabbed me about AA was hearing my story out of somebody else’s mouth. It was amazing. It’s like we’re all different individuals, the way we drank and where we came from may be different, culture… everything may have been different, but the story, the story of what we’ve been through, and what we’ve put our loved ones through, ya know, they all interact. I was there for maybe 2 to 3 months before I really heard my story and I was like wow, wow, he could be me ya know or he could be me or I could be him.

I feel like this really emphasized and added strength to my own story. Oh, yes, yes. Cause I’m not alone, this ain’t just a me problem, there’s nothing wrong with me, this just happens ya know. One of the things that ‘keeps it green’ (common AA saying… meaning to remember what it was like in ones’ addiction) or keeps me grounded is going to AA meetings and hearing the newcomer speak or hearing someone that just came back from a relapse. Relating to that pain, when someone truly tells their story, or what they are going through from the heart you can always hear that crackling, that breaking in their voice as they relive it and that is something that I never want to experience again, yet I relive it every time they speak, ya know, because I can remember that pain and I have a techniques I call playing the tapes and what I use to do prior to getting released from incarceration was about playing the tapes about getting back into the game, or getting back on the streets and getting trashed… I always played the first two weeks or the first month… that is the period that was always fun and I would stop the tape there. Today, I play that tape the first two weeks…

[I would] see everything in the first two weeks when it is fun… plenty of drinks, plenty of women, and plenty of money. Then you go on to where your life starts to become
unmanageable, or maybe you have a job and you start missin’ and you know where you get to the point where you stop going home. I play the tapes all the way to where I’ve lost all this weight and I’m living solely to get drunk and I’m on my way back to jail and I look at myself in the mirror and I hate myself… I play all those tapes whenever the urge hits me… I play that tape to the end and in my mind I always end up back in jail so I never want to repeat that again. Playing the tapes really helps me, it really helps me. It’s almost May 5th, which will give me 8 years sober. I still have drunk dreams (terminology in the rooms for chasing the drink in your dreams), I still have urges, as more time goes on they happen less and less frequently. I don’t call them drunk dreams anymore… I refer to them as drunk nightmares because they are really scary. To think, and I always think, ahhh, I blew my sober time I gotta start over again, and then I wake up in my bed and I am so so so relieved, so happy, yeah, I call them drunk nightmares. They are so real… so real, that’s what is crazy about it, they are so real. I have to sit up in bed and look around, I really do, you get everything, the intoxicating feeling, the everything, and I have to actually say whew whew, and I get so grateful that I need to say a thank you prayer right then. I am so grateful that I am still in my bed and it is just a dream. And the dreams have always been with people that I have actually drank with and most of the time it’s people that I know who are still in their addiction today which is what makes it so believable. Cause I remember that I don’t really want to get drunk but somebody offers me one drink and that is just enough to open up the door, and I’m saying to myself ‘I blew my recovery over one drink’. Wow. [Transitioning to how he came to find recovery].

Celebrating each year is like… when I hit 5 years, 5 years. And it was like I have 5 years sober! And the moment I had 5 years sober I really started to think about time. I began to compare time. I would think 5 years… when I was in my addiction I never even had 3 years on
the street where I didn’t end up back in jail again. I started to get incarcerated as a juvenile at the age of 12 and up until I was 38 I went in and out of jail on a regular basis. I’ve never done more than 3 years straight, but I’ve done numerous stents in jail in between there as a consequence of my drinking, or things I did when I was drunk. Well that’s not entirely true. I really got started as a petty thief. I really didn’t get into substances until I was about 22. When the alcohol came into it it really just escalated it. So, when I celebrate it’s like wow, another year without incarceration. I think November 28th will be six years since I’ve been incarcerated… and to the average person that may not sound like a big deal, but to me it’s like wow, I can’t believe I have done this. It’s quite a wow moment for me. My job I’m on now January will be three years and I never worked nowhere for 3 years straight and I have never missed a day of work, so it’s like ahhh.

[Commenting on growth through years in recovery]. During that first year and a half in incarceration I learned not to worry about what this guy over here was thinking and that was a major step. In jail there is always these clicks ya know… and there is always these guys that say “well you’re just doing these programs to get out of jail” and I actually said to myself ‘ya know, I’m going to get this, regardless of what this fella over here is saying’ and I actually became what they call a goody-two-shoe. I was in the program to get it right. I was going to work the program and not worry about what this guy over here is thinking or saying. That was major. Here’s a major accomplishment. I’m in the program, I go to church on Sunday’s, the program is isolated from the general population of the prison, but when you go to chapel… church service, you see people from all over the prison so an old running buddy of mine was in church, and at the time they made cigarette smoking illegal. So I’m sitting in the pew, in the middle of prayer. My eyes are closed, my head is down, and this guy… and I feel somebody tap my hand, and I feel this guy open my hand and he puts what we call a bundle of sticks (cigarettes) in my hand.
And at the time we didn’t have cigarettes in commissary, so it would have been real nice, it would have been real easy to sell, it would have been real nice, so I close my eyes and something came to me. I thought ‘what you just did was got released from prison and someone home just gave you a packet of coke to sell, and you’re starting this whole process over again’. So what I did was I tapped him back and I said ‘no thanks’, I ain’t doing that no more; I think this was a pivotal moment and I realized that you have to start somewhere, you have to start somewhere.

And from that day on I thought, ya know, you can do this.

[Referring to the first 3 steps of the program on unmanageability and belief in a higher power]. If nothing changing nothing changes. Absolutely! There is an aspect in any institution (prison) representative of every aspect in regular society. It used to be cigarettes before they stopped the smoking inside of prison. A cigarette use to be representative of like a dollar bill and you bought and sold everything with cigarettes. Ya know, I haven’t been in now for about 6 years so I don’t know exactly what their using, but I know jail and I know they are using something. And like you said, anything you can get on the streets you can get in jail. The big thing in jail now is cell phones. Yes. Cell phones are big in the jail. So you wonder how they could get cell phones in there; the same way they get everything else in there… guards.

Everybody has a price just about, always. On a personal note, what has happened in recovery, I’ve been married for 9 years but me and my wife have been together for about 16 to 17 years. Now my marriage is suffering because when I met my wife I was in my addiction. She has never been an alcoholic, nor in recovery, or nothing. I can say that I am totally a different person off alcohol… what I want out of life, who I am, etc. I don’t mind working hard, and I think it is like my wife is stagnated at one level … she’s comfortable where she’s at, and I’m not. And, the time I spent away from home trying to better myself has caused us to grow apart and ahhh, at this
particular moment we’re very estranged, and I’m dealing with that right about now, I’m dealing with that. That’s the only drawback I can see regarding my recovery. Recovery is great, I love every minute of it, I really do. I’m very grateful… I always introduce myself as a grateful recovering alcoholic (members typically introduce themselves as “My name is ______, and I am an alcoholic”).

I had to tell my wife, I had to tell my son at the time that I got sober this time and I was coming home from jail again to re-enter his life and I remember a particular time he wanted to do something or go somewhere and it was the same time of one of my meeting times and I told him that I couldn’t go at this particular time and I had to set him down and explain to him, and after that I took him to a few AA meetings with me so he could get a grasp of what I was talking about, and it worked out wonderfully. I had explained to my wife that nothing can come before my recovery, absolutely nothing. Please never question my recovery or why I have to go to meetings like that because if I don’t put my recovery first then everything I put before recovery will probably be the first things I lose. They were very understanding. [Switching to discussion on the components of the program].

This one is… I have a sponsor I very seldom use, the literature… I like to read the IP’s… IP’s are the ‘informational pamphlets’. They usually have them sitting out for anyone to take. I like to read them. There is a whole bunch of them from various things as sponsorship, the triangle of self-obsession, there’s a whole bunch… when I look through them I find something difficult that I’m going through and I read them. Like I said, I have a sponsor that I very seldom use, the literature, doing the step work… I did that while incarcerated, I haven’t done that on the outside. I’ve been through it and I know the step work, and I know some people say that you should just continuously go over them, and over them; I really don’t, I really don’t; and I hear it
all the time in the rooms. I focus on the literature and working the program; I think sometimes that these people spend more time analyzing another’s’ program then they do focusing on their own program. I really come from the philosophy of ‘do what works for you’. I had a friends who says to me ‘you don’t make a lot of meetings’ and I actually said ‘I understand what you’re saying… they say meeting makers make it’ but I’m under the notion of if it’s not broke why fix it. I mean I’ve been out for 5 years, I keep busy, and I’m having no problems, so, I feel if I start going to more meetings just to satisfy you, him, or him, then I’m going to build resentments up cause I really don’t want to be there and don’t feel it’s necessary where you all might just participate in a whole bunch of AA meetings, I do everything, I try to fill my life with everything, I play in basketball leagues, I bowl, I’m very involved with my son in school and in sports, I understand that if you don’t have a lot going on and you’re getting bored then make them meetings, but once you have established a life outside of AA, put AA in where it’s needed. I don’t think you should go to AA just to go to AA. I believe that AA has done its job for me and I will always make it a part of my life but I will not allow it to be my life.

[Referencing individuals that don’t appear to have a life outside of their AA program]. This is what we refer to inside the rooms as the AA Nazi’s. They think that you are supposed to eat, sleep, and drink AA. These are the people that quote The Big Book backwards and forwards and they have all the sayings down. I don’t strive for that. I’ve came to terms with it and it made me feel so much better. I know this guy and I think he’s ready to celebrate 22 years sober and he said that to me. The guy who said that he don’t like people with less clean time than him making less meetings then him… it seems like he was directing it to me… cause you know how we do that sometimes… as I had just got done speaking. I pulled him up after the meeting and asked him about it and he said ‘do what you need to do for you’… this is a selfish program (meaning
you have to take care of yourself first… in order to be present and to help others later). I tell
them ‘I’m here for me, if you can get something out of it then that’s great, but the reason I’m
here is to keep me sober… love to help you out’. Sunday is my meeting day, but if I’m feeling a
little laxadazacal, or something else is going on I know were other meetings at different times are
on any given night. In general I really only make the Sunday meeting but everyone knows me, so
when I walk into a meeting on an off night they’re like ‘well what is going on here’.

The other thing is service work. This is working with people who need the meetings,
outside of the meetings. Service work is great. It builds responsibility in me. Like I said, I’m the
longest member of our home group and right now I have the commitment of setting up the coffee
and being the first one there, and first getting into recovery you really need something to make
you feel like you’re doing something, and also to give you the motivation and obligation to show
up on a daily basis. I remember when I first was asked to run the meeting and I was like nervous
and happy at the same time. Ya know, that somebody thought ‘hey, he’s responsible enough to
handle something like this’ and knowing that everyone that comes to the meeting is going to be
dependent on me to have the coffee ready, to hand the literature out, and to run this meeting. It
really feels good, it really does, because you know from where we come from, where I come
from, my addiction had gotten so bad that nobody trusted me, ya know, nobody believed in me.
The more recovery I got the more responsibility I got in the world, the more people start to rely
on me… my family, my neighbors, my mother… it just keeps getting bigger and bigger and
bigger. [Transitioning to discussion on how his recovery story has developed through years in
the program].

My recovery story has grown… The part that stays the same are the elements of the story
that encompass events during my addiction… I have a way of telling my story that is funny…
serious… my story usually captivates people. The story from one year, two years, three years…
what becomes different… my confidence, where I am in life, my goals, my helping people, each
year my story grows… people depend on me as more time passes… um, my accomplishments
grow each year. My first year out I can remember having a job and then working two jobs and
going to school. My community participation started taking off after about 4 years; I’m very
involved in the community that I live in now, which is not a very good community. We started a
community program in which some of the members all meet in the church and try to encourage
some of the young guys to come over and speak and see if we can get them interested in jobs, in
schools. As a person I really feel that I grew spiritually. As a young person I only went to churc
when I got incarcerated, but now I feel that I really found a church that I enjoy; I have been a
member of this church after I was sober for about three years, so this participation in church
really didn’t start until I had about 3 years of recovery.

I have always believed in a higher power, even in the midst of my addiction. I can
remember… well, I can’t remember all that well how I was at that moment, but in the midst of
my addiction and facing incarceration… these foxhole prayers… and this was actually a genuine
prayer. It went something like this; “Lord, I can’t get off this by myself, I need to go back to jail,
but I don’t need a lot of time”, cause at the time I was facing a lot of time. I was habitual. I was
facing anywhere from 2 years to 45 years and the judge would have been just with anything… I
was waiting for sentencing and I had already been convicted and the judge would have been
justified in anything he gave me… my record is that bad. So, I had told my wife that I would
probably get eight, so I came out of the courtroom… I had got locked up and I had 5 years. I was
really telling my wife goodbye since she had been with me for so long and going through this for
so long I felt that she wasn’t going to wait that long and I didn’t want her to because she had
been through so much… I was like, I had brought this upon myself, you had been through thick and thin, so go on, and I didn’t even want her to go to court with me that day. I can remember walking to court and trying to sneak out of the apartment to go to court, but somehow she showed up to court that day. Standing there in front of that judge that day I was really very spiritual. Like I said, I need to be incarcerated, I need to get off of this, so when I received 5 years I really knew that he heard me, cause the 5 years wasn’t really all incarceration because I had been through a few programs, so when this judge gave me 5 years, 2 years was the Key Program… drug treatment program, 1 year was the Crest Program which is another level 4 treatment program, 1 year level 4 probation and 1 year level 3 probation (levels equate to degree of supervision and number of contact visits with the probation officer per month – the higher the level the more intense it is)… and I said to myself, I will not throw this blessing back in the Lords face… everybody who knew me said I was getting ready to do some serious time ya know… they were truly playing with me. I took heed, I really did.

My spirituality as far as the program goes… I’ve always believed in a higher power… I could be just driving down the street in my car on my way to work or anywhere and I’ll just stop and say a prayer of thanks for where I’m at today no matter what I’m going through because I’ve learned that I’m always going to be going through something… the difference is how do we handle what we’re going through. Going through emotional problems I’ll meditate. I use to just drink to numb the feelings. Today, I examine those feeling and I just deal with them; I share them… that’s another thing I love about AA… the phone lists (when someone is new to meetings, or when a member asks for numbers to call for additional support, a paper is passed around the room and people who want write their first name and phone number down; men give their numbers to men, and women give their numbers to women) where you can pick up that
phone list and call someone… reach out and share your feeling with someone, and always get some suggestions. I shared this when I had a lot of guilt… I feel a lot of guilt right now because my wife stuck with me through everything… multiple incarcerations, my addiction, and I’m feeling like I’m not in love with her anymore and I want to move on. Like… how can I do that… but I’m afraid if I stay I’m gonna lose me… building up resentments, not being happy… being lonely… these are all signs that lead back to relapse… and if I relapse I’m going to lose her anyway. So…

She’s never known me clean. I’m a totally different person, my standards are higher, and you have to grow with me. I’m not letting myself to just die in the projects, to have nothing out of life… I could have just stayed drunk… living here and done all of this. I call it… we live in an apartment in the projects… but it’s a pretty nice apartment… it’s clean, comfortable, I tell her that she’s got the nicest house in the projects, and she’s happy. I’m not… ya know what I mean. It’s like you’re the big fish in this whole little pond and you think that… I want to be the little fish in the big pond, I don’t want to be the big fish in the little pond… ya know what I mean, I don’t mind… I want so much more out of life and she’s not ambitious enough. She’s started school twice and quit. She’s been in the hotel business for the last ten years, housekeeping for the last 10 years and I told her she’s capable for so much more, but it’s the comfort-ability element that she doesn’t want to ya know. Then we have the dynamics of the family… typical family in a small 3 bedroom apartment. We have our 24 year old brother living with us who doesn’t want to do anything, and it’ sad because in our neighborhood it is very hard to find a 24 year old young man… young Black man, with no criminal record, no kids, and a valid driver’s license (both laughing), and I say to him… ‘the world is your oyster man’, and he has a drinking problem and doesn’t want to give up the drink, and it makes me so mad cause if I could have got
to that stage and been like that... no kids, no criminal record, and he don’t want to do nothin’... go do what you want ya know. He’s been living with us since the day he turned sixteen and then we have my stepdaughter, who is twenty-two, still at home... wanna work in a pie factory... won’t do nothing’.

Then we have the twenty-one year old stepson. He’s the only one who actually applies himself. He quit school and he asked me about quitting school and I’m really sorry that I told him ‘well, if that is really what you want to do, go ahead’ because I feel if you’re not really gonna apply yourself why hang out in school... he had a job, and he still has that very same job today, ya know, so he works every day, you don’t have to wake him up, he has 2 cars... he’s bought and paid for both of them, he pays his own driver’s insurance. He’s had one very shallow brush with the law, but really no trouble. I try to encourage him to do a little more now, cause this job isn’t going nowhere... it’s a go nowhere job... you start out as a dishwasher, then you get to cooking, but they’re not really paying him to cook, they’re still paying him the dishwashers wage, so I try to encourage him to put in applications other places if you want to keep cooking.

Ahhh, my sixteen year old, my son, his mother babied him, she hid things from me. And my wife... I’m always the last to know, because I’m the disciplinarian, ya know, then when it’s time to tell him no she makes me do it... makes me the bad guy. I know he’s smoking marijuana, and it’s like, I’m out of the home so much, ya know, trying to better myself, and trying to do things to better my family, and it’s working against me I feel... kinda like I’m in quicksand ya know. To upgrade, it’s kinda like I’m losing my family... I don’t know what’s going on in my apartment when I’m not there and it’s like... I know it’s time to leave. I’ve been knowing that I need to be honest, this started about 2 years after my incarceration... no one around me wants
more than they got and it’s stifling me… cause I’m motivated to do some things, and no one is motivated… well, at first it was bearable because it was the community, but now it’s gone and seeped inside my apartment, ya know, cause my brother-in-law at least did work a little bit, but now it seems that no one wants to do anything to better themselves… and I don’t want to get caught up in that. I refuse. I had a talk with my pastor about it and he’s… I don’t know, but I still have a lot of gratitude for my wife. [Closing with finding meaning in symbols that represent peak experiences and/or moments of awe].

Ya know sober time key tags… and I have most of them, I gave my son one and I sat down and I talked to him about what it represented, and whenever he’s going through something, or thinking about something that he shouldn’t do I ask him to look at this and remember what his dad has been through. I’ve been through a lot and I really try to use my experiences to teach my son and that’s what frustrates me so much with my wife because she doesn’t realize how her sheltering him from the consequences of his actions, ya know, makes it worse in the long run. Um, moments of awe… usually after I speak somewhere; I go back into the prisons and I share with the guys in the programs… my story… and to see those men once they come out of incarceration and I see them in a meeting and tell me how my story encouraged them to do something’s different… the problem of it is that a lot of times things are short lived… as we know there is a lot of relapse… it can be controlled when one is confined to a cell but when they get out the luster doesn’t last real long. A moment I still get today is my mother… I was celebrating; I think it was my third year clean and I was celebrating… and my mother and my brother, and other family members showed up at my meeting. And my mother looked at me like I was the president of the United States ya know, really so proud to have her son back and seeing me doing some things that she knew I should, and could have been doing a long time ago… and
she still has that awe today… that’s real special, that is real special. To know that my mother is so proud of the man that I have become today.

‘Thank You Everyone… We Have a Nice Way of Closing’

This is how it happens. In every meeting I have been to, which at this point I approximate to be about two hundred in the past two years, there is a cessation to the discussion with the above mentioned saying. This statement is followed by the members of the meeting gathering in a circle, removing their hats, clasping the hand of the person to one’s right and left, closing their eyes, and bowing their heads. With this, the person who played the role of guide for the meeting will state ‘can we have a moment of silence for the sick and still suffering alcoholic both inside and outside of these rooms followed by the Lord’s Prayer and the Serenity Prayer.’ Moments later the sound of silence is broken by the guide initiating conclusion in uttering the first words of the closing prayer, or through a transcending intro such as ‘whose Father’ or ‘He who puts the breeze in the trees.’

The scenario that I have just described is ceremonial; it’s a ritual that is in fact perpetuated across a multitude of twelve step groups. Its purpose is merely to close a meeting, but its symbolism extends beyond the meeting doors. This process has a variety of functions, which may include: a sense of oneness, an act of gratitude to a power greater than oneself, and/or a geometry in which there is no head or tail, where every member is equal in importance. The process that I have gone through in interviewing, and gathering the recovery stories of the preceding men has been a personification of this process. This has been a process that has introduced me to men across varying geography, class, settings, educational backgrounds, ages, and ethnicities. As I think about my interviews, I draw reference to the closing process of the
meeting. I find it to be symbolic to the notion of ‘putting all the pieces together’ or ‘making connections’.

When I think about this process as a whole my mind drifts to such descriptive words as ‘a journey’ or ‘an expedition’. As previously stated at the beginning of this chapter I found the particular setting where the interview took place to have a role. I don’t fully know what that role was, but it clearly added a dynamic to the flavor of the discussion. It would not be valid for me to say that it changed the interview, or that it directed the interview in some way, as I will never know the interview to be any different, but it did illicit a particular enchantment or aura to the discussion that took place. I have also found this to be true of different AA meetings. I can’t judge a meeting based on the setting in which it took place, but there is clearly a different feel.

Until now I have never before taken on a task like this. As a family counselor I have completed psychiatric interviews with hundreds of individuals and families, but this process had a different feel; with some of the interviews I would describe this feel to be an intimacy or a togetherness frequently not felt in a chance encounter. I prepared for my interviews with a standard template, but found myself deterring from such a script fairly early in the interview; each interview developed in a direction in precise proportion to the nature of the individuals’ story. A time period was discussed prior to the interview beginning, but a no point was it a conscious through for myself during the process of the interview. During the same time period that I was interviewing these men (fall 2010) I was also attending two or three AA meetings a week on my own. I felt that this was important to the interview process as it gave me a reference point for critical reflection and analysis.
As I journeyed through this process I developed this sense that I was meant to meet these men; I have a certain intuition, or sense of knowing, that hearing the stories told to me will have a purpose as I continue down my own path of recovery. There is something to be said for the heuristic experience where two individuals with very different backgrounds share a common theme, which in this case was alcoholism. For myself there was no tension or dis-ease; it felt like an AA meeting… a place where I am accepted, and valued merely because I am who I am. I cannot speak for the individuals I shared time with, but my perception was that they shared a reciprocal sense of value in this process. I believe this to be true based on their own reactions to being a part of this process, which such acts including: following up with me by phone, wanting a copy of the final project, suggesting other individuals they felt may want to participate, or sharing a fascination for the nature of this research and valuing its purpose.
CHAPTER 5

INTERPRETATION AND DISCUSSION

Throughout this thesis I have made every attempt to honor the twelve steps and twelve traditions of Alcoholics Anonymous; as member of this program it is my responsibility to do so. Of particular relevance to this work, and this chapter, is the tenth tradition, which states “Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy” (A.A. World Services Inc., 2007). For the purpose of this literature this means that the application of A.A. discourse is only that of this researcher, and of the participants in this study; it does not represent the beliefs and principles of A.A as a whole. The program of Alcoholics Anonymous also has no political interests in research outside of its own program, and therefore does not claim to believe that their ideologies have application to the fields of psychology and adult education.

This being said, within this section I attempt to provide an integration of my experiences, A.A. discourse, the study of alcoholism and addictions, and academic research outside the field of addiction studies, as it pertains to the life stories of the 8 men participating in this study. It is not my purpose or agenda to speak for A.A. as an organization, nor to draw generalized conclusions based on the stories within. My goal and purpose of this chapter is to reflect upon the stories within the previous chapter, and draw application of academic research to those stories. The format of this chapter is such that I look at the research participants both as individuals, and as a group. The relevance of this discussion is to relate knowledge acquired in this research back to the research questions of this thesis, and to connect this knowledge to the literature of adult education and related studies. It is also the purpose of this research to remain
focused on learning, meaning making, personal growth and development. This author welcomes the reader to critically reflect upon the discussion within, and to assess its purpose and meaning within their own lives and academic pursuits.

**David**

All learning is situated; it lives and breathes in a particular context (Knowles, Holton, & Swanson, 1998). In personifying this attribute of learning, both in the didactic classroom setting, and in our self-directed learning environments, it is important to give credence to this notion of context. Additionally, learning is historical; it exists upon a particular time-line; to this end I would briefly like to give some identification to my relationship with David, and for that matter, all of my research participants.

I have known David for approximately four and a half years. I actually first met David through a professional relationship. David owns several rental properties in the town we were both living in and one of my counseling clients was having a problem with a property they were renting from him. At the request of the client, who was fearful to confront their landlord, I established contact to attempt to resolve a problem. From that initial contact about a year went by until I formally (in-person) met David, which occurred at a men’s group meeting one Saturday afternoon. Intuitively, I immediately identified David as an individual who had been in the rooms for some time; more importantly, I identified David as an ‘old-timer’, an individual who has a vast knowledge of the discourse of A.A. What I of course couldn’t have known at that time was how David practices his recovery program in his everyday life.

Through my development of an acquaintanceship to friendship with David, this perception was fortified; I had also come to know David as an adult educator and administrator
through the content that he shared with me at meetings. There was in actuality two bonds between us; our addiction and pursuits of recovery, and our education histories. Several years ago David completed a doctoral degree in the field of education and I identified myself to him as being in the process of this endeavor; through this shared bond I perceived a mentorship relationship transcend from him to myself; the belief that I could accomplish this endeavor was strengthened.

Through David’s story, several references of importance were made to the disease concept of alcoholism (Milam & Ketcham, 1981), personal growth and learning, and spirituality. Contextually David identified having a father and grandfather who were Alcoholic (purposefully capitalized, as it is in the Big Book, to represent a formal identity, in contrast to ‘an alcoholic’), being married, and having had lost his wife and daughter to illness, through his years of recovery. David also identified how his alcoholism really didn’t develop until his late twenties, shortly after completing his formal education. He described his addiction as an element that developed over several years, possibly in response to rising stressors on the job, the professional environment, his genetic predisposition, and as a tool (alcohol) used to disconnect or to relax and settle his mind.

David is what we refer to in the program as a ‘first-nighter’; an individual who has a lived experience of abstinence and recovery from their first meeting. This is not defined as having hegemonic value, but often times individuals in the rooms will identify this as part of their story; essentially, it is not viewed as a superior version of recovery, but merely a different lived experience of recovery. David identified an early perception of struggling to identify himself with the cohort of his first meetings. We see this through elements of denial and projection in his perceptive statement “I had more teeth in my head than the whole room”. This
is a similar perception I have experienced with myself, and with the experience of some other research participants. This also could be a very important moment in one deciding to return and identify with the program, or as a means to convince oneself otherwise. Based on David’s story it is evident that he did not retreat, and in fact was able to make connections and begin to create an identity in the rooms, through some purposeful early experiences; these are identified through sponsorship, service commitments, and community building.

David commented on his first sponsor (Hal) as being “a nice person” who had “the right touch”; one who “said little”, but who taught through example, and based his sponsorship through the discourse of the Big Book. David also described how he was given a service commitment very early in his participation in the program. David’s commitment was to prepare coffee before the meeting. I believe this experience was a process of humility for David; this is evident in the comment he made to his sponsor: “I don’t know how to make coffee… my secretary always makes it for me”. Other common commitments one may have include: setting up the meeting, distributing AA literature, greeting people at the door, event planning, secretary, treasurer, speaker recruiter, and General Service Representative (GSR). Typically each group will have a GSR who will meet monthly with other GSR’s in the area to discuss events, concerns, and other pertinent aspects. David described his early service commitment as being very helpful; it provided for him a responsibility to be present, and a means for which to meet other members. Through this exposure David described a cathartic quality of acceptance growing within him, which offered contrast to his early perceptions.

David also described his experiences sponsoring other men. It is apparent from his account that he had long-term relationships with several of the men he sponsored. It was evident through his story that his understanding of the role of sponsor was to pass along the knowledge
that was freely given to him from the primary text of the program (the Big Book). This process included: acquainting an individual to the literature, progressively and systematically working through the twelve steps, and helping men to integrate the AA program into their lives outside of the rooms. David personified these principles with the example of his sponsee who was in the process of selling his car to another individual. This example was indicative of the process of learning through action, characterized by rebuilding ethics, telling the truth, breaking the chain of resentments (deterring from building new resentments), and practicing a sense of morality that had been lost through ones’ development in their addiction. David did not speak to alcoholics not having morality, but rather having lost the application of culturally-based moral principles in ones’ everyday life. This was a common theme displayed in the stories of many, if not all research participants. This is what is commonly referred to in the program as ‘practicing these principles in all of our affairs’ (the twelfth step; A.A. World Services, Inc., 2007).

All of the steps are understood in the program to be spiritual in nature, but the twelfth step has special significance to this process in that it specifically insinuates the prerequisite of having had a spiritual experience as a result of the preceding steps. In David we see this process through the development of his own story and through two particular experiences that he described. David identified the story that he tells today as one that has developed through years of repetition and refinement. David has chosen to integrate the great losses he experienced with the deaths of his wife and daughter, described by him as ‘tremendous upheavals’; he utilizes these experiences as a means of connecting and inspiring others; this is an aspect also present in other stories, particularly Harry’s story.

Secondly, we see elements of spirituality in another account that David experienced. While stress and anxious to get home to meet his family commitments (attending his daughter’s
birthday) David describes having an influx of resentment fueled by others getting in his path; a possible perception that the world was just out to mess up his needs and plans. The incident David shares with regard to coming up on a car with the bumper sticker stating ‘Easy Does It’. David ends up meeting the individual on the side of the road who was operating that vehicle. David sought out the driver of this vehicle in hopes of finding another alcoholic to talk to. Although this is not what he encountered (the driver merely bought the car with the bumper sticker on it), David was able to find resolution and alleviation to his angst through the communicative interchange he had with the other driver. The following statement from the driver elicited this: “I don’t know what group you are a part of but there must be a lot of you as people have been honking their horns at me all day”. In the Big Book of Alcoholics Anonymous (pg. 219, 4th edition) there is a statement within one members story that encapsulates this experience: “nothing happens in Gods world by mistake”… it is through processes like these where one develops “a new pair of glasses.”

Through my own exchange with David I came to understand the meaning of this experience as being reaffirming; a moment of clarity where David was given a spiritual gift from his higher power that was all about being in the moment… a crucial moment that couldn’t have been orchestrated any other way, giving David a sense of connectedness, and a way of knowing that everything was going to be ok. These experiences as part of practicing spiritual principles exemplify David’s story; he describes these purposeful elements to include: becoming more responsible for things in his life, being honest with himself and others, and implementing his recovery program into all of his other affairs (another theme we see across the participants stories). For David learning appears to be about becoming self-directed through application; it is
not merely an affective state, or a conscious matter. This gets directly at the first research question for this research; the experience of learning in recovery.

David describes his learning to have taken place through ‘tremendous’ and ‘incidental’ events that have taken place in his life, both before and after his sobriety date. Throughout the review of David’s story we bared witness to learning experiences where a re-evaluation of purpose, beliefs, expectations, motivations, and morals took place. The context of this learning was both individualistic and communal. David discussed learning through a process of reflection is reading AA literature; he also describes having had growth through working with his own sponsor, and in sponsoring other men. These concepts of personal development lead us nicely into our second research question, which looks at the implication of human service professionals (HSP’s) in recovery. Beyond the specific experiences of HSP’s in recovery we need to look to the meaning relatable to addiction studies through a lens of transformative learning.

Purpose, beliefs, expectations, motivations, and morals encapsulate the ideals of ethics (Corey, Corey, & Callanan, 2011). In practice HSP’s are governed by the specific ethical boards that they ascribe to, as mandated by specific areas of education, certification, and/or licensure, but even within the general category of ethics we find sublevels that are pertinent here. The most basic level of ethics is generally referred to as mandatory ethics, which is essentially a direct interpretation of a specific code of guidelines. In contrast to this the HSP who has developed through an actualizing process of knowledge, growth, and experience may come to understand what is referred to as aspirational ethics. In aspirational ethics one comes to an “understanding of the spirit behind the code and the principles on which the code rests (Corey, Corey, & Callanan, 2011, pg. 15). At this sublevel the commonly held principles of autonomy, beneficence, nonmaleficence, veracity, and justice are not just known, but understood, through a multi-
factorial process that may include: trial and error, critical reflection, consequence, re-evaluation, burnout, etc.

Essentially, we can look at the internal growth and change process David spoke of as part of his recovery story, pertaining to his development with morals, perceptions, motivations, and beliefs; recognize the strength inherent to this process as to its purpose with the development of self; to how when one individual emerges through this process with a new understanding the strength that can be fostered to the community culture. What makes us professionals is that by definition we are first to govern ourselves (Corey, Corey, & Callanan, 2011). We see this same process taking place in sponsorship and/or mentorship relationships. By promoting these types of relationships among the broader field of human services we may stand to see development from the mandatory to the aspirational, as well as reap the spiritual gifts when the self perceives the aspirational state. Lastly, this line of thinking is symbiotic with the discourse of transformative learning theory (Taylor, 2007). Transformative learning theory has informed this process of having an inadequate skill set, moving to disorientation or dilemma, to re-evaluation or re-negotiation through critical reflection, to achieve a new state of understanding and meaning. This was of conceptualizing growth can inform TLT to continue to look at the importance of the spiritual or the aspirational, adjacent to the cognitive and affective, as processes of meaning making.

**Ralph**

About a year ago I was asked to take over instructing an undergraduate theories of counseling course, which was taken by students seeking an associate degree in human services, at a technical college. Students who already had a degree outside of human services may have
been taking the course due to interests of entering social service occupations; this was Ralph’s case. Ralph immediately stuck out to me due to his gregarious and inquisitive presence, but even more so he stuck out due to being the only male student in a class of about twelve. Ralph was a very attentive student, always looking towards me, and frequently had his hand raised with an answer, or related exploratory question. I felt a connection to Ralph, and it didn’t take long to resolve what that connection was, as Ralph very early on shared with me (I believe after the first class or two) that he was in recovery, and part of the AA program. When it came time to initiate this dissertation research I remembered my conversations with Ralph, and how integrated Ralph’s recovery was into his social identity.

There were several themes in Ralph’s story which I feel are particularly pertinent to this research; over the next several paragraphs I would like to extrapolate on some of these themes, and relate Ralph’s story to the guiding research questions. Many aspects of recovery and alcoholism were addressed in Ralph’s story, but I found his discussions on morality/ethics, meaningful elements of the AA program, learning opportunities, and time, to be especially meaningful. There were some clear similarities and differences between the stories of David and Ralph, which will also be explored.

Like David, Ralph was also raised in an alcoholic family, although this piece did not appear to play a primary role in either of their stories. There was certainly some similarity to their stories, with regard to themes (moral development, important elements of the program, and sponsorship experience), but outside of these similarities their cultured experience is quite different. Cultural differences that we may be able to attribute some of this difference to would include age, socio-economic status, and educational backgrounds (Hays, 2007). These two participants are in two very different places in their respective lives; one nearing retirement
(David) and the other (Ralph) really just starting his career in the human services field. It is important to keep these elements in mind when looking at the participants’ stories, and how they inform our research questions. The three aspects of culture identified above were consistent variables across all the participants.

In our first research question we look to discover what exactly is the experience of learning in recovery for human service providers; more deeply we look to the role of spirituality, as a learning process, being a medium for transformative learning. I would like to revisit the ideas discussed in David’s story (ethics/morality), and integrating some of the discussion from Ralph. With this question I would also like to look at how Ralph views the elements of the program, and dissect their importance to learning, spirituality, and transformation, for human service professionals.

Like David, Ralph did not believe himself to be devoid of morals, nor be without ethics while in his addiction. Consistent with theory from Kohlberg, both of these men found morality as something they learned in their early childhood experiences, through interactions with their family of origin (Corey et al, 2011). They both also account for not really learning new information as it pertains to ethics, but to borrow a term from Ralph, they describe a process of ‘renegotiation’ occurring. My understanding of what Ralph means by his term ‘renegotiation’ is a process of critical reflection on previously held beliefs, in contact with a current dilemma, seeking a forward-focused decision making vector; an integral part of this evaluative process is accessing prior memories, asserting cognitive and emotive functions to these memories, and making a decision to act with consistency to a particular discipline or responsibility.
David draws reference to this process by citing the 11th step of AA, which is basically about utilizing prayer and medication to improve one’s contact with their higher power. This identifies a self-reflective process. Ralph shows some distinctions by identifying three other steps (4th, 5th, and 6th step) that he perceives this process through. In the fourth step one makes an inventory of their character defects (essentially their regrets). Next, in the fifth step one lists, and admits to God (or their higher power), and their sponsor exactly what these regrets and character flaws are/were. And lastly, in the sixth step one becomes ready to have their character flaws removed by their higher power through the process of self-disclosure and having a vital spiritual experience. Steps four and five are inherent in our definition of this ‘renegotiation’, but step six offers a new element that can most aptly be described as ‘willingness’. Ralph left us no guess work with how he felt about this in his words: ‘if you don’t recognize your part in sobriety, you’re doomed, you’re absolutely doomed.’ In this Ralph was referring to working the elements of the program in general, but more specifically he was talking about taking action, being responsible, and behaving in a way that is consistent with doing the next right thing. To exemplify this… to do ones best to spend the twenty-three hours of the day outside of the meeting, consistent with the hour of the day one may spend in the meeting (Alcoholics Anonymous Inc., 2001).

We can relate this line of thinking to that of self-care in our roles as human service providers, within our given professions. Self-care is about practices (actions) one may do to debrief, while away from their work, but it is also about having a knowledge-base for the beliefs of what is beneficent and malfeasant, according to the ethical code one ascribes to, and behaving in a way that is concordant (Bacharach et al, 2008; Corey et al, 2011). Within the discipline of adult education we also find current research relating to this. The study of authenticity looks at
our persona in the classroom, and how true we are being to ourselves and our adult learners. Literature within the theme of authenticity identify how hegemonic forces can limit and/or impair an educators ability to be authentic; role salience going on in the educators life can also present one with inner barriers limiting one’s ability to be authentic (Cranton, 2006; Spencer, 1987; Tisdell 2008).

Lastly, with regard to this theme of ‘willingness’ it is important to review some other implications as they pertain to research in adult education and spirituality, as well as recovery. Sandy B., a notable speaker in AA rooms across the country often refers to ‘dropping the rock’ as a concept in contrast to willingness. Sandy tells a story of a bunch of AA members in an invisible boat calling to a man on the shore to join them. The man on the shore responds “I can’t come join you, I have this rock”. Simultaneously everyone in the boat proclaims “drop the rock”. The man ashore, previously unaware that he could just drop the rock does so and joins the other AA members in the invisible boat. He then responds ‘how are we to get anywhere in an invisible boat’. The members respond ‘start rowing and the boat will appear’. This fable, though comical, speaks to the mental process that is in existence prior to willingness, and the change in mental set that takes place with action. It is this level of experiential learning that Ralph speaks to with regards to practicing ethics, and working a recovery program, in early sobriety. To Ralph, accessing the literature, working with a sponsor through the 12 steps, and practicing principles of the progress are such a requisite that he refers to them as ‘not negotiable.’

This concept if willingness enters the realm of spirituality on numerous levels. In paradox, the concept of not being willing also enters the spiritual realm. Kurt Swensen, a psychotherapist, and certified addiction specialist out of Portland, Oregon operates podcast and web-based broadcasts on various recovery issues. Kurt is a consultant to the recovery community
and operates a naturopathic treatment center (www.onlinerecoverysupport.com). Kurt commonly speaks to elements of the 12 step program, and general spiritual principles. With regards to willingness, in a recent episode Kurt provided commentary on the circular nature of the Universe, drawing application to opportunity. The belief behind this thought is that the Universe provides each individual with opportunities to grow, thrive, and develop. Individuals, with their own free-will choose how and if they are going to react to this opportunity; the converse to this being that the Universe does not care how the individual responds to opportunity, but will merely deliver a consequence (good or bad) to the individual’s choice. This process continues to over and over again delivering demise or an actualization potential. I would like to utilize this phenomenon to discuss learning, as seen in my own experience, and the experience of the research participants, the process of addiction, and transformational learning.

In David it was an initial resistance to identify with the members of the AA program (feeling as if he didn’t fit); for Ralph, staying miserable in his work and motor vehicle accidents; in Jerry, reliving the despair of an inner hell through social isolation; for Thomas, repetitive legal consequence; in Conner, jail, running away, and family separation; Josh, multiple relapses; for Matthew, jail, feeling as if he lost the person he once was, and a lost relationship with family; and in Harry, relapses, theft, jail, and anhedonia. Individual circumstances and resources, to some degree, play a role in consequential outcomes, but the process is the same… a spiraling downwards. The spiraling is proliferated by the individual cycling through their life turning to alcohol, or other elements of addiction, less and less prepared to meet and respond to others, and the larger Universe.

This concept of spiraling, as a spiritual principle, is written about by Elizabeth Tisdell (2003) and others, in relevance to learning, within the adult education discourse. In her book
Exploring Spirituality and Culture reference is given to learning theory by Mary Catherine Bateson (2004) with regard to development being conceptualized as a spiral process. “She suggests that we often go back and make new meaning of old events, symbols, and experiences. What may have once been peripheral to those experiences may become an important meaning-making experience at a later date through the process of spiral learning” (pg. 96). Robert Kegan, from the same text, also offers perceptual understanding to this process. He describes spiraling as a means of constructing new knowledge and meaning, where new meaning stems from older experiences. To this end a more complex system of mind is developed over time as one develops more ways of organizing different experiences. This is a process that I can reflect back upon having occurred in my own development and learning in recovery, and we certainly saw this in the stories of Ralph and others. This process is encapsulated in statements like: ‘I finally hurt enough’, or ‘suddenly it all came clear’, or ‘everything just added up’. In this theory of learning and in these conceptual examples there is an internal mental process of reflection and insight that leads the individual to viewing an experience through a ‘new pair of glasses.’ Through this internal reflective spiral learning process one can come to find a state of mental preparedness for the next time the University turns his/her way.

Lastly, there seems to be an element to time in recovery that may related to learning. Ralph spoke to this element of time, as did all the other research participants. Some spoke of time very briefly (their years of sobriety), where others spoke to the temporal process of time. In the program we have sayings like “time takes time”, “one day at a time”, “we all have today”, and “keep it green”, which all get at a concept of time. Time is celebrated in the program at certain intervals: 30 days, 60 days, 90 days, 6 months, 12 months, and multiple years of recovery. Addictions research has also found lower recidivism (relapse) rates with longer term
recovery, in contrast to early recovery (Slaymaker et al, 2006). This process of spiraling spoken of by Bateson and Kegan may give some explanation or support to the supportive mental constructs one is able to develop temporally; in essence, more time in sobriety is consistent with more history of experience, from which one has to draw support from.

Contrary to this line of thinking is that of negative reinforcement, stemming from learning theory. To this end the duration of recovery, or affinity for maintaining recovery is fortified in an effort to remove the unpleasant stimuli, being the thought of relapse, or actual events perceived to be a part of relapse. A secondary and probably more plausible line of thinking with regard to time stems from Albert Bandura’s social learning theory (Vaillant, G., 1983). Time is a socially defined identity that quantifies in salience and in-group status over time. In essence, the more time one has, the greater the importance time in recovery has as part of one’s identity, and the more devastated one would be in losing at. One may set an ultimate goal, such as achieving 35 years of sobriety; a relapse in early recovery may not nullify this personal goal, yet a relapse after many years could very well make this goal unachievable.

Jerry

I have had known Jerry for just about 3 years. I first met Jerry when I took a new job with a private practice in northern Delaware. Through clients that we shared it became known to me that Jerry was in recovery, and had been for several years. It is not an uncommon practice for human service providers in recovery to share this element of self with their clients/patients and this is exactly how Jerry and I came to discover our common bond. In the last year, Jerry and I have become much closer friends. Through the process of participating in this research Jerry and I came to realize that we had many more shared bonds including: marrying a woman who has
children from a prior relationship, being recently married (last 3 years or so), having similar clinical theoretical orientations, turning to substances for similar reasons (to feel comfortable in our own skin), and working therapeutically through our own stories and the stories of our clients.

Through Jerry’s narrative he really got at several of the important components of the AA program, and effectively discussed his learning through these mediums. In Jerry’s narrative we saw some similarity to the previous two participants, especially with the function of moral development; what Jerry’s narrative added to this research is how he learned, and how his learning changed over time, which is what I would like to focus on here in this discussion. This element gets at the second question of this research: how learning in recovery is manifested. Jerry’s narrative also informs our 3rd research question: how can action by human service providers promote critical reflection of assumptions across the components of the program (e.g., storytelling, sharing, the AA literature, sponsorship, stepwork, and community building through fellowship).

Jerry has been a psychiatric nurse for over eighteen years, primarily working in substance abuse treatment facilities. Recently Jerry completed the graduate education requirements to become an advanced practice nurse practitioner (APRN), and is now permitted to prescribe medication in the state of Delaware. Jerry attributes his ability to have accomplished this professional milestone through the work he has done in the rooms of AA, and through practicing his program in the all the affairs of his everyday life. Somewhat unique, in contrast to our other participants, Jerry found recovery, and has maintained recovery, from a very early age (late teens). It has not been my experience to find teens in AA to be a unique experience, in fact it has become more and more prominent over the past decade, but long-term recovery beginning in the teen years is quite unique.
Jerry identifies why he used drugs: “to escape” and “to feel comfortable in my own skin.” From his very first experiences with the recovery community he reports having had a difficult time identifying. He attributes this to being raised in middle-class privilege followed by emersion into the halfway house “flophouse” experience. He reports having such a reaction to this experience that he first left, only to find that he quickly returned to his old behaviors upon returning home. This first realization of ‘I can’t do it on my own my way’ appears to have been essential.

Through Jerry’s story we saw several connections to an element of learning; these included: learning through a professional relationship with a counselor, learning within a group of peers, learning through participation in AA meetings, learning through consequence (mostly emotional), and learning through self-discovery and critical reflection through the AA discourse. Jerry describes having very fond memories of his relationship with the individual counselor assigned to him at his drug treatment center; his counselor was also a clergy-member (brother) of the Catholic Church. What did he find to be especially meaningful about this relationship? It focused on insight and feelings; it gave him insight into some of the existential questions he had been suffering through, including: Why am I the way I am? Why do I do the things that I do? Why do I feel this kind of way about myself? Where did the person I know today come from? Jerry did not tell us that his counselor gave him the answers to these questions; he couldn’t have, because the answers to these questions lie within Jerry.

This counselor was effective though in helping Jerry to be mindful, to turn him inward, to get at the true emotions, and to identify the difference between concepts and emotions. To illustrate an example of this Jerry shared how he was asked how he felt about a particular situation; he responded “like shit”; the counselor then engaged Jerry in a process of recognizing
that “like shit” is not an emotion, focusing, and refocusing on going deeper. To this end learning arose through feeling identification and self-discovery. Learning who he was and how he perceived. Coming to understand his basic assumptions, motivations, and intentions, which in connection to a Higher Power, is the core of learning through spirituality.

In Jerry’s narrative he also alludes to a relational basis of learning. We saw evidence of this in his discussion on the importance of his core group of friends in recovery, and in the mentoring relationships that were fostered in the rooms of AA. To this end we see a relational function occurring with meaning and understanding is developed together amongst the participants where suggestion and reflection upon one ones prior triumphs or failures, through their story is shared. This construction is then taken on by another’s interpretation of the initial shared experience, reconstruction from their own lens, and reframed or supported with insight. This is a process that continues on and on until the originating individual fully takes it in, and interprets it through their own lens, constructing and re-constructing knowledge, based on a shared experience. Literature within the discourse of adult education supports this process. First, we see functions of spiral learning, which was discussed in our last narrative; additionally the text *Women’s Ways of Knowing* published in 1997 also gives insight to this process. This is a process where ones’ inner voice is synthesized with integrating voices, then returning and constructed into the inner self voice once again. Although this process was initially published as a gender-specific process it appears to have merit here as a group learning function (Belenky, Clinchy, Goldberger, & Tarule, 1997).

This group and individual learning process appears to have several different functions as it pertains to learning, growth, and development; we see support for this process in the narrative of Jerry and other participants. First, there is an element of validation. Jerry came to realize that
he was not unique, alone, or alien to a particular experience. Second, an ability to complete an
effective projective process is secured. Harry, discussed a process that he practices that he called
‘playing the tapes’. This is projective where he would utilize his past experience, and the insight
of others, to foresee the development of a future, and make a decision based on this projection.
Jerry talked about this process is his words “where is it going to take me.” Lastly, there is a
function of beneficent identification. This is a process of listening to the stories of others,
recognizing an individual whose story possesses a desired quality, and then assimilating with that
individual in a mentor-pupil collaboration. In the rooms of AA this occurs through work with
sponsors, but also through the development of friendships or cohort-ships.

Lastly, Jerry discusses the function of learning through consequences, and integrating this
through interaction with the AA discourse. This function has most effectively been fostered
through the work one does with a sponsor in working the 12 steps of the program, but as Jerry
describes, there is also a contingent process of taking this integration and ingesting it within the
self. Jerry identified the precipitating condition “to feel comfortable in my own skin”; his belief
is that he turned to substances as a substitute state of mind due to not feeling a sense of peace and
comfort with regard to who he was. Consistent to turning to ‘an other’, outside of self, to illicit
an illusory experience, and manifestations of failure, insecurity, inadequacy, and resentment

Other participants have drawn reference to different steps of the AA program that they
found to be particularly cathartic to their learning in recovery. In Jerry’s narrative he identified
step four, which is where the individual develops a moral inventory of their behaviors, character
deficits or defects (AA terminology), assumptions, and beliefs, as being particularly meaningful
as part of his learning process. Specific to step four, Jerry provided discussion to the concept and
function of resentment, as a process that is/was counter-intuitive to healing and wellness.

Essentially what step four does is brings the individual into conscious contact with their past and present, and prepares the individual to be absolution, acceptance, and action (A.A. World Services, Inc., 2001). Although this concept of ‘conscious contact’ is not specifically discussed in the adult education literature under that name, it resonates strongly with education literature pertaining to: authenticity (Callero, 1985; Cranton, 2002, 2006; Tisdell, 2008), spirituality (Astin, 2008; Dirkx, 1997, 2002; Palmer, 2004; Scott, 1997; Tisdell, 2008), culture (Hays, 2007; Tisdell, 2008), and contextual-based learning (Mezirow, 1998; Taylor 2008).

Resentment and conscious contact share a bond in that they are both about one’s origins and perceived experiences along the way. Conscious contact would include all the elements of self that tie one into a specific context, whereas resentments would only include the contextual elements of aspects that have not been dealt with effectively, continuing to fester in the self. As learners we come to understand an authenticity where we are perceived and experience our whole selves in the classroom. As adult educators or co-learners we experience this self level of authenticity, compounded by the responsibility of guiding or facilitating the learning process. This is a process of recognizing where we come from, what are our motivations, assumptions, and beliefs with regard to the context, content, and process of learning, and how are we honoring or withhold particular parts of self (culture, whose voice is heard, and the political). The field of adult education, and more specifically, adult educators, stand to benefit from the process of the personal inventory, as designed in step four, to foster greater authenticity at the individual, the level of the learning environment, and in learning as an institution.

For Jerry, like the previous participants, the process of the personal inventory lead to a questioning and self reflection of beliefs as it pertained to socially and contextually defined
morality. Jerry provided us with descriptors or themes as to how he defines the role of morality in his own life today: responsibility, accountability, breaking self-centeredness, humility, questioning motives, tolerance, character, and commitments. Jerry also describes how he maintains wholeness of self by acting consistently from these themes in all of his arenas: family, friendships, work, AA meeting rooms, and the inner self. In conclusion, I would like to develop some discussion on the impact of this way of knowing, as identified by Jerry, linking moral development to the role of AA member, and the role of being a human service provider.

In the rooms of Alcoholics Anonymous Jerry perceives morality to be portrayed in ones relationships with others, the sponsorship relationship, and through the process of telling ones story. With regard to this individual definition of the moral self he finds greatest impact in the artifact of the story, but more importantly, in the development or maturing of the individual story, which several other participants spoke to (David, Ralph, Thomas, Matthew, and Harry). The tenets that Jerry identified as part of this process include: hearing your own story, the power of the story in ‘keeping it green’ (remembering the pain of addiction and early recovery), resurfacing memories, and telling ones story from a more humble place (a process of time in the program developed through retelling and refining ones story). This process is consistent with the education and psychology literature on narratives and storytelling. Following the research of Dan McAdams and other notables resilient stories foster a conflict solution through the process of the narrative, and encapsulate through the content of the story several elements including: lessons learned, hope, growth, and a future direction. In AA an oral tradition is in existence providing a template for ones story; this template is a chronological progress of one’s experience, strength, and hope, with the hope piece being the most crucial factor (Bauer, et al, 2008; Boje, 2008; Clark & Rossiter, 2008).
Lastly, Jerry gives us insight into how his learning in recovery has fostered meaning in his work. Two examples were shared in Jerry’s narrative getting at this concept. First, Jerry shared on how he will at times choose to reveal his recovery identity with clients. In conversations with Jerry he has shared with me the tension that is part of his inner negotiation on whether to self-discard this, or other personal attributes. This concept is well written about in the human and social service literature, primarily as it pertains to ethics (Corey & Corey, 2007; Corey, et al, 2011).

The primary issue here is not whether a practitioner self-discloses, but more importantly why a practitioner self-discloses. Essentially, does the practitioner feel a personal need to let their client/patient know this piece about themselves, or does the practitioner feel that the client/patient bears an opportunity to grow based on acquiring this information. This is an ethical and personal negotiation that comes down to empathic healing and practitioner self-care. Self-disclosure becomes maleficent when it takes the emphasis off of the client, and draws attention to the practitioners attributes. Human service providers stand to benefit, and hence so do their clients, when they maintain conscious contact with their disclosures. Over-disclosure, and/or unanimous use of self-disclosure has been identified in addictions research as an indicator of poor professional boundaries, vicarious traumatization, caregiver fatigue, and burnout. To this end, self-disclosure without a virtuous rationale could be viewed as a risk factor for relapse (Corey & Corey, 2007; Dollard, et al, 2003; Raistrick, et al, 2008).

For Jerry, he did not so much identify having had problems with self-disclosure, but he did describe a specific instance where his character as an individual was drawn into conflict with his character, and more so, his actions and behaviors, as a medical professional. In this instance a situation played out that had one of two plausible outcomes: learning and acceptance, or
resentment and anger. Critical reflection of principles, an ability to draw upon past growth, and having human resources (sponsor and friends) for process fortified his ability to move towards a healthy resolution. In Jerry’s narrative he described a situation where he was confronted by his supervisor regarding his chosen dress one day while working as the charge nurse. In this situation the problem was not so much the attire that Jerry chose to wear, but more so that Jerry was in a leadership position, and that the climate of attitudes on the floor stems down from him. Jerry’s supervisor made a comment that cut deeply into his integrity and self-esteem: “Jerry, character is doing the right thing when nobody else is watching.” In this situation Jerry was presented with the opportunity to reflect upon and draw conscious contact with his actions, or to externalize and blame this uncomfortable situation on something else. The latter of these two alternatives was not consistent with Jerry’s living narrative, which is what caused the conflict in the first place, and was also what allowed him to reflect and grow through this situation.

**Thomas**

I have had the privilege of knowing Thomas for just shy of two years. In June of 2009 I relocated to the eastern shore of Delaware and was in the position of re-establishing myself in the rooms of Alcoholics Anonymous. At the time I was attending four or five different meetings, in attempts of finding a particular group that I felt at home with; meetings each have a culture onto themselves and a good fit is very important to me. For example, some meetings have predominantly older or younger populations, some favor early recovery versus longer term recovery, some are more purist in nature restricting discussion to alcoholism, in contrast to the use of mood altering chemicals in general, some are larger or smaller in congregation size, and some have a more informal versus a more intimate environmental cue. My personal preference
has always been the smaller, intimate meeting, with a defined discussion context containing a mixture of early recovery and long-term sobriety.

At one particular meeting, early in my residence on the eastern shore, I had shared with the group that I was experiencing a difficult time finding work, and was beginning to feel increasingly stressed over future financial resources. At the end of that meeting Thomas approached me, introduced himself, and inquired into the type of work I was looking for. Our quid pro quos lead to a realization that we had very similar work histories, with the exception of Thomas having been in the counseling field for much longer than myself. At that point Thomas had made some suggestions to me and we parted ways. Since that initial meeting our paths have crossed numerous times. From the very beginning I was especially cognizant to the easy going, collected, and secure sense that was part of the persona carried by Thomas. I was especially interested in having Thomas participate in this research, much for personal reasons, as aside from some basic professional philosophical differences, our stories and work histories have been quite similar.

In Thomas’s narrative there were a number of themes that held consistent with our previous three participants, yet there were also a number of new insights added. In this discussion I would like to circle back to how Thomas adds to the depth already provided, and then move into some of the tenets not previously discussed. In circling back I am going to return to the learning function of spiraling, and add to that new insights offered. Then I would like to venture into new domains offered by Thomas, particularly, role salience, the function of transformative paramount experiences, and professional dynamics.
In Thomas’s dialogue he discussed a medium of learning, journaling, which he has found to be cathartic to his growth and development, pertaining to recovery, but not fully encompassed by recovery aspects. Thomas commented that he found some of his first journal entries, pertaining to his early recovery, to be particularly notable. Also in Thomas’s dialogue he identified several difficult, yet life changing experiences; for Thomas these included: treatment and early recovery, formal acceptance into the profession of counseling, legal punishments and consequences, professional burnout, and the death of his mother and two brothers. Based on Thomas’s dialogue, and his mediums of learning, I would like to suggest that the function of spiraling was key in fostering authenticity and growth.

In Elizabeth Tisdell’s book *Exploring Spirituality and Culture in Adult and Higher Education* (Tisdell, 2003) she identifies the work of Mary Catherine Bateson pertaining to the learning process of spiraling.

The model that I find most comfortable is a spiral, which suggests both development and return. From above it looks like a circle. From the side it looks like a zigzag. A spiral models both a temporal movement and an internal process of reflection, revisiting experience through new eyes (p. 158)... With each encounter, my understanding spirals back over the same issues and I gain a new level of intimacy (p. 190).

This quotation taken from Bateson’s book *Willing to Learn* (2004) was contextually tied to her own experiences of coming to terms and grieving through the loss. Bateson draws reference to a previously discussed process in this context that is identified as fostering growth. This process of ‘developing or finding a new pair of glasses’ or ‘coming to see the world through a different lens’ was identified in the narratives of earlier participants, and is discussed in one of the stories published in the 4th edition of the Big Book of Alcoholics Anonymous.

The more I drank, the more she wilted (referencing his spouse). Then, one day in A.A., I was told that I had the lenses in my glasses backwards; ‘the courage to change’ in the Serenity Prayer meant not that I should change my marriage, but rather that I should
change myself and learn to accept my spouse as she was. A.A. has given me a new pair of glasses (A.A. World Services, Inc, 2001, p. 419).

This concept of developing a new pair of glasses, as identified by Bateson, is a temporal process. One very well may not be able to identify a specific day where they traded-in their old glasses for a new pair, yet when they come across a new experience, and handle it differently than in the past, a keen awareness ensues. I would also like to suggest that this process of developing a new pair of glasses, as a metaphor, can be a very important aspect of the transformative learning process. Various academics supporting the discourse of transformative learning theory (Baumgartner, 2001; Cranton, 2006; Dirkx 2002; Erickson, 2007; Mezirow, 1997; and Taylor, 2008) all support the function of a disorienting dilemma as precipitating a new temporal state of transformation. I would like to suggest that this process of trading in one’s lenses can be sequential to the disorienting dilemma process. Thomas utilized his journals from years past to ‘reflect back on how it went before’ and then transcend to ‘adding up all of the pieces’. This process led to a temporal state where he was now able to find ‘growth in the mist of horrific events’. This process in essences gets directly at our third question for inquiry, being how the action of critical reflection of assumptions can foster growth in the human service professional.

Thomas, in his dialogue, added insight to other aspects of this research, as identified in the questions of inquiry. In contrast to some of the other participants, Thomas provided depth on how he has learned to take care of himself and the necessity of this self-care for the human service provider. Thomas refers to having had an experience with burnout. Textbooks by Marianne and Gerald Corey have become commonplace foundational reading in bachelor and graduate human service programs across the country, especially within the context of helping relationships and professional ethics. In *Becoming a Helper* (Corey & Corey, 2007) burnout is
described as the by-product of prolonged and mismanaged stress. “It is characterized by feelings of helplessness and hopelessness, and by a negative view of self, and negative attitudes toward work, life, and other people” (p. 362). These authors, and other notables previously reviewed in this dissertation identify human service providers to be especially at risk for fatigue and burnout due to the nature of working with people in need on a constant, repetitive basis. Even the best self-care cannot guarantee immunity from the physical, mental, and emotional exhaustion associated with burnout, but with discipline and consistency the risks can be minimized.

Human service providers with prior experiences in addiction can be especially at risk for burnout due to having past maladaptive coping strategies leading into their respective addictions. Substance abuse and misuse is one of the most common risk factors for burnout (Corey & Corey, 2007), and certainly individuals in recovery are more susceptible to relapse, especially in their first year of recovery, then individuals with no prior substance abuse history (Milam & Ketcham, 1981). Clearly this has not been Thomas’s story, evidenced in that he was celebrating his 27 year anniversary of sobriety the day I interviewed him. Given this amazing accomplishment both on a personal and institution level (the program of A.A. as a whole) it would behoove us to look at Thomas’s practice of self-care. In Thomas’s narrative the following self-care practices were identified: journaling, working with a sponsor, physical activity, learning to ask for help, thinking critically about self-disclosure with clients, meditation and prayer, being willing to accept direction, working the 12 steps, going to meetings, reading the Grapevine, reflecting on the 24 Hour a Day book, finding time for solitude, working with sponsee’s, and connections with nature.

Thomas finds a way to integrate self-care into everyday of his life. At this point I would briefly like to take a look at some of the components practiced by Thomas. We have already
spoken about the power of journaling as a learning and meaning making tool. Beyond this Thomas spoke of the power of ‘seeing my own handwriting’ and the power that came with that knowing that he was reflecting back on a time period of his life through the cognitive lens of who he is today. Journaling for Thomas, particularly looking at his entries from day one of recovery up through two years kept him in conscious contact with just how difficult it was, and how far he has come (Boud, 2001).

Working with a sponsor and being a sponsor puts one in direct contact with an ‘other’. Several participants have identified having a sponsor that is caring and listens as integral to their recovery relationship. Thomas’s experience was no different to this; in describing the sponsor that he worked with the longest Thomas stated “he was the kindest, gentlest person I know… he just had what I wanted.” The second piece is also essential here; working with another person who possesses some quality that you find to be admirable, or that you can connect with. The literature on mentorship also strongly favors this philosophy. The book *Seasons of a Man’s Life* encapsulates this concept and process (Levinson, 1986). Lastly, with regard to sponsorship, there lies a paradox that is inherent to development. As a sponsor, to give advice or make recommendations, and to be ok with one not taking or accepting that advice. As a sponsee, becoming willing to ask for help when help is needed, and to take good advice, when advice is offered. For Thomas, this willingness to ask for help was essential; not necessary because he needed help, but more so in that it represented a philosophical change of mind; it was a transformation from isolation to community.

In discussing the spiritual aspects of his life Thomas shared how he gains and/or regains connectedness with self and his Higher Power. Here again, we see an example of paradox unifying with spirituality, as commonly described by Parker Palmer – finding community in
solitude. Thomas describes the connections he has made and the clarifying experiences he has had in solitude. He describes this solitude as a breaking free from all the noise in the world, and finds tranquility kayaking with dolphins on the bay. This is a temporal space where ones’ lens focuses in on what is happening in that moment, and fades to shades of gray everything else that has the opportunity to bombard ones thoughts. In the adult education literature Nouwen (1976) gets at this concept of solitude; a space where one cherishes all that they are and can be truly comfortable and at peace with oneself. Nouwen describes this as a process of moving from isolation to solitude. The ability to experience solitude with peace and content appears to be an essential capacity as it pertains to healthy self-care, especially given the little time human service professionals have alone.

Lastly, I would like to close discussion on Thomas by looking at an element of human and social services that is often scrutinized and questioned. This element, self-disclosure, appears to be based in role saliency, professional development, theoretical orientation, and practitioner well-being. In Thomas’s dialogue he shared an observational belief of his that self-disclosure is inversely correlated to education. In helping relationships self-disclosure occurs when the individual providing a service (e.g., counselor, clergy, physician) shares information about him or herself to the person receiving the service and/or seeking help (e.g., patient, client, student). Self-disclosure, in and of itself, is not inherently good or inherently bad; the decision to use and the outcome of using self-disclosure is dependent on a number of factors, such as: why the practitioner decided to use it, could the message have been delivered another way, what is the potential harm in the message, does the disclosure take the emphasis off of the client/patient, and/or what does the client/patient stand to benefit from the practitioners disclosure.
Self-disclosure is of particular importance with regard to human service professionals in recovery. It is not common for human service providers to experience alcoholism in the midst of their careers, although this is the experience of all participants in this study. Far more common is for individuals to enter into a human service profession after finding recovery from alcohol, drugs, or related addiction. Given the extent to which we are conditioned to the benefits of personal disclosure in our culture, it is not difficult to comprehend the tendency practitioners may have to over-disclose. Inappropriate or harmful disclosure, can be proliferated by one or more of the following factors: inadequate training in professional ethics, insufficient role separation, unmet social needs outside of the professional relationship, poor boundaries, and insufficient skill sets in dealing with relevant issues. All of these aspects are related to poor self-care, potentially threaten ones recovery, and present increased risk of harm to the clients/patients who one treats.

**Connor**

Connor was the first of two participants that I met through snowballing research methods. I was introduced to Connor through the developing relationship I have had with Ralph. Much like our next participant, Joshua, Ralph thought that his friend Connor would be perfect for the thesis of this study. Connor has been sober for just over 3 years. He came to recovery in his late twenties as part of engagements with the legal system, deteriorating family relationships, exacerbating states of despair, and a progressively deteriorating state of well-being. Although this experience is not unique to the disease of alcoholism, and drug addiction in general, the personal growth that we found in Connor’s story certainly is. Connor had some work experiences in the human services while early in college, although it was not identified in his narrative; after matriculating from college his career followed his degree (mathematics) by entering the banking
and information technology domains of employment. Connor believes that the field of human services has always been at his roots, evidenced by his first major in college, which was social work. Interestingly, Connor has circled back to this passion in his chosen career, with interests of returning to academia for a graduate degree in social work.

Our depth of understanding of the experience of alcoholism, and more specifically, our three areas of inquiry, were informed through Connor’s narrative. Connor’s story got at: the experience of learning in recovery manifested through vital spiritual experiences, what the experience of human service providers in recovery can add to the field of addictions, the three identified elements of addiction (physical allergy, mental obsession, and a spiritual disconnectedness), and how A.A. discourse can be applied to a critical reflection of these three aforementioned components. In studying Connor’s narrative three primary themes spoke to me, namely, learning through willingness, the integration of authenticity and peak experiences through storytelling, and meaning making through spiritual processes.

Willingness as a concept or metaphysical social construction, is discussed extensively the program of Alcoholics Anonymous. It is written about in A.A discourse with such passages as being honest, open, and willing; conceptually it is referenced with a willingness to perceive: a power greater than oneself, a sense of unmanageability, an acceptance of life based on spiritual principles, and most importantly, that there is a solution, with promises tied to this solution (see Appendix D for promises; A.A. World Services, Inc., 2001).

Given the strong connection between A.A philosophies and addiction treatment today this theme of willingness is also evident; according to research by Ringwald (2002) a survey of 450 treatment centers found that 93 percent used the twelve-step philosophy. In treatment clinicians
work with clients to develop a willingness to achieve certain behaviorally measurable
benchmarks in addition to the previous mentioned aspects of willingness, to include but not
limited to: progressive periods of abstinence (30, 60, 90 day terms), daily attendance at meetings
(a common initial goal is 90 meetings in 90 days), to take medication as prescribed, to request
and work with a sponsor, to attend therapy sessions as scheduled, and to complete assigned

This theme of willingness is also not estranged from the field of adult education. Various
and Mary Catherine Bateson (2004) write specifically about this theme of willingness. In my
review of the discourse by these authors I have found consistency between this construct of
willingness, to meaning making through love and cherishment. In hook’s aptly titled book *The
Will to Change: Men, Masculinity, and Love* (2004) she gets at many of the gender dynamics
between men and women, but more specifically writes about the journey that men must take on
their own. The following quotation gets at this idea of willingness, as a conceptual definition, as
it pertains to learning. Others can foster support (women, in the case of this text), but the mental
process of emancipation and freedom through willingness must be consciously made by the
individual.

> Women have believed that we could save the men in our lives by giving them love, that this love
> would serve as the cure for all the wounds inflicted by toxic assaults on their emotional systems,
> by the emotional heart attacks they undergo every day. Women can share in this healing process.
> We can guide, instruct, observe, share information and skills, but we cannot do for boys and men
> what they must do for themselves. Our love helps, but it alone does not save boys or men.
> Ultimately boys and men save themselves when they learn the art of loving (p. 16).

Along with these thoughts informing the nature of willingness I would like to add Bateson’s
ideas on the impact of willingness in our social world, specifically how we look for willingness
in others as a guiding principle of true knowledge. The following quotation taken from her book *Willing to Learn* (2004):

> We are not what we know but what we are willing to learn. Take that another step and it suggests a new way of thinking about authority. I defer to authorities not only on the basis of coercion but because I trust their competence, not just what they already know or the degrees they have but also because I observe that they continue to be willing to learn. It’s a mistake to pin one’s trust or obedience on someone who’s not willing to learn (p. 87).

Combining these conceptual ideas, referencing the individual in their social world, an understanding can be rendered. Essentially, willingness is a concept that cannot be defined as a thing. It is rather ambiguous, culturally defined, and never completed. We can take these ideas of willingness and apply them to the adult learner, in her or his respective environment, whether that be a classroom, an A.A. meeting, or in some self-directed knowledge pursuit. Based on the conceptions from Bateson and hooks we can identify two paradigms of willingness: willingness as a philosophy of being, or willingness in a condition of oppression, limitation, deficit, or duress; the second of these differing in that there is an initial state of being unwilling. In addition to the academics listed above from the field of adult education specifically writing about willingness, we can also extrapolate discourse from other academics where this idea of will as a function of learning may be implicit.

Based on our second paradigm of willingness, where willingness can be discovered, developed, or learned, it may be plausible to believe that there may be interconnectedness between initiatory process of a disorienting dilemma and becoming willing. According to research first published by Mezirow in 1975, where he studied eighty-three women returning to college in various re-entry programs, ten processes of perspective transformation were found; the process of a disorienting dilemma was one of these ten processes. The other processes, which implicitly hold a prerequisite of willingness include: undergoing self-examination (step four –
moral inventory), conducting a critical assessment of internalized assumptions, relating
discontent to the similar experiences of others (a common process individuals partake in when
first coming the rooms – denial functions to compare oneself out of identification), exploring
options for new ways of acting (sponsorship), building competence and self-confidence in new
roles, planning a course of action (step eight – making amends), acquiring knowledge and skills
for a new course of action (working with others, working the steps, reading the literature, etc.),
trying out new roles, and reintegrating into society with a new perspective. These functions, both
technical and practical, have the potential to elicit emancipatory knowledge (Cranton, 2006),
which is implicit to our definition of recovery.

Connor discusses working through a process where he journeyed from feeling ‘hollow’ to
‘knowing’ a ‘connectedness’ to everything around him. His statement “there is nothing in God’s
world that is a mistake” exemplifies this new perspective and belief system where he is included
in this concept of a divinely planned purposefulness, eventually leading to his perceptions of
having a ‘calling’ for the work he is doing today. In conclusion, it is important to mention that
we all have will; it is not the function of having willingness that we are discussing as part of this
learning process. Contrarily, it is the willingness to develop a new perspective. Within the
domain of willingness, on a spectrum moving from hollowness to connectedness, is the gift of
purposefulness. Being purposeful is the realization of having the will to achieve a perspective
transformation, or as discussed by Bateson above, recognizing the willingness in another, and
ascribing to that as an authority in one’s life. Connor, consistent with other participants in this
study, demonstrates this purposeful willingness in his statement where he has been “given a new
set of eyes and ears”.

In drawing connections to practice, these concepts also have merit to the role of the addictions specialist and sponsor. Consistent to research within the transformative learning discourse, the following functions may be indicative of learning disseminated by the co-learner, facilitator, or practitioner. These practices (praxes) may help foster willingness and purposefulness in the sponsee, client, and/or patient: exploring a diversity of perspectives, developing tolerance for ambiguity, recognizing and investigating assumptions, becoming better listeners, recognizing and acknowledging differences, and promoting the belief that everyone creates knowledge. Essentially, breaking down power hierarchies between professional and patient, or sponsor and sponsee, and in turn viewing the relationship as being cathartic to knowledge and meaning creation (Belenky, et al, 1997; Cranton, 2006; Mezirow, 2000).

Additionally, Cranton (2006) discusses inner-work the educator can engage in to foster awareness as a facilitator of learning, which may foster transformative learning in learners. These same awareness provoking practices may be beneficial to the sponsee or human service profession in practice, given the founded consistency between the processes of transformative learning, willingness, and recovery. Some of these developmental practices include: identifying ten words to describe oneself as a practitioner or sponsor; recognizing values in one’s personal world that may inform their practice; exploring ones self-concept as a sponsor or practitioner; critical reflection on what one likes or dislikes about being a sponsor or practitioner (this task may also be beneficial to conduct with a respective sponsor or practitioner); identifying what personal needs or deficits from ones personal world is fulfilled via their professional or sponsorship role; self-reflection on how ones personality is intertwined with their role as a sponsor or practitioner. With our next participant, Joshua, we will discuss the role of willingness as it pertains to authenticity.
The remaining two themes, which are storytelling and spirituality, are intimately interconnected, and will be discussed here. Storytelling is as deeply rooted to the program of Alcoholics Anonymous as the conception of a power greater than oneself, and historically these two functions were immediately chronological. According to A.A. history, Bill Wilson came to understand the essentiality of a higher power through his contacts with Carl Jung, ultimately leading to the development of the second step of the twelve step program. Additionally, Wilson also came to understand the utility of non-denominational faith through his reading of William James’s *Varieties of Religious Experience* (Ringwald, 2002). With this conception Wilson found himself back on common ground, wanting not to drink, yet finding it to be an inevitable reality of his existence.

As the story goes, while away on a business trip in Akron, Ohio, Wilson contacted a nearby church inquiring whether they had knowledge of another alcoholic for him to talk to; this was a facilitative process he was informed about by a friend of his named Ebby (who is historically known as the man who sponsored Bill). Ebby reportedly learned of this process through his involvements with a grassroots Christian men’s gathering named The Oxford Group (originators of steps three through twelve). The following day Bill met with the man, Dr. Bob Smith, who he was referred to by the church. Their meeting is recognized as the first A.A. meeting, although the group did not officially have this name yet. What was truly historical about this meeting was not that they gave each other advice or suggestion as to how or why not to drink (a typical philosophy to professional treatment), in fact, this could not be further from the case. These two men engaged in a communicative process of storytelling where they autobiographically discussed their own stories, and reveled in their shared experiences (Kurtz, 1991).
Almost all of our participants have discussed how their story has changed and developed since they first started participating in the program of Alcoholics Anonymous. As previously discussed, the program, from a philosophical basis has informed one’s story to include discussion of one’s experience, strength, and hope. As a template this is fairly open to individual consideration. Although several of our participants commented on their own story development, David, Ralph, and Jerry specifically commented on this process as being a maturational process.

In addition to the conception of the story as a maturational process, we could also look at the story being a meaning making process involving a relational-identification function to the learning process. This was the case with Connor. In Connor’s narrative he described the role of story in his own meaning making of a higher power. Connor provided the context of his upbringing as it pertained to religion, by stating that his father was atheist and that his father was agnostic. This may have left Connor absent from the initial learning and exposure of God and the divine, which in our culture is primarily the church, synagogue, and/or temple. He described his father’s viewpoints of religion as being like a science. Not having a preconceived conception of religious and/or spiritual foundations is not presumed to leave one disadvantaged in spiritual development in adulthood, yet the meaning making process may be different (Fowler, 1981; Griffin, 2004; Koenig, 2008).

In Connor’s narrative he discussed having a very difficult time grasping the idea of a higher power, which was affecting his ability to identify with the program of A.A. According to the history of A.A Carl Jung assisted Bill Wilson to find a higher power through the insight that Bill does not necessarily need to believe in a social construction of God, but rather that he could find his own meaning for an entity that has a power greater than himself. This elicited a ‘light bulb’ moment for Bill, and freed Bill from the oppressive fearing God that he was introduced to
as a child. For Connor, meaning was able to be established through story, by his sponsor creating a more concrete conceptualization of a power greater than self, evidenced in nature (Cheever, 2004; Kurtz, 1991; Kurtz & Ketcham, 2002).

Through the literature review that developed into this research the works of Christina Baldwin were discussed. Baldwin discussed the process of storytelling and storycatching in her text *Storycatcher: Making Sense of our Lives through the Power and Practice of Story*. Storytelling, being the autobiographical approach to understanding one’s own experience is fostered through reintegrating, relearning, and creating a more comprehensive version of one’s experience. Storycatching, which also integrates this experience, adds the dynamics of applying the attributes of another’s story to create an even more comprehensive way of understanding a lived reality (Baldwin, 2005). Before proceeding I want to briefly discuss some terminology as it is found in the literature. In the adult education and psychological literature I did not find a preponderance of research focusing on ‘story’ or ‘storytelling’ as it pertains to change or transformation; from this viewpoint Parker Palmer (1993, 2004, and 2008), Paul John Eakin (1999), and Mary Catherine Bateson (2004) were my primary sources. There is a much larger body of literature in adult education and psychology focusing in the role of the ‘narrative’ and ‘writing autobiographically’ pertaining to change and transformation (Cranton, 2006; McAdams, 1993, 2001; Mezirow, 2000; Parks, 2000; Polkinghorne, 1988). In the recent text *How God Changes Your Brain: Breakthrough Findings from a Leading Neuroscientist* Andrew Newberg, M.D. (2009) writes about how these three functions (storytelling, storycatching, and narratives) have similar conceptual outcomes with differing depth of understanding, but are associated to very different organic and cognitive processes in the brain.
To wrap up the discussion on Connor I would like to integrate some of his experiences, and experiences of others in this story, in synthesis with current writings in the fields of adult education, psychology, and substance treatment. Essentially, several of the participants in this study have discussed their mental processes and meaning making through story telling. This has been described as a building, associating, integrating, and spiraling process; two participants, Thomas and Joshua shared about their current and prior use of journaling; consistent with Newberg’s findings on meaning making and conceptual outcomes, shared similarity in function (building, associating, integrating, and spiraling). These conceptual functions, when pertaining to the program of Alcoholics Anonymous, have been found to provide for meaning making opportunities within, but not limited to the following themes: the personal definition of a loving higher power, solidifying the disease or allergy concept of alcoholism (illusion of controllability and unmanageability), recognizing selfishness and other personality deficits, and integration of spiritual principles into practice (Ringwald, 2002).

Carl Jung’s words to Bill Wilson set the foundation for his recovery story to unfold:

Here and there, once in a while, alcoholics have had what are called vital spiritual experiences. To me these occurrences are phenomena. They appear to be in the nature of huge emotional displacements and rearrangements. Ideas, emotions, and attitudes which were once the guiding forces of the lives of these men are suddenly cast to one side, and a completely new set of conceptions and motives begin to dominate them (Ringwald, 2002, p. 19).

What this offered Bill Wilson, and what these words and stories of alcoholics in recovery offer to newcomers is a sense of hope. The story and related autobiographical writing offers a playing field for these ‘huge emotional displacements and arrangements’ to take place, integrate, and solidify, a learning environment for the re-formation of meaning making and faith (Parks, 2000). In our current age we have seemed to lose touch with the medium of story and autobiographical writing, consequential to a society in fast-forward. Storytelling was once the primary method of
communicating wisdom. Today the story has transgressed to giving advice, judging, and transferring directives, which isn’t really a story at all. When story is available, such as in films, the observer is robbed of his or her own imagination. In an area of mass storage hard drives we have come to believe that we no longer need to maintain oral traditions, but so much about whom, how, what, and why we are (our complex cultural identities) are lost in the process.

Storytelling has always been at the heart of being human because it serves some of our most basic needs: passing along our traditions, confessing failings, healing wounds, engendering hope, strengthening our sense of community. But in our culture of invasion and evasion, this time-honored practice cannot be taken for granted. It must be supported in special settings and protected with strong ground rules… Instead of telling our vulnerable stories, we seek safety in abstractions, speaking to each other about our opinions, ideas, and beliefs rather than about our lives. Academic culture blesses this practice by insisting that the more abstract our speech, the more likely we are to touch the universal truths that unite us. But what happens is exactly the reverse: as our discourse becomes more abstract, the less connected we feel. There is less sense of community among intellectuals than in the most ‘primitive’ society of storytellers (Palmer, 2004, p. 123)

Children are often time much better at recognizing a story; children as young as two or three will show enchantment to story, in contrast to another oral communication. Story in essence possesses three required qualities: a setting, humans or characters with human-like qualities, and character development that unfolds through an initiating event, attempts, and consequences (good or bad). The original meeting between Bill Wilson and Dr. Bob Smith, in essence, with reference to alcoholism, re-ignited a process of sharing self in the dissemination of knowledge through story (Eakin, 1999; McAdams, 1993, 2001; Polkinghorne, 1988). In the following quotation Ringwald (2002) provides application of what we have been discussing to the program of Alcoholics Anonymous.

Telling one’s story is a central and universal activity in AA, according to an international survey of eight countries. By taking about their lives before groups, members build a new identity and compose an autobiography that interprets the past in a coherent and useful manner. In listening, members get to know and trust one another. Newcomers find hope; veterans are reminded of the dangers of drinking. Members work out current problems and share ideas on solutions for life’s daily struggles… Support group members mythologize their lives. They repeat the important and omit the rest, refining their material to tell a truth beyond the facts… Finding and telling the ‘right’ version of one’s story is a group process. The speaker receives strength from the group,
echoes it back and then receives even more in an expanding circular fashion, in the manner of a
tornado gathering strength from smaller winds and other conditions. These meetings also revive
the ancient habit of oral cultures in regarding spoken words as physical entities. Knowledge can be
the epiphany of power (p. 229).

In the adult education classroom, and as adult learners and educators in general, we stand
to benefit wholeness and becoming more connected selves by taking notice of the revival of
these ancient traditions, and by being cognizant of what has taken place in the rooms of 12 step
programs. There are a variety of rationales as to why adults are seeking learning communities
today; there is a preponderance of evidence supporting that adult learners are returning to the
classroom not just in search of fulfilling skill deficits and improving salaries, although these may
be explicit justifications. Our job as educators could or should be to make space for the implicit,
possibly subconscious initial needs presents in many adult learners, such as feelings of
oppression, disconnectedness, and fear, to the conscious. Based on the findings discussed here,
story and autobiographical writing may be an immense opportunity for such a practice.

Joshua

Joshua and Connor were the only two participants that I met through snowballing
recruitment methods. Joshua was introduced to me by Thomas; after completing my interview
with Thomas he had asked me if I was in need of any additional participants for the study, and I
informed him that I was. Thomas informed me of a friend of his in the program, whom he
kayaked with, that he would speak to, and if interested, would pass along my number to. He had
also added that Joshua would be a tremendous asset to this research based on his understanding
of the spiritual element of the program, which he most certainly was. In looking at the narrative
of Joshua I am going to focus my efforts on our first and third questions for inquiry. Essentially,
I feel that Joshua added great depth to the following aspects: the experience of learning in
recovery, the role that vital spiritual experiences may play in learning, how spiritual experiences
can be transformative, and how working the elements of the A.A. program can promote critical reflection of assumptions for human service professionals.

Joshua did speak to our second question of inquiry, being what the experience of recovery has to add to the field of addiction studies, but this largely fell within aspects discussed by our prior participants. This further provides evidence to the benefit of role congruence; essentially, several participants have commented on working the principles of their recovery program in their professional affairs as being highly beneficial, adding resiliency against burnout and fatigue. This was demonstrated through mediums of self-care and dynamics in professional relationships (Corey & Corey, 2007; Dollard, et al, 2003; Slaymaker & Owens, 2006). Additionally, Joshua shared similar findings within the contexts of moral and ethical development, in stating that he thought his morals had always been there, just that they were over-shadowed by the elements of his addiction. He described the process of moving from guilt and shame to feeling good about himself as being channeled through a decision: ‘I stopped doing things I was ashamed of doing’. This decision was contextually based in a process: ‘AA helped me address the shame that I brought to the party’. Of particular importance to being more authentic with his true self was the process of working with a sponsor on steps four, five, and six, as well as coming to find humor, and being able to laugh at himself (Kurtz & Ketchum, 1994).

In discussing what I feel Joshua adds to this research I would like to break down my critique to three primary areas: the self in a state of transformation; learning guided by a framework of spirituality and authenticity; and practical application of learning. To begin this process I would like to share a story, a metaphorical story that is commonplace to the rooms of Alcoholics Anonymous. There was a man swimming in a lake, struggling greatly due to all the efforts he was putting forth in holding onto a heavy anvil. As he was making his way
downstream he passed a number of individuals parading along the shorelines. The first gathering of men he passed was a small group of psychiatrists standing around fondling their beards and smoking their pipes. One of the psychiatrists yelled out to the man “it’s going to be a long, tedious, painful process, but we’ll find out what is wrong with you.” The man swimming downstream stopped briefly for some psychoanalysis, and then continued on his way, next coming upon a group of people from a treatment center. The individuals from the treatment center were holding up signs offering a ‘relapse prevention plan’ and promising a ‘cure’ for only a couple thousand dollars. The man stopped by, relapsed, and then went on his way back downstream with a now heavier anvil.

The next group of individuals he came to was a group of men and women carrying briefcases and wearing three-piece suits. They told the man they were going to help him by making it against the law for him to swim in this lake (the lake being a metaphor for his addiction) and to give him heavier punishments for trying. The swimmer, now bobbing up and down, continued on his way downstream. Finally, the man desperate for help, and gasping for air, came upon a few people standing outside a cove having a picnic; the people were holding funny signs like ‘first things first’, ‘keep it simple’, and ‘think, think, think’. The man swam towards them; a fellow on shore yelled “dummy, drop the anvil”. The swimmer yelled back “I can’t, it’s been in my family for years”. Then the whole group of them yelled back “yes you can, just drop the rock, and then we can help you”. The man finally made his way to shore where he found a home group of individuals who taught him how to put one foot in front of the other, wrapped him in a blanket, and loved him unconditionally.

This story is a parody on the current political and medical state of affairs, as it pertains to addiction and recovery, but within this story exists a message. I chose this story, as I feel it ties
strongly to themes we have already discussed including: willingness, powerlessness, and acceptance. One’s ability to consider these principles and/or tasks is encapsulated in the context of ‘dropping the rock’. The ‘rock’ is the IT. In the rooms you will often here people refer to IT, and IT is not the chemical addiction. The chemical addiction (alcohol) develops in an effort to treat the IT. In the alcoholic the chemical masks the IT so well, and the illusion of control develops so strongly, that an inseparable affinity combined with a genetic predisposition dominates one’s ability for self-control and determinism (A.A. World Services, Inc, 2004; Kurtz & Ketchum, 1994; Milam & Ketchum, 1981).

So the logical question would be… what is IT? The IT is described in the rooms of Alcoholics Anonymous, and was discussed by Joshua as a mental state or a persona contingent to disappointment, incongruence, and discontent. A state of being that can only be temporarily relieved through the elements that lead us to be more and more disconnected from ourselves, and those around us. The persona of contempt prior to investigation, which is a mental element of self that shuts down one’s ability to fully experience the beauty of humankind. So this story of the man bobbing downstream could also be viewed as a passage of transformation, with some key events or experiences leading to a readiness for the final destination.

Several academics in the field of adult education have written about transformation occurring at various conceptions, or through different lenses: the meta-cognitive, explicit conceptions, focusing on critical reflection of socio-cultural constructs (Mezirow, 2000); the level of the soul, possibly subconsciously, extra-rational, and implicit (Dirkx, 2006; Dirkx, Mezirow, & Cranton, 2006); at the neurobiological level in response to changes in brain function, maturation, or other organic processes at the unconscious level (Taylor, 2001); through a meaning making process encapsulating a dynamic interplay of the critical, feminist, and
intuitional/spiritual domain (Tisdell, 2003); and/or also at the socio-personal level through cognitive-emotional-intuitional processes, with a purpose of moving towards a greater congruency across the roles of self in the world; A process wherein the individual moves towards individuation through immediacy and authenticity (Chickering, et al, 2006; Cranton, 2002, 2006). There is debate in the discourse of transformative learning theory whether this process can occur only via one domain, or across several; it is my intention to demonstrate transformation through a cornucopia of lenses.

Joshua identifies several different moments in his own developmental journey that touch on these different lenses of transformation. At the cognitive level he talks about how the text *Under the Influence* allowed him to make sense of his disease of alcoholism, viewing it as a disease, moving to a place of greater acceptance and understanding. Also, he discussed what he learned through a critical reflection on assumptions gained through experiences with relapse. At the limbic level, he describes the emotional connectedness found with a shared experience. Examples were given of different mediums: AA meetings focused on a particular step, recorded speaker meetings that he could listen to at airports, in his car, or while relaxing at his office, and step work with his sponsor (specifically steps four, five, and six) where he identified his character deficits and made restitution through amends. This was a process of reconnecting with the morals that he learned as a child and forgiving himself by making a covenant to stop doing the things he was ashamed of.

Transformational movements were also evident at the spiritual-intuitive level, where we witnessed the development of a sixth sense of knowing, that was not present before. This was apparent as he was making his own definition of spirituality; a process of going from consuming a way of knowing to constructing knowledge (Belenky, et al, 1997). To this end Joshua came to
understand spirituality, in his own definition, as something that could be neither qualitatively nor quantitatively defined. “It’s not about sitting on a church pew… I don’t have to measure my spirituality”. It was a process that transcended the restrictions of a definition to include: figuring out where he belongs, being at a place of peace with self, having a willingness to self-seek and grow, and finding connectedness through nature, and the beauty of the world. We also saw spiritual transformations taking place within Joshua through the work he did with Father Martin in coming to make meaning of the conceptualization of a higher power. This catharsis took place through one statement where he asked Father Martin how he could prove whether God existed. Joshua was given a glimpse and a sense to trust in faith through the priest’s retort ‘do we have any proof that God doesn’t exist’. This was enough to foster a willingness to perceive (Fowler, 1986, 1981). This was a process that was later fortified by a peak experience, while in a state of desperation, where Joshua conceived the presence of his higher power, in an aura… “everything that supported my understanding that there is a power greater than myself” was verified by the presence of warming glow of love from the Divine.

Lastly, Joshua spoke of the elements of his life, through other peak experiences that have fostered his soul, where the Universe conspired around him. Experiences that included kayaking with dolphins or moments in solitude where the sheer beauty of this place gleamed, where he noticed the tree amongst the forest. “I think all this stuff was available to me… it’s a question as to whether you’re looking for it.” Circling back to a concept we previously discussed I can project that this is where Joshua was given a new pair of glasses. This process of nurturing soul was not only present in solitude; we also witnessed discussion from Joshua where he perceived this in the presence of a connectedness with others. A beautiful example of this was when Joshua returned to the rooms after a four year period of separation, secondary to relapse. Joshua
accounts to what it meant to him, beyond his expectations and assumptions, when he was genuinely and authentically welcomed back to the program.

Thus far in this discussion of Joshua’s narrative we have looked at the journey of the self in a state of transformation; in addition we have looked at learning occurring through a framework of spirituality and authenticity. In concluding our discussion of this narrative I would like to give attention to some of the practical implications inherent in this discussion. To begin this process I would like to review a definition of authenticity, as it is viewed in the adult education discourse.

In Tisdell’s book (2003) about exploring spirituality and culture in the framework of adult education several different narratives are reviewed and deconstructed, extrapolating contextual aspects to learning. In two of the narratives living definitions of the meaning of authenticity are identified: “to know who you are, despite the changing conditions of your life” and “my intention is to walk my convictions, and to be authentic, and to show love, to teach how to do that through my actions and evoking of spirit, of love, of courage, and justice… telling the truth and being as real as I know who to be” (p. 127). Some key terms that really speak authenticity to me, both in the literature, and in my own experiences include: spirit, love, truth, and ‘being real’. Encapsulated within this Tisdell writes how becoming authentic involves an integration or synergy of our ‘polyrhythmic realities’, that may include any number of our culturally defined roles; these roles may include: race, ethnicity, age grouping, occupation, family position (e.g., mother, father, child). Becoming more real, immediate, and unmasked individuals involves a process of recognizing the meanings, purposes, limitations, and responsibilities of our role identities (Hayes, 2007; Huddy, 2001; Marks & MacDermid, 1996; Palmer, 1993, 2004; Tisdell, 2003).
In discussing authenticity it is important to distinguish two separate constructs. First, in the general sense, is the conception of authenticity. Second, is the process or movement, being the growth of an authentic identity. Chickering, Dalton, and Stamm (2006) in their extensive text on spirituality and authenticity provide what I have found to be one of the most concise and succinct definitions of authenticity: “Being authentic means that what you see is what you get. What I believe, what I say, and what I do are consistent (p. 8).” This is what I believe Tisdell is getting at in her writings on a synergy of polyrhythmic realities. As it pertains to transformative learning theory (TLT) Cranton (2006) writes to the purpose of TLT, integrating constructions of authenticity; “Transformative learning, the process of developing more open and better justified habits or mind, frees people from constraints and is a liberating experience. But in the journey there can be times of grief, pain, conflict, and a feeling of loss of the old way of life” (p. 178).

The role of the facilitator of learning (educator), to this end, is very much like the role and responsibility of the sponsor in fostering authenticity. The educator and sponsor are not responsible for the development or outcome of the student or sponsee, but they are responsible to be available and fully present for support, openness, and caring. Cranton writes how authenticity can also be fostered among learners, especially when there is a shared experience (a co-lived reality); this is the basis that A.A. is founded on. Some other elements identified by Cranton (2006) in her text on promoting transformative learning through authenticity and changing how one knows includes: developing a connectedness with others, having the experience of being an integral part of a larger whole, making a contribution (e.g., a voice, action, or decision), and being part of a ‘collective awareness’. As previously discussed, these are all vital elements of the interpersonal dynamics found within A.A. communities. These accounts from the adult education community may offer explanation to the lower recidivism rates of relapse seen in individuals that
are actively committed to not only attend meetings, but rather, to those that become an organic part of the meeting.

Being an organic part of the meeting is not defined by whether one shares at each meeting, just as one’s ability to contribute to the learning experience of the classroom is not defined by the number of times he or she raises their hand. In Joshua, and across our other participants we see examples of organic membership; attributes of organic membership include: being available to sponsor another, asking for help when it is needed, volunteering for service commitments, putting one’s name and number down when a phone list circulates for a newcomer, making coffee, staying after the meeting for fellowship, taking meetings into prisons and other institutions, and holding ones chin up to say ‘I’m an alcoholic’. Authenticity in the rooms is the paradoxical median that lies between the Fellowship of the Spirit and the Spirit of the Fellowship.

Matthew

When I had first started this research I had come to the conclusion that it would be best not to identify myself within the research, and, with the exception of this section, I have not done so other than by name. It is consistent with the guiding principles of heuristic phenomenology for investigators to consider identifying themselves in the research, so long as that process does not distract from the overarching themes of the inquiry (Creswell, 2003; Moustakas, 1990; Patton, 2002; Polkinghorne, 1988). In speaking with academic advisors, colleagues, and members of the A.A community I have come to the conclusion that fear is not a rationale that I would like to rest upon in maintaining my anonymity; fear is what I believe kept me in my addiction for far too long. What I mean by fear is apprehension that others may judge me as being less worthy based
on knowledge of my disease. For me, part of the transformational process is having the
willingness to say ‘I am an alcoholic’ when it matters the most, whether it is to myself, or others.

Meaning is socially constructed; to that end I believe that it is very important to this
research for the nature of the relationship of the participants to the researcher to be mentioned.
Obviously this presented a dilemma when it came time to discuss my own story. To remain
consistent with the 12 Traditions of Alcoholics Anonymous, removing my own anonymity is not
in violation to the program’s philosophy. To do this is an individual’s choice; in meetings some
will choose to break their own anonymity and identify themselves by first and last name. What is
of course a violation of program philosophy is for other persons to disclose another’s identity
outside the walls of the program. In coming to this decision, I reviewed the A.A. Preamble
(Appendix F), and the 12 Traditions of A.A. (Appendix B). To remain consistent with these
documents it is important to mention that the experiences of this researcher are no more valid or
important than any other participant in this study; if fact, all but one other participant has had
more time in recovery, and more experiences being a member of the A.A. program than myself.
In accordance with the 12th Tradition, we are a program of principles, not personalities (A.A.
World Services, 2002).

From here forward I will refer to myself in the third person, in an attempt to take a more
objective approach to looking at my story. In Matthew’s narrative there was an emphasis on the
personal identity of being an alcoholic, the identity of being a human service professional, and
the identity of being an individual in recovery. In this section I would like to take a look at these
identities as they pertain to learning and change. In the chapter *There is a Solution* from the Big
Book of Alcoholics Anonymous (2002) I have chosen a citation that I feel encapsulates the
learning playground. This citation describes how the first 100 members of Alcoholics Anonymous, and many more after that, found sobriety, moving from one mental set to another.

The fact is that most alcoholics, for reasons yet obscure, have lost the power of choice in drink. Our so-called will power becomes practically non-existent. We are unable, at certain times, to bring into our consciousness with sufficient force the memory of the suffering and humiliation of even a week or a month ago. We are without defense against the first drink (p.24). There is a solution. Almost none of us liked the self-searching, the leveling of our pride, the confession of shortcomings which the process requires for its successful consummation. But we saw that it really worked in others, and we had come to believe in the hopelessness and futility of life as we had been living it. When, therefore, we were approached by those in whom the problem had been solved, there was nothing left for us but to pick up the simple kit of spiritual tools laid at our feet (p. 25).

As it pertains to Matthew’s story, learning was identified in the following areas: learning to deny automatic thoughts and initial judgments, accepting self – asking for help – and reaching out for community, learning through spirituality (e.g. synchronizations and God winks), and learning through the process of willingness (discussed more thoroughly earlier in this chapter).

The specific process of moving from one mental set (hopelessness), to a new mental set (willingness), is described to occur through a specific process. This process, How it Works (Appendix D) is read in ritual at the opening or closing of every meeting. Also presented in How it Works are three ideas about where one is at when they come to the program: living with unmanageability, no human power being able to restore one’s sanity, and finding resolution only through seeking a power greater than oneself (A.A. World Services, 2002).

The first aspect of learning identified by Matthew was learning to deny automatic thoughts and initial judgments. Matthew identified how he would make justifications as to why it was either acceptable to continue with his maladaptive behaviors, or to rationalize as to why, given his own professional identity as a human service provider, he could not seek help (Marks & MacDermid, 1996; McNulty, et al, 2007; Ryan, 2007). He also described a rationalization process of not deeming his problem to be significant, comparing himself individuals he came
into contact with through his work. Essentially, thoughts that coincided with a maintenance of addictive behaviors were justified, where thoughts pushing him towards change were abolished through application of defense mechanisms (Sanchez & Lippman, 2008; Simon, 1997; Stets & Burke, 2000). These justifications, rationalizations, and projections are identified in the transformative learning theory as points of view. According to Mezirow (2000) “learning occurs in one of four ways: by elaborating existing frames or reference, by learning new frames of reference, by transforming points of view, or by transforming habits of mind” (p. 19). Consistent with writings by Mezirow, Matthew was able to conceptualize a new point of view through the process of imagination. “Imagination is central to understanding the unknown; it is the way we examine alternative interpretations of our experience by ‘trying on’ another’s point of view” (p. 20). We practice imagination by entering the story of another.

The second element of learning identified by Matthew was accepting self – asking for help – and reaching out for community. More aptly, the process occurs in the reverse direction. Across all of the stories we witnessed a process of living in isolation… to having a need to reach out for community, recognizing that one does not have the necessary skills to remedy this problem on his own. Where does the willingness or readiness to try on another’s point of view or habit of mind come from? In discussing Joshua we gave significant consideration to this process of willingness, what it is, and when it becomes available. Essentially, in order for one to give enough consideration to another way of knowing there generally needs to be a met threshold of limitation to their current belief system (their premises). Once this threshold has been met, and often times exceeded, the expenditure of the mental processes required for change to be deemed by the individual to be beneficial is commenced (Callero, 1985; Cohen, 1997; Howard, 2000).
According to theory pertaining to role identities, this process is facilitated through community membership. One comes to reform or re-identify role identity salience’s based on membership to groups. Individuals will generally abandon ideologies inconsistent with the new group identity or maintain previous ideologies with the consequence of incomplete group identification. This process was also referred to earlier within the transformative realm of imagination, where one is given enough of a glimpse of another more consistent point of view or habit of mind that change is considered, and motivations shifted. This process is evidenced when newcomers enter the rooms of Alcoholics Anonymous. Some of the best advice I was ever given was not to listen for how I am different – for that is what I will find; conversely, we are told to “compare in”, to not seek specifics, but rather to listen for themes and experiences that are shared between the storyteller, the group, and our individual alcoholic life script. This was a process shared by several research participants including: David, Ralph, Connor, and Harry (Kegan, 2000; Mezirow, 2000; Raistrich, et al, 2008).

The third and final theme Matthew described in his story pertaining to learning was synchronizations and God winks. Synchronizations, originally discussed by Carl Jung (1933) are described in the adult education literature pertaining to learning and spiritual experience; God winks are a term, similar to synchronizations, which I have heard within meetings and other recovery communities. Within my review of the adult education literature Tisdell (2003) provided the most extensive discussion on the nature of synchronizations, citing Jung as the originator of the term within the study of spirituality, religion, and psychology. Tisdell describes synchronizations as “uncanny coincidences that happen in many people’s lives at various times” (p. 74). Synchronizations are not particularly designated with any specific religious belief system, nor God in general, but rather refer to a connectedness of things… an order that could
not be mere coincidence. Jung, in his writings, drew reference to the function of the collective unconscious, being a shared innate knowledge possessed by all people (but not necessarily accessed by all people), to allude to the unity of all things.

Matthew described three particular experiences that we may be able to coordinate with synchronizations. The first of these was an experience shared by many of the participants - the experience of hearing your story. It is not uncommon to sit in a meeting and hear pieces of one’s experience that coordinate with your life or recovery story… but that is not what we’re talking about here. Matthew had an opportunity to bear witness to this level of synchronization; while at an A.A. meeting his sponsor told him that the person speaking at the meeting they were attending together was telling his (Matthews’ sponsors’) recover story. Matthew’s sponsor described the experience to be so confirming, knowing more so than ever before that he belonged in this program. Beyond his sponsor’s words, Matthew could feel this authentic synchronization coming out of all parts of his sponsor, like he had just found something out that would change his life, like when a mother is away from her child, but senses that something is not right with her child; when one is in the presence of something great – and can just feel that aura. That’s how it was when Matthew was relating to this experience.

Another experience, similar to this, cited by a few participants, was when you believe as a human service professional, that the person you once were (while in your addiction), has come to your office asking for help (i.e., being confronted by your old self). Matthew described having had this experience; Jerry and Thomas also alluded to having had a similar experience. This coincidence of an experience needs to be treated with both respect and gratitude. The gift of an experience like this is truly being able to see how far one has come, and what working a recovery program has fostered in his life. From a professional standpoint, or even from a
sponsorship/mentorship standpoint, an experience like this also needs to be treated with respect. We must not assume that the similarity we perceive in ourselves and the other equates to having a manifest to tell the person how to handle their situation. We must remember that we are all complex beings and that our ethical position is to advocate, while respecting the self-determination and autonomy of others (Corey, et al, 2011; Corey & Corey, 2007; Culbreth, 1999).

Lastly, I would like to briefly give some discussion to this notion of God winks. On several occasions in the rooms of Alcoholics Anonymous I have heard members draw reference to this term. When asked they describe the God wink as a sensation that their higher power is smiling down upon them; one gentleman described this process to me as ‘all the planets coming into alignment for me’. I feel that this process, based on a divinely orchestrated design, shares similarity with the synchronizations described by Jung and Tisdell. In a broader sense there is a large body of works within adult education, specifically encapsulated within the spiritual lens of transformative learning, also described by Tisdell, Tolliver, Chickering, Parks, and Bateson, under auspices of connectedness.

In conclusion I would like to allude to how the different participants of this study reflected upon this experience in their stories. David shared an experience of bewilderment, stressed and frustrated in traffic, annoyed by the behaviors of others. He described a sense of being given a gift, and he was; he saw a car that had a bumper-sticker with a common A.A. slogan. Upon engaging in discussion with the operator of the other vehicle the driver commented to him “I don’t know what group you are a part of but their sure are a lot you as people have been honking at me all day”. This experience re-centered David, reminding him of what is really important.
John described the experience he was given being able to be present with his brother as he was dying of AIDS; he also discussed the connectedness with nature he sensed while kayaking in the ocean with dolphins. Clarence described the clarity he felt when being in the presence of the Chester River and the longing he held to envisioning an embrace by his mother at a time when neither of these things were possible. Joshua, while in the presence of Father Martin, described a moment in time where he sensed a divine force had lifted his obsession to drink, knowing from that point forward that everything was going to be ok. Matthew, touch by the birth of his son, inherently knew from that moment forward that life could no longer be about self-seeking. Lastly, Harry came to realize that he had another purpose in life; he was inspired by the way another man touched his life and knew that he wanted to spend the rest of his life touching others… “to captivate, educate, and motivate”.

**Henry**

I first met Henry in the classroom environment. To date I have had the opportunity to have an educator-learner relationship with Henry over the course of two semesters. Henry glows; he has a vibrancy to his person that speaks ‘what you see is what you get’. From a standpoint of salience, I can in good conscience approximate his recovery identity to be right up near the top. I can say this as I became aware that he was in recovery the very first time I met him through student introductions. Henry gives off no shame; he will share experiences in which he had felt guilty, but will admit having no room in his life today for dwelling in such a mental state; he will share his experience, strength, hope, and struggles with anyone in which he perceives applicability. Henry has a thirst for knowledge, and is dedicated to developing a better understanding of who he is, and how he can better serve the recovery community, and humanity.
in general. As an educator I must admire his authenticity, and cherish that I have been given an opportunity to gain insight into the program that he lives.

Like two of our other participants, namely Matthew and Thomas, incarceration is a piece, and quite an important piece of Henry’s recovery story. Clearly, jail is not a part of everyone’s journey through alcoholism, but it is an environment in which a number of individuals get introduced to Alcoholics Anonymous. The other primary pathway in which individuals become introduced to A.A. is that of substance abuse, or general mental health treatment; I will discuss this connection between mental health treatment and 12-step communities following a review of some of the research on the pathway of incarceration (Bristow-Braitman, 1995; Hettelhack, 1992; Tucker, 2007).

The fewest number of individuals today, in contrast to what was once the primary pathway, are introduced to recovery directly through the doors of Alcoholics Anonymous. Ringwald (2002) in his text discussing the spiritual dimensions of the treatment of alcoholism compiled a diverse array of professional research. Specific to the pathway of entry into A.A. via corrections the following conclusions were made, evidencing the state of prisons in the U.S. today:

Drug and alcohol abuse and addiction played a part in the crimes committed by 80 percent of the 1.7 million men and women in U.S. prisons and jails, according to a 1998 study by Columbia University’s national Center on Addiction and Substance Abuse (essentially 1.4 million were high at the time their crimes were committed). The Columbia study also found that alcohol is more closely associated with violent crime than any other drug, including cocaine and heroin; that the top substance abuse crime in America is drunk driving, accounting for 1.4 million arrests in 1995 at a cost of 5.2 billion dollars... the number of inmates needing substance abuse treatment climbed from 688,000 to 840,000, while the number in treatment hovered around 150,000... the study further notes 46 percent of DWI (driving while intoxicated) offenders on probation were in alcohol treatment programs in 1997 and even more – 62 percent – had participated in self-help groups (p. 244-245).
Although national data could not be found on the number of individuals who enter the program of Alcoholics Anonymous via prisons, New York, as part of the Columbia study approximates about 20,000 inmates per year. Data on the number of individuals who continue to participate in 12 step programs after being discharged from prison is insufficient, but speculative data suggests that fewer than 50 percent of these men and women continue in the program for greater than 90 days. It is also important to mention that many probation officers require individuals on probation or parole, whose criminal charge is related to drug or alcohol abuse/addiction, to attend AA or NA meetings one or more times per week. This is an aspect of contention in the rooms as it is a philosophical conflict with the program traditions (see Appendix C: numbers 3, 6, 11, and 12). Interestingly, in a large amount of substance abuse research the milestones of 90 days and 1 year are frequently cited as being projective to prediction of longer-term recovery (greater than 3 years). We can draw approximate consensus from the reviewed studies that between 75-90 percent of all individuals do not maintain sobriety or participation in Alcoholics Anonymous for greater than 90 days. We can also project that this research has lead to recommendations within the program of A.A., as well as from the professional community, for one to attend 90 meetings in their first 90 days of recovery (Boisvert, et al, 2008; Groh, et al, 2005; McKellar, et al, 2007; Raistrick, et al, 2008.

Harry, more so than any other participant, provided a detailed account of the experience of treatment, and 12-step participation while in prison (all participants except for David participated in professional treatment). This may be attributable to Harry having spent more time in prison than any other participant, and having greater recidivism to prison, in contrast to other participants (Matthew and Connor were the only other participants to share a history of incarceration related to substance use). According to recent brochures produced by A.A. World
Services, Inc., based on questionnaires returned from approximately 200 prisons, there are roughly 2300 A.A. groups taking meetings into the prisons; most prisons responded that they had approximately 1 meeting taking place within their walls per week. Harry described participating in more frequent A.A meetings while being incarcerated; some reports also demonstrate that prison guards or other corrections personnel, have run meetings on their premises (A.A. World Services, Inc., 2002).

Harry described having initiated changes in his behaviors and thinking while being incarcerated (i.e. changing point of view according to transformative learning theory); examples of this include the instance where he was given cigarettes by another inmate, turning them down, knowing that this was part of his past behavior (given that possession of cigarettes were contraband). This act is witness to some of the earliest applications of his learning; the function of saying ‘no’ to what would have been an automatic ‘yes’. In the rooms of A.A the automatic ‘yes’s’ of addiction are described to be the insanity of the disease – repeating the same behaviors expecting different results. The second major step, indicative of his early learning in recovery, was the reversal of a meaning making process. Essentially, Harry described coming to a habit of mind where he switched his focus from ‘others’ to ‘self’; in this process he stated that he stopped worrying about what others were thinking while he was incarcerated, and made the decision to de-assimilate. Finally, Harry described a third learning process of identification; in his narrative he cited being able to form a connection with a particular corrections counselor that was facilitating A.A. meetings and chemical dependency treatment. Harry mentioned identifying with a particular charisma this individual had, which Harry has since integrated into his approach to connecting with others in need of help. With this thought I would like to transition into a
collaboration of research on treatment, integrating Harry’s experiences, as well as some of the experiences of other participants.

According to the 1996 Alcoholics Anonymous Membership Survey, referrals from treatment and/or counseling programs accounted for about half of its members coming into the fellowship. Additionally, treatment, not 12-step programs, has been identified as where individuals first hear about the spirituality component to addiction recovery:

This means that most of the millions of Americans treated for substance abuse are encouraged to develop a spiritual life. Most of the more than 11,000 treatment programs in the country introduce their clients to some form of spirituality, usually based on the Twelve-Step program of Alcoholics Anonymous or Narcotics Anonymous, or dozens of similar fellowships… A survey of 450 treatment centers found that 93 percent used the Twelve-Step philosophy. Other studies put it lower, at about 80 percent… Depending on the length and intensity of treatment, addicts may be merely introduced to the workings of AA or NA or the Twelve Steps, or they may be fully immersed in these by the time they graduate (Ringwald, 2002, p. 4-5).

Consistent with other research (Bacharach, et al, 2000; Bristow-Braitman, 1995; McKellar, et al, 2007; Raistrick, et al, 2008; Tucker, 2007) clinical treatment shares conceptual paradigms to theory governing A.A. philosophy. We find congruence of philosophical orientation with such theoretical paradigms including: cognitive-behavioral, systems, existential, and psychodynamic theories across the two curriculums (i.e., A.A. and professional treatment). Additionally, current trends in treatment are so that they are designed to prepare individuals for continuation of care in 12-step communities by introducing, if not mandating the following functions while in treatment: 12-step group attendance, acquiring a temporary sponsor, completing steps 1-3, developing a relapse prevention plan, meditation/prayer, and telling ones story as a rite of passage to graduation.

This process of treatment to entry into 12-step program membership and attendance was consistent across several study participants including: Ralph, Jerry, Thomas, Connor, Joshua, and Matthew. Harry was introduced to both treatment and 12-step programs while incarcerated;
David was the only participant to enter the program of Alcoholics Anonymous directly, through motivations by his family and friends. In Harry’s narrative he provided some description on his first perceptions of treatment while in the prisons (i.e., point of view). ‘I didn’t particularly care for it very much’ stated with a chuckle was Harry’s tone and presentation of this process. Harry described the curriculum as a ‘tear you down, build you up’ process characteristic of systems of authority and power, as seen in prisons, detention centers, and military entry regimens. Despite differences in philosophies of treatment comparing community-based to corrections-based programs, the common attributes found in this study’s participants who found recovery through the doors of treatment included: identification with a mentor/authority figure/sponsor, making meaning of the higher power function, relinquishing the will to how they were living their lives, cognitive development through spiraling back and projecting forward, and, although at different time periods, having vital spiritual experiences.
CHAPTER 6

DISCUSSION AND CONCLUSIONS

The purpose of this study is to explore the role of spirituality and spiritual development in learning and meaning making for HSP’s in recovery; this study will specifically look at the transformative properties of mutual-aid program membership in eliciting this learning and meaning making process. In this first section of chapter six my goal is to provide a summary of the findings within each of the questions of inquiry posed at the beginning of this study. The first question of this research inquired into what the experience of learning in recovery from alcoholism is about for the human service providers that participated in this study; this first question also served to get at how, through a learning process, that a spiritual experience can be transformative. Therefore, this chapter will begin by considering transformative learning and spiritual experience in recovery.

Transformative Learning and Spiritual Experience in Recovery

For the remainder of this exploration I would like to focus on the experiences and actions of the participants, regarding the critical reflection of assumptions across the elements of the 12-step program. Returning to the discourse of transformative learning theory lets briefly glance back at the primary functions of critical reflection, as having an understanding of this is essential to what follows. With this definition I would like to take a breadth approach to draw attention to concepts and functions identified by Harry, endemic to critical reflection and meaning making: the role of the environment – where and who is present; the function and meaning of time in recovery; and the meaning of the recovery story.
Mezirow’s (2003) definition of transformative learning is:

Transformative learning is understood as a uniquely adult form of meta-cognitive reasoning. Reasoning is the process of advancing and assessing reasons, especially those that provide arguments supporting beliefs resulting in decisions to act. Beliefs are justified when they are based on good reason (p. 58). Transformative learning is a process of examining, questioning, validating, and revising our perspectives… learning that transforms problematic frames of reference (p. 59).

Since Jack Mezirow first identified his definition of transformative learning both he and others have expanded on this initial definition; this re-assessment of criteria appears to have been generated out of criticism for the original theoretical framework being too rational, offering only a narrow explanation to the various pathways of learning as a transformative process. Since Mezirow’s initial theory (i.e., cognitive/rational) alternative and/or integrating conceptualizations of the transformative learning process in research have included: the imaginative (Clark, 1997), expressive (Davis-Manigaulte, Yorks, & Kasl), emotion and soul (Dirkx, 2006), neurobiological (Taylor, 2001), and spiritual (Tolliver & Tisdell, 2006). Mezirow, expanding on Habermas’s writings, developed this theory stemming all three realms of learning: the instrumental, communicative, and emancipatory. Three important key terms, previously identified in the literature review of this work will briefly be reviewed; these are the structure frameworks including: frames of reference, habits of mind, and points of view. Understanding these components, and their associations to the above mentioned meaning making components of the participants, is essential to this process (Cranton, 2006; Mezirow, 2000).

Frames of reference are comprised of both habits of mind and points of view. Frames of mind are essentially how we see the world. According to Mezirow (2000) frames of reference can be within or outside our awareness, they shape perception, are cognitive, conative, and affective in nature, developed in a network of assumptions and expectations. Within this definition I would like to draw attention to the word ‘conative’ as it is not part of our everyday
language. For a long time I merely skimmed over this term, not understanding its meaning, but I have come to find its meaning to be essential; it is especially essential with application to recovery. A conative process is one that endeavors a purposeful effort towards change. This term reminds me of another term from the Big Book that I had to look up... ‘trudge’. Trudge, no longer a common term within our lexicon, means to ‘walk with purpose’.

Habits of mind are “broad predispositions that we use to interpret experience” that function consistently with personality (Cranton, 2006, p. 22). This predisposition is described by Cranton as being synonymous with a filter in which one interprets the meaning of experience. Mezirow (2000) identifies several different ‘varieties’ to this meaning process; of the varieties identified by Mezirow I found the following to be exemplified in the stories of our participants: the sociolinguistic (how one’s social world is expressed through language), psychological (self-concept), and the aesthetic (attitudes, values, and judgments). Habits of mind are expressed as points of view. Points of view are “sets of immediate specific expectations, beliefs, feelings, attitudes, and judgments” (Mezirow, 2000, p. 18). The ‘immediate’ and ‘specific’ are essential criteria to understanding this definition. These points of view, as described by Mezirow are tacitly directed, meaning unexpressed or implicit, and shape interpretation; they may operate outside of awareness and play a role in what we see and how we see it; in essence, points of view direct our perceptual fields, interpret consequences to events, and become part of the idealized self-image (Baumgartner, 2001; Erickson, 2007; Mezirow, 2000).

Prior to entering into discussion on how the individual participants related to this meaning making and transformative learning process I would like to make an association to a quote by Mahat Magandi. This quote comes from a book authored by Mike Dooley that has
become very popular in recovery communities, aptly titled *Choose Them Wisely: Thoughts Become Things* (2009):

Your beliefs become your thoughts, your thoughts become your words, your words become your actions, your actions become your habits, your habits become your values, and your values become your destiny (p. 44).

I believe that this quote, and this book, very nicely encapsulates the developmental, acculturated, and political meaning making process which guides our individual constructions of reality; a reality that is encapsulated by beliefs, values, attitudes, judgments, perceptions, and assumptions. This construction gives emphasis to the reality that our thoughts crystallize our destiny, or in terms of transformative learning, our points of view solidify our frames of reference. Although many of the following functions have already been discussed through the last chapter, in accordance with the individual participants, I would like to revisit discussion on meaning making constructions: the role of the environment (and discussion in that environment); the meaning of time in recovery; and the meaning of the recovery story (the power of language/words).

**The Social Context**

The role of the environment, in one fashion or another, was discussed by all research participants. For some participants it was much more explicit, such as Harry, where with others one may need to be an in-group member in order to make sense of it. David discussed the clubhouse that arose in his area – and how he spent time with others that he otherwise wouldn’t have socialized with – how we took on roles that he never had before (i.e., making coffee for others – practicing service); Ralph discussed the environment as a space of opportunity – how he was just talking to a man about choosing a sponsor and then having a synchronization that he was to ask the man he was speaking to. Jerry talked about personalizing his recovery space –
moving the meetings to the homes of friends made in the meetings and creating a recovery community; Thomas was much more purposeful about his selected A.A environment – he commented on how he sought meetings a significant distance from his home due to his profession – he also commented on finding a spiritual environment – kayaking with dolphins – where he could find solitude and tranquility.

Connor described aspects pertinent to many environments related to his recovery – prison, treatment centers, meetings, halfway houses, and his work setting – he also discussed the different identities he held in those environments, and which identities he allowed to have a voice based on the political and sociocultural climate present. Connor and Joshua, who both work in substance treatment, discussed how meetings they attended based on a work duty did not qualify for the meeting frequency they viewed necessary for their personal recovery – they needed to delineate what they got out of meetings when in their work role versus when in their self role (a habit of mind); Joshua discussed how he integrated A.A. philosophies in business dealings with his co-workers essentially permitting a transgression of environments perceiving the benefit of one to the other. Joshua also gave discussion to having to delineate between A.A. philosophy and professional treatment philosophy in his work, recognizing where each had their place. He identified different masks that he would wear (e.g., sponsor, counselor) based on the role he was playing, and how at times there can be an integration of the two roles.

Matthew and Henry discuss similar environments through their story (e.g., jail, meetings, treatment centers, and work), but how they made meaning of those environments, and the questions they present, were different. Matthew stated in his story “I think that I would also add that the rooms of AA certainly changed the way I look at things” (possibly a frame of reference). He gave some examples that exemplify this: being embraced by a community of love, self
interpretation of the difference between ‘I’m an alcoholic’ and ‘I’m alcoholic’ (the latter possibly being a closer association to one’s identity), becoming a better listener – and how that has carried over to the work world, and the recognition of how such different walks of life (individuals) come together with this common bond, setting aside differences to focus on their commonality. Matthew, and others, also talked about the metaphysical environment of the story, drawing connection to the transformative environment of the imagination – the world of the soul – consistent with research by Clark (1997), Clark & Rossiter (2008), and Dirkx (2006). Henry added to this concept of the environment playing a role in meaning making through his recognition of how different meeting environments (e.g., church, prison, town hall) may influence the ‘feel’ and the ‘intimacy’ of a meeting. Lastly, he offers to similarity to Matthew with this idea of the environment of the story – “hearing your own story in another added strength to my own story” (solidifying a point of view or habit of mind); in essence, his conscious contact was fortified through the environment of shared experience.

In discussing meaning making through consistent and alternative environments we also got at the purpose of the meeting and the meaning of the story. Before we end with some discussion on how this relates to the constructs of transformative learning theory, I would like to draw attention to the shared theme of ‘time’. In the program we have sayings like ‘time takes time’ and ‘one day at a time’. I heard a fellow in a meeting once say ‘I’ve been sober 30 years, one day at a time’. Jerry talked about a power, privilege, equity, and/or a ‘cultural capital’ being granted to individuals who have accumulated time in consistent sobriety. There is evidence demonstrating a significant decline in relapse rates as individuals achieve advancing time (years) in recovery, but much of this research is focused on early recovery (a year or less). I have certainly heard stories of individuals relapsing after being sober for 10-15- even 20 years, but
these events are quite rare. In the Big Book there is a story of a man who gave up the drink for his work and family, having perceived some initial consequences; upon retirement he returned to drinking and was dead inside of 2 years (emphasizing the progressivity of alcoholism).

**The Temporal Space**

There are a few themes that I have come across within this research and within my experiences in the rooms that are pertinent to ‘time’. First, the idea of accumulating a quantity of time of consistent recovery that one may not have ‘time’ in their life to re-achieve. Time in recovery is an identity, an identity as strong as whether one is an alcoholic, addict, or both. Time fortifies recovery because a loss of ‘time’ may equate to the death of an identity. The lived identities in the room are different based on self or group definition of ‘newcomer’ versus ‘old-timer’ status; neither the stories in this thesis, nor my personal experience, identified a definition for the middle of the road ‘time’ identity. Second, time can be viewed synonymously with ‘wisdom’. Persons in the room will frequently include how long they have been sober in their stories, just as the participants in this study implicitly, or explicitly drew reference to their recovery time. In the rooms chronological age is not found to be synonymous with wisdom, as may be the case in some larger societies – societies that have functioned by oral tradition, but rather by time in recovery (and how that time has been used – meeting frequency, sponsoring others, working with a sponsor, providing service, the development of their story to represent changing values, beliefs, and principles consistent with spiritual growth).

Third, time offers a playing field for personal growth. As indicated in our questions guiding this research, alcoholism is viewed as a physical allergy, mental obsession, and spiritual malady; this three-tiered structure of the disease has a temporal linearity to it. The physical
allergy, or one's actual dependence on the substance, is the first of the three disease elements to find remedy, temporally followed by the elements of the mental obsession, and spiritual malady. There is no defined time period for this process; this is a process of ‘practice, not perfection’, which is ongoing across one’s lifespan of development. The process of transformative learning can be understood to much the same degree. Transformative learning is not a process that one finishes, completes, or graduates from, but rather a medium or scheme that one goes through or moves towards, much like Maslow’s ideas about self-actualization or Carl Jung’s notions of individuation. Additionally, it is important to mention that everyone experiences the temporal aspects of this development differently; there is no right or wrong way to do it; temporal aspects to the process are complemented by: one's prior development, attitudes, beliefs, values, self-concept, judgments, perceptions, and actions.

Throughout this discussion I drew reference to what I felt may have been examples of points of view, habits of mind, or frames of reference. In actuality, these ascriptions need to be identified by the individual. This being said, language can be a powerful indicator to the identity level in which the individual is experiencing learning through transformation. Looking at these three levels we can key into one's expressive language, shared thoughts, observed actions, and described ideological systems (beliefs, values, expectations, motivations) to better understand the qualitative difference between epochal and incremental transformation processes; epochal and incremental processes also being a temporal process. My experience with the participants of this study, and in meeting participation (roughly a thousand meetings in the past 3 years), I have most frequently bared witness to descriptions of incremental transformations, but every now and again there is a story which includes a vital spiritual experience so profound that it can only be described as epochal.
Spiritual Experience and Learning Processes

According to this research the following learning processes were identified by the participants: social learning (e.g., observation, modeling, etc), growth in individuation (i.e., developing a more holistic, comprehensive self-identity), spiraling, practicing mindfulness and willingness, and acceptance. All of these processes were discussed extensively throughout this dissertation, but here I briefly look at them, as they related to personal behaviors.

First, social learning, originally proposed by Bandura (Day, 2008) was manifested through several different behaviors including: listening to one another’s life story, interacting with members in group fellowship, agreeing to participate in service commitments, sponsoring and being sponsored, attending social functions within the A.A. program, and observing others self-care. The singleness of purpose of the program (i.e., to help the alcoholic who still suffers) fosters an available environment to both observe without feeling condemned, and to try-out new behaviors without feeling stigmatized. Clearly, it is not my intention to identify social learning as a spiritual process in and of itself; the process of social learning offers an environment for spiritual experience to unfold. The social learning environment may elicit an opportunity for spiritual disclosure, for one to witness generativity and gratitude in peers, and/or for one to gain knowledge necessary to begin a conceptualization of willingness and acceptance.

The second spiritual process I would like to discuss is the movement towards individuation or self-actualization. Carl Jung (1933) wrote about the process of individuation. Essentially, individuation is an authenticating process in which one’s semi-porous self-identities become more holistic, comprehensive, and adhesive towards a unified self. In relation to this I would like to share a very special moment I shared with Ralph as he was searching for a way to
express how this process had been growing in him. I could sense him, in the moment, going through a cognitive process of searching for the perfect descriptor of this unity. Then, instantaneously, it hit him… “It’s a constancy”. What Ralph meant by this was very spiritual; it is about knowing who you are, and how you want to be known in this world… it’s about a perceived standard of thinking, feeling, and behaving that is reflected against with every perceptive decision. Lastly, as described by the participants, the process of individuation and transformative growth is about moving from isolation to solitude (Nouwen, 1977, 1990).

Isolation is a soul-sickness. Isolation can be evidenced in the active alcoholic, knowing nothing other than how to escape an intolerable reality through brief escapades of alcoholic bliss; it can be lived in the adult who so badly wants to learn and grow, yet finds no redeeming qualities in themselves, and cannot fathom how another could take interest in them; or in the human service provider who has become so consumed by the struggles and traumas of humanity, who no longer can see any purpose in what once gave them vitality and passion.

The transforming self is one who is in the movement from isolation to solitude through intrapersonal and interpersonal communications (Palmer, 2004). This is an actively reflective process of finding peace, stillness, and gratitude within oneself through the self-control of thought and emotion. The spirituality of this process, according to the literature, can be described as knowing, believing, or having faith. I would like to exemplify this process with an anecdote. Karl Marx has been immortalized with his statement ‘religion is the opiate of the masses’. Carl Jung, a contemporary of Marx, was once asked by a panel of students if he believed in God. Jung did not affirm that he believed in God; rather, he responded, ‘I don’t believe… I know’. Solitude is knowing. Clearly these two notable historical figures represent two very different perceptions on religion and spirituality.
The third spiritual process I would like to draw attention to is spiraling (Bateson, 2004; Tisdell, 2003); spiraling is a temporal process of directed or free-floating reflection, projection, and reorientation. Constructs of intuition, experience, awareness, and insight interact in an elegant equation of re-construction and refinement. Personal behaviors within the program, as identified by participants in this study, indicative of this mental process include: step-work, experiencing synchronicities, storytelling and storycatching, creating a personal definition of one’s higher power, and possibly sharing this perception with others through spiritual disclosure (Brelsford, et al, 2009). The first three of these five personal behaviors work to facilitate the fourth and fifth, all within a similar fashion of reacquainting one with prior experiences, adding new experiences of self or others, and/or fostering connectedness through purpose or design (e.g., callings, manifests, destinies, and divine orchestration). In this process meaning is made through dynamics of zigging backward, zagging forward, and reorienting in today. This learning process of spiraling may very well be one conceptualization for the transformative movement of changing ones point of view and/or habit of mind; the reorientation of this process is channeled through critical reflection on assumptions, beliefs, values, motives, and perceptions.

**Addiction Studies and Transformative Learning**

In our second question of inquiry we continued to look at this process of learning. The specificity of this question asked what the experience of human service providers in recovery can provide to the field of addiction studies. In concert with this question, it is also important to inquire how this can be viewed through a lens of transformative learning. I look at this question from two different angles; first, I examine how this research stands to benefit addiction studies with regard to the development and/or well-being of the practitioner; secondly, I suggest, based
on narrative from this study’s participants, on practices that may benefit human service recipients (i.e., clients), based on support from findings in this research.

First, in enhancing one’s professional practice, there are aspects about the program of A.A. which may benefit human service professionals. It is essential, as human service providers, that we continuously confront our role identities and masks (Callero, 1985; Marks & MacDermid, 1996; Stets & Burke, 2000). Several of this study’s participants, particularly study participants that had dedicated employment in substance abuse treatment, found aspects of role identities and social masks to be impairing to their own well-being, and the work that they do. Connor specifically discussed how he was encouraged to use self-disclosure regarding his history of substance abuse with clients, at one of his jobs, while being discouraged at the other. One of the most important aspects with role identities, and masks, is that they have developed for a reason, even if they are potentially unhealthy. Part of the authenticating process involves identifying dysfunctional masks and finding awareness as to be how one can be more consistent to their true self. We need to think critically about why self-disclosure is being utilized, what its purpose is, and what one (practitioner and client) stands to learn through its use (Corey & Corey, 2011).

A second process that can be learned from the 12-step program philosophy and applied to career practice is to find the willingness to be self-directed. Self-directedness has been understood as one of the essential features that deciphers androgogy from pedagogy; more importantly, self-directedness in human services is about self-respect, and recognizing the inherent values of culturally-competent ethical practice (Knowles, Holton, & Swanson, 1998). Self-directed individuals strive toward inner-knowledge on the how’s, when’s, and why’s of the importance of self care; some examples identified within the narratives of participants included:
spending time in quiet reflection, reading, meditation, prayer, journaling, physical exercise, interaction with nature and all its beauty, having healthy boundaries with others, and practicing the values one imparts to others. Having conscious contact with some of the most basic ethical principles governing human/social service work (e.g., beneficence, nonmaleficence, autonomy, and justice), and applying such principles across relationships, including ones relationship with self (Corey & Corey, 2007).

Prior to transgressing into the application of learning in recovery with regards to the population of clients that human service professional’s work with I want to look at some of the transformational aspects of this process. First off, it is essential to comment that transformational learning is a process – but not the only process to learning; we cannot make ourselves, and our clients transform, and we are misguided to try; we need to recognize the purpose and our own motivations behind the work that we are doing (Cranton, 2006). This being said, working with the intimate elements of transformation can be a delicate dance (Sinnot, 2005); carefully handling our own, and our client’s thoughts and emotions regarding beliefs, values, assumptions, and perceptions comes with great responsibility (Myers & Williard, 2003). In conclusion to this particular research question I would like to emphasize some of the strengths that can be applied from the A.A. program to the general work that human service providers do with their clients, as was discussed by our research participants. The applicable strengths are vast; I am going to identify three of them: 1. Honoring the story and recognizing the value of storytelling in meaning making and finding purpose (Baldwin, 2005; Eakin, 1999; Humphreys, 2000; Kurtz & Ketcham, 1994); 2. Promoting exercises that elicit theory of mind (empathy) – theory of mind is essential for critical reflection (Merriam, 2004); 3. Creating communities of shared identity (Vaillant, 1983). Working with these mediums in conjunction with the primary constituents of
transformative learning (points of view, habits of mind, and frames of reference) can be of great value to promoting growth and development through this authenticating process. This also applies to my third research questions, being how actions by human service professions can promote critical reflections of assumptions across various components.

The components that I am referring to here are the identified components of alcoholism: a physical allergy (the alcoholic’s body reacts differently to ethanol), mental obsessions (reveal thought patterns encapsulating one’s points of views and habits of minds), and spiritual disconnectedness. The three strengths of what the A.A. program has to offer with regards to learning identified above relate to all of these components, but most specifically to our component of spiritual disconnectedness (Kurtz & Ketcham, 1994; Kurtz, 1991). Spiritual disconnectedness needs to be self-defined, but according to my experiences in the rooms of Alcoholics Anonymous, and based on the narratives of our participants, several emotive states can be associated to this component; these states include: isolation, shame, guilt, blame, and resentment (A.A. World Services, Inc., 2002). The consequence of these states is a disconnect in praxis (i.e., misguided application; inconsistent behaviors; and dishonor to self and others).

Additionally, these components (i.e., the physical allergy, mental obsession, and spiritual disconnectedness) have different temporal values, and growth in these components does not commence at an equivalent rate throughout recovery (Milam & Ketcham, 1981). Addiction inpatient treatment focuses on and has primary remedies for the physical allergy; inpatient treatment will begin to expose one to the elements of the mental obsession, and will introduce spirituality, and the disconnect, but primarily, inpatient treatment sets the stage for growth in these areas after one leaves. Processes that promote development in the remaining components (i.e., the mental obsession and spiritual disconnectedness) include, according to this study and
previously established research: working a 12-step program, sponsorship/mentorship, journaling, therapeutic counseling, participation in existential shared-identity communities (religious, spiritual-based, and other), prayer, meditation, critical reflection of particular discourse, expressive art, etc. This is a biological, cognitive, emotive, and spiritual process of dilemma, growth, and discovery (Tucker, 2007; Wiklund, 2008; Wink, 2008).

**Implications for Theory, Practice, and Research**

Throughout this dissertation the integration of transformational learning theory has been intertwined into the process of recovery and identity development applicable specific to men in human service occupations, which has implications for theory, practice, and further research.

**Implications for Theory**

Discussion within this dissertation has added application to the already established body of discourse inclusive to transformative learning theory. Inclusive to theoretical contributions I also witnessed association to self-directed (Knowles, et al, 1998) and relational theoretical orientations (Belenky, et al, 1997). Within these theoretical realms specific consideration was given to the function of spirituality as a valid and essential learning component (Chickering, et al, 2006; Palmer, 1993; Tisdell, 2003). It appears evident that no one theory can fully explain this process as individuals possess a wealth of different meaning making processes as part of the scope of learning. Throughout this process I witnessed consistency across the essential re-orienting constructs of addressing values, judgments, perceptions, motivations, expectations, and beliefs, as it pertains to growth at the individual and group level in recovery. This research demonstrates consistency between the essential elements of transformational learning, the role identity of human service providers, and the process of growth through recovery communities.
The element of story, as shared by the participants, spoke to the process of a disorienting dilemma(s), critical reflection of assumptions, and inadequate frames of reference as being consistent with initiating, and developing through the recovery process (Clark, 1997; Davis-Manigaulte, et al, 2006).

**Implications for Practice**

Many of the implications for practice were previously discussed earlier in this chapter in review of our questions for inquiry. Through a review of the research, and of even more importance, through the voices of the men who participated in this study, a dynamic interplay was demonstrated between the discourse of transformative learning, addiction studies, and recovery communities. This is an area of study that has immense importance in the lives of millions of people. The number of people in treatment for substance problems continues to rise with increasing awareness of the disease of alcoholism; in our culture of excess and individualism this process is also promulgated as systems of authority continue to provide more significant legal sanctions for substance-related behaviors. Simultaneously, the number of individuals who participate in 12-step and related communities also continues to rise. This is a trend that we can expect to flourish especially as funding resources for treatment continue to become more restrictive, as we are witnessing in our current time of economic depression (McKellar, 2007; Raistrich, et al, 2008; Roman, 1988).

**Further Reflections and Implications for Further Research**

We have a well established body of knowledge as to what we (i.e., treatment professionals and researchers) believe people with addiction problems need to know about their disease, and the social consequences of their disease (Milam & Ketcham, 1981; Tucker, 2007;
Vaillant, 1983). Despite public awareness in knowledge regarding the consequences of substance addiction, increasing legal sanctions in the criminalization of abuse, and improvements in the availability of treatment, the numbers of addicted individuals in our society continues to grow (Moos, 2006). We need to have a better understanding of how people recover; beyond the explicit how’s, being a summative explanation, we need to better understand the processes of learning so that we may better design treatment curriculums to counteract high recidivism rates for alcohol related crime, and high relapse rates prevalent in our treatment communities.

Alcoholics Anonymous has been the most successful recovery community to date (Groh, et al, 2007), but so many lives are lost due to deficits in identification (misunderstandings in the definition of a higher power). As a mental health clinician the most consistent rationale I receive from clients who cannot find meaning in 12-step programs is an inability to conceptualize or repulsion against a God-concept. Here in lies a finding that has great promise. In this research I purposely and systematically differentiated definitions of ‘spirituality’ and ‘religion’. These terms have caused so much confusion; misunderstanding the meaning of spirituality has left many unable to identify. How do we classify ourselves: Religious, spiritual and religious, spiritual and having faith in a monotheistic God, spiritual and having faith in polytheism, spiritual but not ascribing to a God entity of any sort, spiritual and having a faith of connectedness (e.g., mother nature). The issue here is one of power, control, and hierarchical structuring. Many members of A.A. communities, in my experience, have matriculated through a ‘God fearing’ ideological system (generally from their family of origin); it is not uncommon for individuals raised under this belief system, whom at one point prior to coming to the rooms of A.A. diverge away from spoon-fed doctrine, to experience the ‘here it is again’ phenomenon.
Claims that A.A. is a religion are based on the fact that it has historical roots in the Oxford movement, on the fact that it plays a meaning-providing role for its members, and on the fact that many A.A. members accept the existence of a "Higher Power." While A.A. denies it is a religion in order to realize better its therapeutic goals, its statement that it is "spiritual" but not "religious" is ambiguous. We argue that, as an identity change organization (ITO), A.A. encapsulates its members and creates an atmosphere in which members are likely to experience a sense of "institutionalized awe" for the power of the group. A.A. is properly classified as a quasi-religion in so far as a tension between sacred and secular is crucial to its functioning (Rudy & Greil, 1988, p. 41).

By mere appearances it is reasonable that A.A could be identified as a religion, quasi-religion, or cult. The program of A.A. has some common cultural elements consistent with these culturally-defined groupings, such as: ceremony, rituals, offering, a discourse/oral tradition, and a leader (A.A 12-Traditions state that all members are equal in power). One of the strongest arguments that A.A. is religion-like is in its roots; ten of the 12-Steps of the program came from the Christian grass-roots program The Oxford Group. Despite the program philosophically identifying itself as spiritual, the word “God” or “God of my understanding” is frequently used in ones sharing or story. The sociolinguistic perceptions that may be created through language and appearances could send mixed messages. These messages may just be enough to close ‘welcoming’ doors to some newcomers. If we are going to call this program spiritual, it’s important that we consider the meaning of a higher power that is devoid of supremacy, versus one that is grander, and more comprehensive than the self, but without mention of a power hierarchy. In the rooms people commonly genderize their higher power, and not surprisingly the gender of ‘He’ is consciously or unconsciously attached. Here in lies the paradox… does ‘higher power’ need to mean ‘more powerful’? Does an element being outside of our power synonymously mean that the entity that possesses this power is more powerful? Possibly a different viewpoint of higher power is one that possesses the power to reprieve ones illness, but
also not one that leads the self to feel inferior and condemned to the ‘fear-based’ inferiority of one’s past.

Clearly this is a philosophical argument, but it warrants consideration for how the program is experienced by newcomers at the door. Specifically, given the rationale of perceptions I have previously given, further research is needed in the following theses: a. How can AA, as an organization, be better prepared to meet newcomers at the door who possess a spectrum of spiritual belief salience; b. For individuals who do not return to mutual-aid programs after an initial experience, or a few experiences, what is the group conscience or cognitive set that encapsulated that decision, for this population; c. How can the program of AA maintain homage to its foundation and roots, while being more consumable to the current historical climate of spiritual and religious belief systems; d. What can learning theory and addiction science offer to the curriculum of sponsor preparation to better meet the needs and reception of the newcomer; e. How do human service professionals mentally prepare clients/patients who will be attending mutual-aid meetings… is there a medium/theory/process that we (HSP’s) could utilize to better prepare clients for the mutual aid culture they are about to meet.

Based on my interactions with members at meetings it is not only persons who claim not to have a religion, or a spiritual worldview, who have a difficult time conceptualizing the program of Alcoholics Anonymous. I have encountered instances where one may identify themselves as being ‘very religious’ yet find the 12-Step program to be at odds with their beliefs or chosen doctrine. A group conscious of understanding where the shared common ground of religious/spiritual practice may prove to be more palatable to the masses. This ground could possibly be… where are we heading and what is our purpose? This is a common theme that religion holds with spirituality. All of the major religions flourishing today with mass following
share the common insight of a transcendent pathway. Essentially, if you live life by a particular discipline, whatever that code may be, you will be given an opportunity to experience particular gifts. Some religions describe these gifts to be experiences in this world and/or lifetime, where others describe blessings that will come to pass with transcendence into the world that follows. Spirituality shares flavor with this mental set. In spiritual ways of knowing particular blessings of ‘peace’ and ‘tranquility’ can be experienced in this world, or another, based on ascribing to a particular disciple of living. Through the stories of our participants there were examples of praxis. Essentially, the participants were utilizing the principles of how one should live their life, according to the discourse of the program and the direction of valued members, in guiding their own actions and thinking. Within the program of Alcoholics Anonymous there are certain promises; promises that we are told will begin to come to pass on or around step ten, dependent on the degree to which effort is put in the previous nine steps.

Our next function is to grow in understanding and effectiveness. This is not an overnight matter. It should continue for our lifetime. Continue to watch for selfishness, dishonesty, resentment, and fear. When these crop up, we ask God at once to remove them. We discuss them with someone immediately and make amends quickly if we have harmed anyone. Then we resolutely turn our thoughts to someone we can help. Love and tolerance of others is our code. And we have ceased fighting anything or anyone – even alcohol. For by this time sanity will have returned. We will seldom be interested in liquor. If tempted, we recoil from it as from a hot flame. We react sanely and normally, and we will find that this has happened automatically. We will see that our new attitude toward liquor has been given us without any thought or effort on our part. It just comes! (A.A. World Services, Inc., 2002, p. 84-85).

If we are to look at how spirituality and/or religion can promote the process of learning in recovery we would be remiss to not include the importance of establishing a framework of what is in our future, from the beginning. In the Big Book it describes to members what is to come for them should they integrate themselves into this way of living (Appendix E). Even more so, as quoted above, we see example alluding to the process, beyond the mere content of the promises.
In our adult education classes we review the course curriculum, generally at our first meeting; in our churches, synagogues, and mosques members are told what blessings may come to them as part of a particular life discipline. Yet far too often in addiction treatment and recovery there are no answers to be given… but the answers are right there in the AA program discourse. It is not uncommon for the promises of the program to be read at meetings, but do people really hear them. People hear step one telling them their lives are ‘unmanageable’ and ‘out of control’… but do they hear what blessings will come to pass, when they desperately need to hear it. I did.

As treatment providers, and more generally, as educators and related human service professions, is it our duty to prepare and explore thinking surrounding this perception. If we have a better understanding of the process of learning it stands to reason that we would be better prepared to meet people at this crossroad. There is a reason we review a course at the beginning of the semester. If we are working with individuals from a spiritual perspective why would we not also give them insight into where they are going? Additionally, isn’t this something that spirituality has to offer us as it pertains to meaning making and learning? This way of thinking alludes to other potential future research:

1. In a quantitative study conducted by Ciarrocchi & Brelsford (2009) it was found that one’s religious or spiritual practices, rather than their own self-identification as religious/spiritual, was most projective of overall positive well-being. Additionally, attendance at religious services was correlated with overall positive well-being and coping; this study focused on a non-clinical population of individuals who utilized substances for coping purposes. Following the direction of this study it would be interesting to research outcomes of religious attendance among members of Alcoholics Anonymous, or among clinical treatment populations. One finding from this research that may hold extraordinary promise pertains to one’s own image
of the God of their understanding. Essentially, the research by Ciarrocchi and Brelsford found that persons who ascribed to a punishing God did not fare as well psychologically. Future research within AA culture may want to look towards how ones conception of God influences their spiritual development in recovery, in contrast to individuals who possess a more exclusively positive image of God. A secondary function of such a study could be to look at differences in well-being among individuals who self-identify as religious versus those following a more generalized practice of spiritual principles to living. Tertiary functions of such a line of study could also be to look at persons in general U.S. population minority culture, who are grossly under-represented in mutual-aid meeting attendance (e.g., women, persons of bi-sexual or same-sex orientation, persons of non-White ethnicity, persons of Moslem religious belief, etc).

2. In a second quantitative study by Brelsford, et al, previously discussed in this dissertation, it was found that “spiritual disclosure is strongly tied to self-reported generativity even after variance is accounted for by intrapersonal measures of religion/spirituality and personality” (Brelsford, Marinelli, Ciarrochi, & Dy-Liacco, 2009, p. 157). Further research in this direction could be to look at the role of spiritual disclosure in the program of Alcoholics Anonymous, how spiritual disclosure is utilized in storytelling and sponsoring, qualitative differences in spiritual disclosure among men and women, qualitative differences in spiritual disclosure at varying lengths of sobriety, and how persons learn spiritual disclosure in 12-Step programming. Secondary study, following initial research by Brelsford, et al, could also be to look at the role of spiritual disclosure in therapeutic relationships (therapist-client), clinical supervision relationships (counselor supervisor-counselor), and relationships where the counselor seeks help (counselor-counselor).
Significance and Limitations to the Study

The contribution that the field of adult education has to addiction studies has been grossly under recognized. From adult learning institutions down to the individual classroom, learning communities have been devastated by the outcomes of addiction. Some may ask if a study such as this belongs in the field of adult education. I cannot conceptualize how it could not have a place in our discourse. Human service professionals are leaving our classrooms with unaddressed addictions; academic curriculums are falling short in providing human service students with the resources they need to confront stressful occupational environments leading to high burnout rates.

Substance misuse, abuse, and dependency are one of the most common early warning signs of poor self-care (Sanchez & Lippman, 2008; Wilkes, 2008). We put so much emphasis on addictions starting in adolescence, yet it is the story of several in this study that their addictions begin in or shortly after the formative years of their college training (this was the story of approximately half of the research participants in this study) (also see Dunn, 2005; Hettelhack, 1992). Educators are under-prepared, fearful, uncomfortable, and/or told not to get involved in behaviors that students present possibly indicating a substance-related problem in a cultural academic climate of good business and political correctness (Corey & Corey, 2011). We are cautious to take action due to fears of being sued, or by direction from our administrations that it is not our place. Adult educators understand learning. Couldn’t we better meet our students at the crossroad if we had a better understanding of the learning involved in addiction and recovery?
This study makes introductory contributions to various aspects connecting transformative learning, spiritual experiences, and recovery communities. Specific to the population of this study, being human service professionals, we found support for the originating thesis of this study - that the helper often times has the hardest time identifying the need to find help for themselves. Through the stories found within this study various means of learning and self-care practices were identified as being part of a wellness life program. Although this study only included men from human service professions, it stands to reason that the self-care techniques and spiritual practices identified could be beneficial to a much broader population. Additionally, this study offered contribution by demonstrating consistency between the process of recovery from alcoholism and transformative learning through spiritual experience. The connections offered with this research will hopefully ignite an exciting future for continued academic exploration in this area.

Clearly this research has some limitations. The limitations of this research are a direct consequence of its strengths. In the pursuit of in-depth, meaning-driven analysis it is essential to narrowly define a participant population. In the case of this research the lives of eight alcoholic men who work in human service related occupations were explored. More specifically, based on previous findings in the research on the qualitative nature of recovery, this researcher selected to only include men who have a sponsor, and who have had a minimum of three years of continuous sobriety. In defining our research population we essentially define our limitations. This does not mean that this study does not applicability to women, or drug addicts, or accountants; just that those populations were not included in the research design. Application will need to be determined on an individual, qualitative basis. Clearly some similarity can be associated to the lives of alcoholics in general, particularly alcoholics who are in recovery.
through participation in the program of Alcoholics Anonymous, which is a rather large international cultural group. The important aspect is to recognize the given limitations of such a study, while cherishing the knowledge that the participants of this study were willing to share with us (Berrios & Lucca, 2006; Creswell, 2003; Patton, 2002; Wiersma, 2000).

In addition to informing the field of adult education with regard to there being a need to explore the consequences of addiction on the overall impact to the institution of higher learning, this research validated current explorations within the field. In my review of the literate there were isolated pieces of research relating transformative learning to growth through medical/mental health life experiences. One example of this is Hill’s (2005) writing on sex workers and HIV/AIDS education. Based on my engagement in this research I certainly feel that transformational learning may have broader applicability to medical related impairments that accompany such a drastic life changing experience in behaviors, meaning, and life thereafter, particularly with impairments where significant social stigmatization is attached.

Most monumentally, I believe this research has applicability to the presence and worth of looking at spirituality as an essential component on how some people will experience adult learning. This research has drawn additional attention to the role of story, creating a sacred space, synchronizations, and spiraling as experiences and/or processes that are part of this experience. Additionally, with regard to what was commented on earlier, all adults are inherently adult learners; the definition of ‘adult learner’ is not restricted to the classroom (Knowles, et al, 1998). It is the experience of many not to differentiate between the construct of God, religion, and spirituality. Many may find the term spirituality to be synonymous with religion, where a case for this has not been substantiated; in fact, writing within spirituality and adult education is much to the contrary (Tisdell, 2003). The Big Book of Alcoholics Anonymous (2002) includes
all of these terms, but predominantly draws reference to spirituality. The moment that precipitated Bill Wilson epiphany was an experience he had with Carl Jung where Jung informed him that he could define his own conception of a higher power (Cheever, 2004). A more holistic and comprehensive viewpoint of spirituality, such as this, may serve not to separate or delineate as is so common in the application of inclusive/exclusive labels and definitions. Specific to the program of A.A., the program may be more far reaching should we come to be able to engage new members in discussion on the nature of God and the meaning of a higher power, before they shut the door.

Additionally, throughout this research themes of relational learning became paramount; this was evident in the men’s stories of their learning within their participation at meetings, and in their fellowship with other alcoholics outside of meetings. Historically within the field of adult education relational learning has had a strong gender focus stemming from the initial work of Belenky, et al, in Women’s Ways of Knowing. Based on the findings in this research it may be noteworthy to explore academic study into the role of relational learning in men within addictions, or more generally within the discourse of adult learning. We may be able to attribute a changing phenomena in how people, rather than a specific gender, make meaning of their learning, due to our formal and informal environments become more diverse on many cultural levels.

Final Reflections

This inquiry has been an amazing process. When I had set out on this journey of academic exploration my expectation was to learn more about how men who are alcoholic have similar and different experiences to my own. The relationships made with the participants of this
study, and the process of developing an intimate connection to the pertinent discourse provided so much more. This process was not just about how the men in this study used critical reflection and made meaning; the closeness I had to the material and people in this study, which was quite difficult at times, also generated critical reflection within myself, in an attempt to conceptualize just what the findings of this study meant to me. This study has strengthened my own recovery, and has helped me to recognize just how much I cherish the blessings of human service work; additionally, this study has given me insight into what being an adult educator means, and what my purpose in the classroom is; a process of spiraling towards a more authentic co-learning presence (Chickering, et al, 2006; Cranton, 2006; Tisdell, 2003; Titchen & Manley, 2006; Tolliver & Tisdell, 2006). Since starting this process I now find myself walking into a classroom, and relating to students in a different way. Several years ago, prior to starting my doctoral studies, I attended an information session led by Elizabeth Tisdell. I keenly remember her saying that not only will the program lead one to read and write more than they had ever had done before, but that the program will change our lives. She was absolutely right, on both counts.

The opportunity I have been given to engage in this process has been truly life changing. Not only has this research made me more cognizant of the blessings I have in my life, but it has opened me up to the broader function of gratitude as an essential life principal (Kurtz & Ketcham, 1994). Consistent with aforementioned research by Gina Brelsford (2009) on spiritual disclosure, participation in this research, and in the program of AA, has connected me with the awesome powers of connecting with others through story. Whether ones story is one of hardship, triumph, gratitude, and/or despair, the function of opening up in empathic communication opens doors to learning and meaning making through a shared space.
In conclusion, I would like to end with my very favorite passage from the Big Book of Alcoholics Anonymous. A discourse that has given me ‘a new pair of glasses.’

We realize we know only a little. God will constantly disclose more to you and to us. Ask Him in your morning meditation what you can do each day for the man who is still sick. The answers will come, if your own house is in order. But obviously you cannot transmit something you haven’t got. See to it that your relationship with Him is right, and great events will come to pass for you and countless others. This is the Great fact for us. Abandon yourself to God as you understand God. Admit your faults to Him and to your fellows. Clear away the wreckage of your past. Give freely of what you find and join us. We shall be with you in the Fellowship of the Spirit, and you will surely meet some of us as you trudge the Road to Happy Destiny. May God bless you and keep you until then (A.A. World Services, Inc., 2002, p. 164).
Works Cited


Appendix A: Semi-Structured Template of Interview Questions

1. In what way do you feel your family of origin influenced your decision to select a human service occupation?

2. How have you experienced learning through your participation in the program of Alcoholics Anonymous?

3. Has the process of finding meaning in experience through storytelling influenced how you work with the public and/or colleagues in your professional life? In what ways?

4. In your own words please describe your experience(s) with sponsorship. Did you have personal experience with sponsorship or mentoring prior to coming to the program of Alcoholics Anonymous?

5. In what ways has your experiences with sponsorship changed?

6. What qualities do you look for in a sponsor?

7. How has your identity as a human service professional influenced your sponsorship of others?

8. Can you comment on the complexities of separating between your responsibilities as a human service professional from your responsibilities as a member of AA, or as a sponsor of another man in recovery?

9. In what ways has the discourse of the program of AA influenced your learning in recovery?

10. How did you come to find AA and what have been some of your paramount or peak experiences in the program?

11. Have you come across any symbols in your recovery that have given you strength and understanding of your spiritual development?

12. In incarceration is part of your story, can you speak to how this was a learning or meaningful experience for you?

13. Do you think your role as a human service professional has ever threatened your recovery?

14. What kind of self-care activities outside of the AA program do you engage in to fortify your recovery efforts and general daily wellness?

15. How have you utilized literature outside of the AA discourse to supplement your learning, and to develop your knowledge base in recovery?

16. If you have ever relapsed, what do you feel you have learned from that experience?
17. So we have several elements to our program… sponsorship, fellowship, step-work, sharing of stories, reading literature, service-work, reaching out to newcomers, etc. Can you pick 1 or 2 of these activities and talk about how they have played a role in your recovery, and what you learned from participating in them.

18. Literature… how did you utilize it in early recovery, and how do you utilize it today?

19. In the AA program we talk about spiritual experiences, spiritual awakenings, God winks, etc. Have you had any of these experiences and if so what did you learn from them?

20. How has learning the history of AA influenced your experiences in AA and your own self development?
Appendix B: Twelve Steps of Alcoholics Anonymous

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. We were entirely ready to have God remove all of 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 whenever 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.

(A.A. World Services, Inc., 2007, p. 5-8)
Appendix C: The 12 Traditions of Alcoholics Anonymous

1. Our common welfare should come first; personal recovery depends upon A.A. unity.

2. For our group purpose these is but one ultimate authority – a loving God as He may express Himself in our group conscience. Our leaders are but trusted servants; they do not govern.

3. The only requirement for A.A. membership is a desire to stop drinking.

4. Each group should be autonomous except in matters affecting other groups or A.A. as a whole.

5. Each group has but one primary purpose – to carry its message to the alcoholic who still suffers.

6. An A.A. group ought never endorse, finance, or lend the A.A. name to any related facility or outside enterprise, lest problems of money, property, and prestige divert us from our primary purpose.

7. Every A.A. group ought to be fully self-supporting, declining outside contributions.

8. Alcoholics Anonymous should remain forever non-professional, but our service centers may employ special workers.

9. A.A. as such, ought never be organized; but we may create service boards or committees directly responsible to those they serve.

10. Alcoholics Anonymous has no opinion on outside issues; hence the A.A. name ought never be drawn into public controversy.

11. Our public relations policy is based on attraction rather than promotion; we need always maintain personal anonymity at the level of press, radio, and films.
12. Anonymity is the spiritual foundation of all our traditions, ever reminding us to place principles before personalities.

(A.A. World Services, Inc., 2007, p. 9-13)
Appendix D: How It Works

Rarely have we seen a person fail who has thoroughly followed our path. Those who do not recover are people who cannot or will not completely give themselves to this simple program, usually men and women who are constitutionally incapable of being honest with themselves. There are such unfortunates. They are not at fault; they seem to have been born that way. They are naturally incapable of grasping and developing a manner of living which demands rigorous honesty. Their chances are less than average. There are those, too, who suffer from grave emotional and mental disorders, but many of them do recover if they have the capacity to be honest. Our stories disclose in a general way what we used to be like, what happened, and what we are like now. If you have decided that you want what we have and are willing to go to any length to get it - then you are ready to take certain steps. At some of these we balked. We thought that we could find an easier, softer way. But we could not. With all earnestness at our command, we beg of you to be fearless and thorough from the very start. Some of us have tried to hold on to our old ideas and the result was nil until we let go absolutely. Remember that we deal with alcohol - cunning, baffling, powerful! Without help it is too much for us. But there is One who has all power - that One is God. May you find him now. Half measures availed us nothing. We stood at the turning point. We asked His protection and care with complete abandon. Many of us exclaimed, "What an order! I can't go through with it." Do not be discouraged. No one among us has been able to maintain anything like perfect adherence to these principles. We are not saints. The point is, that we were willing to grow along spiritual lines. The principles we have set down are guides to progress. We claim spiritual progress rather than spiritual perfection. Our description of the alcoholic, the chapter of the agnostic, and our personal adventures before and after make clear three pertinent ideas:
(a) That we were alcoholic and could not manage our own lives.

(b) That probably no human power could have relieved our alcoholism.

(c) That God could and would if He were sought.

(A.A. World Services, Inc., 2001, p. 58-60)
Appendix E: The Promises of Alcoholics Anonymous

If we are painstaking about this phase of our development, we will be amazed before we are half way through. We are going to know a new freedom and a new happiness. We will not regret the past nor wish to shut the door on it. We will comprehend the word serenity and we will know peace. No matter how far down the scale we have gone, we will see how our experience can benefit others. That feeling of uselessness and self-pity will disappear. We will lose interest in selfish things and gain interest in our fellows. Self-seeking will slip away. Our whole attitude and outlook upon life will change. Fear of people and of economic insecurity will leave us. We will intuitively know how to handle situations which used to baffle us. We will suddenly realize that God is doing for us what we could not do for ourselves.

Are these extravagant promises? We think not. They are being fulfilled among us—sometimes quickly, sometimes slowly. They will always materialize if we work for them.

Appendix F: The Preamble of Alcoholics Anonymous

Alcoholics Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism. The only requirement for membership is a desire to stop drinking. There are no dues or fees for A.A. membership; we are self-supporting through our own contributions. A.A. is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

(A.A. World Services, Inc, 2001, p. 88)
VITA

Matthew William Turley

Prior to his doctoral studies, Matthew earned his Bachelor’s of Science degree in Bio-Behavioral Health from The Pennsylvania State University. Prior to commencing in graduate studies Matthew worked with several community based mental health agencies and hospitals, which fostered his interest in healthy human relationships. In September of 2000 Matthew began graduate studies at The Pennsylvania State University in the field of Counselor Education, and matriculated from this Masters of Education program in August 2002. As part of the externship Matthew participated in as part of his degree program he continued to maintain employment with the Pennsylvania Department of Labor as a Vocational Rehabilitation Counselor for a period of 7 years. While in this program Matthew also gained experience in family counseling, and specifically began cognizant of the impact of the disease of alcoholism on family functioning. In May 2011 Matthew successfully defended his dissertation, in partial requirements for a Doctoral of Education degree from The Pennsylvania State University in the field of Adult Education.

Currently Matthew resides with his wife and children on the Eastern Shore in Delaware. Matthew currently operates clinical mental health practices in Dover and Seaford, Delaware. Matthew currently serves as vice-president on the affiliate program group undergraduate program of Bio-Behavioral Health at The Pennsylvania State University; he also is employed as an adjunct faculty educator in the behavioral science programs at The Delaware Community Technical College and Wilmington University. Matthew’s current and future research interests are focused on adult learning through mentoring, cultural awareness, and spiritual development.