‘That’s the Spiritual Side of Me’: Men’s Autobiographical Accounts of Recovery in Twelve Step Fellowships

Keywords: Twelve Step fellowships, addiction recovery, spirituality, young adult men
Abstract

This study explores young adult men’s lived experience of addiction recovery through their involvement in Twelve Step fellowships’ spirituality. Although there is a large body of research on Twelve Step’s recovery model, few studies have examined young adult men’s psychological and identity transformation in light of its spiritual principles. Ten men participating in Twelve Step fellowships in the UK were recruited and invited to write a topical autobiography of their recovery. Data were analysed using interpretative phenomenological analysis. Participants in early recovery (six months to two years in recovery) provided accounts mostly concerned with maintaining abstinence and incorporating the Twelve Step spiritual principles and practices into their lives. Participants in long-term recovery (five to ten years) portrayed ‘personal growth’ narratives, reflecting on their involvement with the fellowships through their life-course. Values of belonging, authenticity, care and love were identified as significant themes in their narratives and continue to infuse their identities long after initial sobriety establishment. The findings suggest that participants’ spirituality evolves into a loving and caring masculine identity, which is key to their psychological development into mature adulthood. It is suggested that amidst the variety of spiritual recovery experiences (religious, atheist or secular) within the Twelve Step programmes, members share life-enhancing values that support the transcendence of their addiction.
1.0 / Introduction

The present paper is concerned with understanding young adult men’s lived experience of addiction recovery in light of their engagement with Twelve Step fellowships (TSF). It examines participants’ meaning-making process of their recovery based on the values and principles of the Twelve Step recovery programme, by employing an idiographic analysis of qualitative (narrative) data. Studies in the UK have shown that participation in TSF bestows consistent beneficial effects on recovery, particularly for those with severe substance use dependence (Gossop, Stewart and Marsden 2008; Manning et al. 2012). There is a large body of empirical research on the short-term effectiveness of engagement with TSF (e.g. Kelly, Magill and Stout 2009), but few studies have investigated the long-term outcomes of TSF involvement and impact on participants’ quality of life (e.g. Best et al. 2015; Hibbert and Best 2011; Kaskutas, Bond and Avalos 2009; Pagano et al. 2013). Yet, importantly, these studies show that recovery is a dynamic and multifaceted process that changes over the life-course. Early recovery is a stage in which participants’ critical focus is on maintaining abstinence from substance use, whereas long-term recovery is marked by far-reaching life projects including new values and identities that make ‘life in recovery’ more meaningful and satisfying for the individual (Laudet, Savage and Mahmood 2002). Furthermore, research literature acknowledges identity transformation as a key component of successful addiction recovery (Best et al. 2017; Buckingham, Frings and Albery 2013; Chambers et al. 2017). Several studies have reported that engagement with the spiritual values and practices of the TSF accounted significantly for members’ recovery (Kelly 2017; Kelly and Greene 2014; Krentzman, Cranford and Robinson 2013; Weegman and Piwowoz-Hjort 2009; Wilcox, Pearson and Tonigan 2015). The use of religious language in the Twelve Step meetings and literature (e.g., Higher Power, God), however, has been noted as a barrier to participation, particularly for younger members (Kelly, Bergman and Fallah-Sohy 2018). Moreover, much of the research on TSF spirituality has been carried out in the US, whereas research in the UK and Europe is scarce (Vederhus 2017). For instance, in studies conducted in the UK, participants found references to God or a Higher Power disconcerting (Day et al. 2014; Harris et al. 2003).

Alcoholic Anonymous (AA) defines alcoholism as an ‘illness which only a spiritual experience will conquer’ (AAWS [1939] 2001: 44). The Twelve Step recovery spirituality serves as a scheme of values (honesty, gratitude, faith, service, love, and belonging) (Kurtz
and White 2015) and a community where members support each other’s journey towards a transformation of life-style based on sobriety. AA was the first Twelve Step fellowship to be established, formed in 1935 by Bill Wilson and Dr. Bob Smith, two self-described recovering ‘alcoholics’ in Ohio, United States. Further TSF such as Narcotics Anonymous (NA) and Cocaine Anonymous (CA) were inaugurated after the 1950s. The first AA meeting in Great Britain was held in London in 1947 (Wells 2005), whilst the first NA meeting took place in 1980. As listed on their websites (www.aa.org, www.na.org), the fellowships are non-professional, non-for-profit and self-supporting organizations, whose only requirement for membership is a desire to stop drinking and using drugs. William James (1842-1910) and Carl Jung’s (1875-1961) notions of the role of spiritual experiences in facilitating psychological transformations and healing influenced the formation of AA and the Twelve Steps since its beginning (AAWS [1939] 2001. The programme encourages total abstinence from all mood-altering substances. Any use of drug or alcohol is considered a relapse. The fundamental organizing principles are the regular group meetings, the Twelve Steps, and the Twelve Traditions. In larger towns and cities, it may be possible to attend a meeting every day, or sometimes even more than once a day; each meeting may vary between a discussion of the steps, a general topic discussion, or a sharing of personal experiences. Some ‘open meetings’ facilitate the attendance of people who do not identify as having a drink or drug problem, such as professionals and researchers, whilst most are for members only. Its main recovering processes are: admitting that one alone cannot control one’s addiction or compulsion; examining past harms with the help of a sponsor (an experienced AA member); making amends for these errors; learning to live a new life with a new code of behaviour; helping others who suffer from the same addictions or compulsions; and developing the conception of a ‘Higher Power’ that can give strength. Its explanatory framework of alcoholism (and addiction) is that it is an incurable and progressive disease of the body, mind and spirit; the programme of recovery focuses on the spiritual aspect (Swora 2004).

The mutual-aid dynamics of the Twelve Step meetings facilitate shared experiences of recovery where insight and interpersonal learning takes place. TSF’s ideology, when compared to other contemporary self-help practices, confers a distinct way of comprehending and perceiving the world. Gregory Bateson (1971) described the personal epistemological shift in the worldview of a person addicted to alcohol as the fundamental process of facilitating change in his or her rationality; this allows a new understanding of mind, self and relationships. Such an epistemological shift in the self is mediated by grasping such concepts
as ‘powerlessness over alcohol’ and a ‘Higher Power’. Bateson contended that the first three steps impelled three fundamental changes: the first step implies a recognition and acceptance (through an experience of surrender) that one’s previous efforts of self-control have failed; the second step enacts a sense of basic trust or faith that a change in one’s situation is possible, through the creation of a new system of ideals and way of living (with reference to a ‘Higher Power’); the third step brings about a commitment to act accordingly to this new principle. The remaining steps are the development of new habits (i.e. trust, self-reflection, introspection, praying) that counteract the ‘bad habits’ that sustained the worldview of a person with an alcohol addiction. Margaret Swora’s (2004) analysis of the similarities between the language of ritual healing and the language of the Twelve Steps characterises AA’s spirituality as fundamentally social in nature; the language conveys a manner of attending to the world that is sacred, thus situating recovery within a new field of meaning and significance in participants’ life-course. Qualitative studies on narratives of successful recovery in TSF show that participants’ identities are informed by a variety of identity material from their life-course, interwoven with Twelve Step programme spiritual values and practices (Delucia et al. 2015; Flaherty et al. 2014; Weegman and Piwowoz-Hjort 2009).

Thus, the present study examined autobiographical accounts from young adult men participating in TSF at different stages of their recovery. The use of ‘recovery autobiographies’ was considered an engaging way for participants to think about the life events that stood out to them as significant and meaningful, both for their recovery and for their sense of identity in light of their involvement with TSF. This study was part of a research project examining young adult men’s identity transformation in recovery; young adult men have the highest prevalence of substance use dependence in the UK and this has become a pressing concern for the healthcare system (NICE 2012). Previously, the author had conducted studies centred on the participants’ meaning-making process as presented in one-to-one interviews (e.g., Author), but as the research project developed, the author speculated as to what kind of self-narrative the participants would have produced without it being co-created with an interviewer - what would they say about the ‘I’ of their recovery and self-change if given the opportunity to engage in a writing exercise? Allport (1942) defined the autobiography as part of the self-revelatory record, yielding important information about the individual’s mental life. When used as a qualitative research method, the aim of an autobiography is not to achieve ‘truth’ in absolute terms: it is to render an account of the lived cognizance of the self that increases
understanding of the individual’s experience (Denzin 1989). What identity will participants create in light of their spiritual recovery in the TSF? What values and meanings are learnt from AA’s spiritual recovery?

2.0 Method

2.1 Participants

Ten young adult men from the UK who had been participating in TSF (i.e. Narcotics Anonymous, Alcoholic Anonymous and Cocaine Anonymous) as their main recovery programme participated voluntarily. They were recruited through convenience sampling and their ages ranged from 26 to 34 years. Time spent by participants in recovery ranged from six months to ten years. Twelve Step meetings were selected and visited by geographical and time oriented convenience, a five minutes presentation of the study was offered at the beginning of the meeting and flyers were made available for people to make contact after the meeting if they were interested. The participants were given information about the study and signed forms of consent before proceeding. All names and some identifying features of the participants were changed to safeguard their anonymity. The study was granted ethical approval from a university research committee.

[Fig 1] Participants’ ethnic background and length of recovery

2.2 Data Collection and Analysis

The study employed topical autobiographies, which focus on a specific part of a person’s life story (Denzin 1989). After initial contact, information sharing and consent, the participants were instructed with the words: ‘Write an autobiographical account of your recovery’. If guidelines were requested to help them to start their writing, the following prompts were offered: ‘Who am I?’ ‘What does recovery mean to me?’ ‘How did I recover from addiction?’ A time framework of one week and a word limit of between 1000 and 2200 words were suggested. Some asked for more time to finish their statement due to quotidian difficulties (i.e. work schedule, studying). Three participants gave their accounts in handwriting, which were transcribed verbatim. Five autobiographies were received by e-mail
and the remaining two were received by post, already typed. The texts had an average of 1400 words; the shortest had 800 words and the longest had 3000.

Interpretative phenomenological analysis (IPA) was employed on the data. IPA has been developed within experiential-qualitative research in psychology and is particularly suited to idiographic inquiry (Smith, Flowers and Larkin 2009). IPA emphasises detailed examination of the participants’ lived experience and sense-making through an open inductive approach to data collection and analysis. Each individual’s account is examined in great detail as an entity in its own right before a move to more general claims is made; the narrative analysis includes detailed extracts from the participants’ accounts. During the analytical journey, initial notes and interpretations are made upon close reading of the autobiography, which are made into themes. These themes are interrogated, and connections are made between the themes. This results in a table of master themes for each autobiographical account, within which are nested sub-themes with supporting quotes from the participant. This process was repeated for each autobiography, resulting in a table of themes for each of the ten individuals. The second stage of the analysis involves looking for patterns and themes across these tables. Once a clear and coherent pattern of themes is identified, they are nested within super-ordinate themes in a master group table.

3.0 Findings

The analysis produced two major themes for the whole group: Self and Addiction; and Self and Recovery. All participants referred to a transformation of their sense of self and identity as their recovery journey ensued. A summary of these major themes and their pertaining sub-themes is given in Figure 1. The autobiographies followed a time plot that described their self-transformation chronologically, beginning with an afflicted self in addiction, followed by their early days in recovery, and ending with the emergence of newfound ‘spiritual’ masculine self and identity. The author’s editorial elisions are indicated by three dots (…) in the quoted extracts.

[Fig 2.] Summary of the themes and sub-themes emerging from the participants’ accounts.

3.1.0 Self and Addiction
3.1.1 ‘I kind of knew it was all up’: Loss of control and agency

Participants’ autobiographies described their relationship with alcohol and drugs as having originated within their rites of socialisation as young men. Drugs and alcohol provided the means for enhancing their sense of sociability and modulating negative self-feelings. Participants’ stories then portrayed a progression towards a sense of losing control and agency. Sean clearly illustrates this narrative transition:

I kind of knew it was all up. I just didn’t know how to stop. I was too scared to ask for help. But there were also a part of me that just were letting things pass, and thought this is just the way it’s going to be … I felt stuck and trapped … I was doing crime every day, drinking alcohol every day, taking methadone every day, and injecting heroin every day. Every day was just the same … I had such self-centeredness that there were no room for my family or anything else.

Sean asserts his awareness of deterioration setting in whilst experiencing a conflicting state of having not resolved his fear. He describes two selves, struggling against each other, clearly signalling the dilemma or conflict between his strong attachment to drugs and his desire to stop using. He also describes the temporality of addiction as a perpetual now, experienced through continuous repetition. He mentions the concept of self-centeredness, commonly discussed in Twelve Step meetings; it is referred to as the root of alcoholism (AAWS [1939] 2001: 62). The participants employed various strategies to try to halt their drug and alcohol use, describing such attempts as a battle for self-agency. Danny’s recovering journey included unhealthy sexual behaviours, asserting that ‘gaining sexual sobriety was as hard if not harder than getting clean from drink and drugs’; this ‘addiction’ or challenge appeared to riddle him with guilt and shame, creating a great deal of anxiety:

When I was acting out on sexual ‘fixes’ I felt very bad, suicidal sometimes. I felt immense guilt and shame about myself. Even though on the outside my life looked very good (I was running a company) I felt terrible inside because of my inability to stop ‘acting out’ in ways I didn’t feel good about.

Danny accomplished most of the things that would make him socially acceptable, including not drinking or using drugs, and yet was still immensely challenged by other addictive behaviours. He states that he felt inauthentic, accompanied by feelings of personal insufficiency that seem to have compromised his psychological integrity, thus suggesting an ongoing battle within his self. Henry also describes the experience of addiction as an internal battle: ‘these conflicting feelings continued within me, their co-existence becoming ever more painful.’
Participants would then establish a turning point in their narratives (of early recovery), manifesting as a crisis, within their conflictive state. The crisis point arrives after a prolonged internal battle to gain control, as Bill describes here:

I got to a place in life and in my mind where I felt like the loneliest and most unhappiest person in the world.

Bill’s consecutively failed attempts to change his behaviour triggered an existential crisis, as he found himself in a place of great loneliness and discontentment. Feeling such profound pain and being overwhelmed by his isolated existence, he became self-aware and conscious of his own state of being. This is how the ‘turning points’ in participants’ narratives are often recounted: they describe not being able to dismiss their deep emotional turmoil any longer.

Adam narrates here his version of this process and his experience of a similar epiphany:

I got to the point before I came into treatment I put my hands up and asked for help … I was crying that night and I was smoking. I said to God, if I’m gonna carry on living like this then I don’t wanna live anymore ’cause I couldn’t do it to myself. I was torturing myself. I knew that so I said to God that night to take this shit away from me, I can’t live like this anymore I don’t want to …When I came into treatment I was ready to do whatever it took. I had reached a really bad emotional rock bottom and it took a lot for me to start recovering.

Asserting that he had ‘put his hands up’, he describes a final surrender, an admission of defeat. His account implies that something within himself was ready to die that night. He emphasizes the emotional inundation of that intimate moment and his inability to disperse it. The smoking (Adam is probably referring here to smoking crack cocaine) didn’t seem to take away the negative feelings, thus representing for him a necessity for change. Having tried perpetually to maintain the self with further drug consumption, his way of being appeared to wear itself out and lose its meaning. He was then ready for his self-transformation. Hitting a ‘really bad rock bottom’ becomes a sign in his narrative to remind him of the pain that triggered his self-change.

The experience of surrender is defined by AA as a key moment in the recovery journey; it is also a clear marker of a change in self-identity. Such a moment of self-surrender is recreated as a ‘dark night’ in Eric’s account:

That night … I realized that I was more scared to live without alcohol than to die. I had the desire to stop [for] something else but I didn’t know what. I didn’t care about myself, I wanted to stop but couldn’t. After that night, I couldn’t get anything else in me and I somehow got home and I went to work that day … I just thought if I don’t do something about this now I’m gonna be dead.

Eric’s external life was still functioning, but his inner world had collapsed. Dwelling on his own darkness, a moment of clarity brought awareness of his existential condition: an epiphany
of his own inner truth. Although he states not wanting to care for his self, in this encounter with his own dark side, through a moment of enhanced self-awareness, Eric becomes aware of life’s calling. Also making reference to a dark night, Bill retrospectively described his experience of ‘hitting bottom’ as that of ‘being rescued’: ‘nowadays I see this pain that I was in as a gift. As I screamed out for help that night I like to believe that something heard me.’ He frames this moment as being cared for; someone or something out there was looking out for him. This happened in a moment of loneliness and despair, as the self that he had known was no longer there. He endured a very painful experience that resembled a death. He now signifies the dark night as an endowment of life, where pain became an experience of growth, a calling of life itself.

3.2.0 Self and Recovery

3.2.1 Sense of belonging and identification

Participants’ narratives recount the early days of their recovery and the challenges they needed to overcome in order to sustain their abstinence and their motivation to change. The Twelve Step group meetings could provide an initial life-structure, captured in Sean’s statement: ‘I went everyday for about a year because I didn’t know what to do with myself.’ These early days in recovery are thoroughly challenging, as Eric also vividly illustrates:

I’m working on the steps and trying to learn as much as I can ... I’ve just been trying to do what’s suggested, hanging around with fellowship people rather than going for the start of the meeting and leaving at the end ... It’s quite strange ’cause even though I’d only been there a few days I still saw something there, I saw something that I wanted and I thought maybe that could work as opposed to drinking ... it’s the feeling of connection.

He describes being led by the others in his recovery, as he depicts that a sense of belonging to the groups is sustaining his efforts. Eric emphasizes the work he is doing and how he is establishing a new social-relational life within the fellowship. In seeing ‘something there’, Eric covets such a connection with others. The meetings enable a precious new sense of being in company, as he explores his alcohol-free self; he is put at ease and is motivated to continue. Peter had a different take on it, narrating a sense of security and protection amidst his fear:

I feel safe rather than confident that I’m going to be just fine for the rest of my life, one day at a time ... I can’t explain the feeling of being part of such a powerful life-saving fellowship ... it’s where I belong for the people searching to find a new way of life.
He incorporates AA’s slogan ‘one day at a time’ in reference to the programme’s ‘24-hour plan’ by which members are encouraged to concentrate on keeping sober for the current 24 hours (AAWS 2018:17), thus reassuring himself that he will stay focused on the present. He now belongs to a greater good, a community that in his eyes is searching for a new life. As he establishes his interest in social relatedness and belonging, he feels secure from danger: the fellowship offered him the safe environment in which he could self-orientate. His assertion of a lack of confidence, and his clear emphasis on the present also communicate his fears of entering new territory, his fears of what may come.

All of the participants entered into a new social world that required learning, much of which was indeed learning how to relate to others whilst in sobriety. Their first visits to the meetings confronted their assumptions of what recovery should be like and compelled an adaptation of their understanding of the fellowships. Mark’s initial concern was centred on the stigma of ‘being an alcoholic’:

One of the first things I noted about recovery was the vast amount of different types of people that were around me. I really did assume it was for ‘really bad’ drunks … I discovered a very large community of people similar to me. People that had jobs, wore suits, got married and were pretty smart.

Mark saw the similarities between himself and other members, thus acquiring sufficient resolution to keep visiting the meetings and to overcome the negative stigma he had attached to them. Early recovery, one could read thus, requires an appreciation of sufficiently motivational factors: the attractive pull of a wholly new social life being perhaps the most valuable element of the TSF at this stage. Participants’ initial conflictive feelings towards the Twelve Step programme seemed to resolve themselves hand-in-hand with a change in their previous conceptions of other members’ recovery. For instance, Sean described his initial disbelief that people who were not drinking nor using drugs could be in such high spirits:

I went to the meetings and I was sceptical that they were all clean as well. I thought how anyone can be like that. They must be drinking, they can’t be clean. But they were. And everybody was friendly. They made me feel welcomed.

Being accepted by and experiencing a positive reception from the groups compelled him to withhold his initial scepticism. Sean’s initial scepticism was also related to his distrust of people in the meetings talking about God, having had strong negative experiences with religious content in his life.

I was a bit wary and sceptical. They were talking about God and I had issues with God. When I was little my mom used to say to me before I went to sleep ‘good night, God
bless you, I love you’, and then she’s gone drinking till the morning. I didn’t trust God…I could relate to the things they were talking about. They were things that I’ve done. They used and they were no longer doing it. I thought there must be something here. So I went back to the meetings.

A sense of identification motivated him to keep visiting the meetings, to sustain the effort. This shows the power of finding people who speak of and make reference to similar life experiences to his own. The meetings are oriented towards members sharing personal stories of recovery, which are effective in forging identification within the group. Having opened up their personal lives, these companions become a role model of how to be in recovery for the new member. The emotional content of members’ talk was a powerful element of Henry’s identification process: ‘I heard other people who had similar feelings and problems with which I could identify. For the first time I had a sense of hope.’ Henry’s sense of hope illustrates a similar process worked through by other participants: the process of becoming inspired (by others) to continue their ‘journey’ of recovery. It facilitated a more confident openness to the experience of recovery, within a process of establishing a new positive identity. Participants’ accounts also illustrate how, in this period of their changing identity process, the question of ‘Who am I?’ comes boldly to the foreground, thus suggesting that their previous sense of self has become unacceptable to them. Finding a nurturing environment facilitates their motivation to change, as they prepare themselves for the time ahead - a time of growth. The participants’ next scenario is described as their new life, now free from drinking or using drugs, where they predominantly experienced the implementation of a wholly distinct life structure.

3.2.2 I’m becoming my own person: authenticity

The participants describe their self-change as a process of developing greater authenticity and agency, as exemplified by such statements as: ‘doing the things I’ve always wanted to do in life’ (Bill); and ‘I feel like I’m becoming my own person’ (Eric).

Eric asserts that he is now in the process of being true to his self; Bill establishes that agency has emerged in his new selfhood. Peter, however, has spent more time in recovery and is able to elaborate further on his sense of authenticity:

I’m not trying to prove anything to anyone these days ... I don’t see things the way I used to as a result of taking these steps I know the truth about me … I’m open minded enough to know that I don’t have all the answers ... I’m part of my family’s life (mother, sister, brother, gran, aunties, uncle, cousin) and they’re all proud of me.
As with Bill, Peter refers to having gained self-knowledge and positive relationships, with a sense of caring for others. The participants all refer to a sense of progression, moving beyond initial communication thresholds to become more comfortable and secure in expressing their emotionality, as Mark elucidates here:

As I continued to attend meetings I found that I was able to reveal myself on a far deeper level and without fear of reprimand or compromise and this was the first major element of self-change.

As an ease in relational authenticity took root, the participants learnt how to be with others; how to express their truth. They were able to articulate themselves amidst their own fear and open themselves up to a realm of shared emotionality, alluding to parts of their selves that had maybe never previously been disclosed, as stated by Sean: ‘I was quite scared to look at myself that deep.’ His reference to a depth dimension transmits the felt experience of parts of the self that have been buried, hidden, or kept in the dark. Danny also establishes a relationship between authenticity and ontological security:

I feel better about myself, I have less mental suffering, I fear myself less … I feel less inadequacy, I feel less shame and guilt, I feel more positive about myself and life. I feel sustainable.

Authenticity is clearly linked to the development of ontological security; however, for Danny this is lived through his emotions, his emotional way of being and looking at life. He has developed a sense of self-worth from having worked through the pains of growing and learning, thus establishing a basic sense of trust and good faith that makes his existence ‘sustainable’. Sean discloses a similar understanding:

There’s something inside that tells me that it’s alright. My head can sometimes tell me lies, but I know I’ll be alright even if it’s hard and difficult. I’ve done a lot of work with the steps so it gave me a lot of faith and tools to live. I just had to believe and have faith. It took me a long time to separate that from religion.

Sean’s experience of a tough but successful journey further sustains his will to self-change. He affords himself a sense of basic trust and security in his capacity to sustain such a shift in his existential orientation, expressed as his disposition towards faith as a basic constituent of his psychological framework.

### 3.2.3 That’s the spiritual side of me: towards a spiritual masculine self

Both Peter and Alexis illustrate how participants in early recovery can envision themselves in the future; assuming newly appreciated ‘healthy’ masculine adult roles:
I’d like to see myself in a permanent career doing something that I enjoy, with a mortgage, married and some children living happily ever after, remaining a trusted servant in autonomous circles just in case my children or my children’s children need it one day ... Drugs and alcohol are not a problem to me as long as I’m in fit spiritual condition. [Peter]

I guess you could say that what I hope to become is just a good honest person, a good dad (one day), a good husband (one day) and just a good human being. My feelings towards drink and drugs are mixed I guess you could say, I do miss being able to have a drink, drugs not so much. But I know both substances ruin lives and they will definitely ruin mine if I start using them again. [Alexis]

Peter brings NA’s spiritual discourse to the fore with his reference to being in ‘fit spiritual condition’. Given the context, this could allude to simply being contented and thus well adjusted; or indeed equipped with the lucidity to resist the heady pulls of drinking and drug using in society, staying true to his choice of self-change. This contrasts with his previous assertion of being ‘safe’ rather than ‘confident’ (having maintained his recovery for two years). He sees himself as different to ‘an average temperate drinker’ (AAWS [1939] 2001: xxvii), alluding to AA’s metaphorical depiction of alcoholism as an allergy. This works to establish the ‘cause’ of his perceived failed masculinity (based on normative societal roles of husbandry and fatherhood). Alexis seems to be still in the process of convincing himself; the use of ‘I guess you could say’ signals his internal dialogue, as he tries to persuade himself of recovery’s worth, as he keeps up the self-talk. Of all the participants in this study, Alexis has spent the least amount of time in recovery (five months); it seems that he is still at a point of great contemplation, generating self-insight regarding the future (i.e. one day). He is still in the process of aligning himself with his new knowledge and accepting his new feelings: he is still mourning the death of his ‘old self’ and his drug and crime based social scene. He still needs to reassure himself that recovery is truly worthwhile, thus recounting the internal dialogue of his great identity shift.

Mark and Danny describe a balanced and self-cherishing care for others:

I believe in being loving and really understand that when someone asks me to help them, it’s a commitment to pass on my experience with love. [Mark]

I would like to be able to perform my duties in relation to my birth families. To be a good brother. To bury my parents with no regrets ... I would like to learn to be free from fear and to learn to love more. I would like to live in the country (near the sea) and garden more. I would like to cook more ... I very much want to be able to stay free from the forces that would close me down and make me unavailable to my children. [Danny]
Both Danny and Mark conceptualise a new selfhood as being caring and compassionate towards others, expressing a healthy relatedness. They are willing to take on board commitments and responsibilities in their relational roles which suggest their growing psychological maturation: they are becoming loving and caring men. Having achieved some tangible success in their recovery and their building of a secure and satisfying life structure, they are now ready to assume a mentoring role for others, to share their skills and life experiences for the greater good. Danny orients himself as being more connected to nature, embracing a more domestic and peaceful home life. Being a good, nurturing and caring father is an outstanding concern for him at the time of writing his autobiography, as he emphasizes this role more than any other. Both Mark and Danny express a more balanced selfhood as being in greater synchrony with their emotional self. This sense was also transmitted by Sean through an integration of his negative self and the development of a more satisfying self-image:

> There’s always the positive side and negative side to things. I believe I had this negative and unhealthy side, which is my addiction. But I also believe there’s a nice part of me, a loving part of me, a caring part of me, a compassionate part of me, understanding part of me, which is all based in love. That part wants the good for me and other people. That’s the spiritual side of me. I’ve learnt to listen to this side rather than just let myself be overpowered by the negative side. It’s quite hard to define but I know I can feel it.

Sean’s description is very powerful, orienting his narrative with a strong tone of self-affirmation. He conveys a worldview that encompasses two seemingly contrary forces together within his self. He is now able to accept and sustain his negative side (his addiction) without being engulfed by it. This is sustained by his understanding and connection to his ‘spiritual side’, which is based on positive qualities such as love and compassion.

### 3.2.4 The meaning of recovery

An aspect of the meaning of recovery, for participants in the early stages, is based on a story of having been rescued:

> ‘...recovery brought me back to life.’ [Bill]

> ‘I’ve been brought to a better way...’ [Alexis]

> ‘I was a drowning man in a rough sea, the fellowship sailed by and people reached out for me, pulled me on board and showed me how to sail in life.’ [Peter]

They establish recovery as metaphor for life itself, alluding to senses of being ‘found’ and indeed salvation or resurrection from death. Adam describes his recovery using an AA
aphorism: ‘I’m living on life’s own terms’, suggesting a sense of letting go of his own egoical self-importance, accepting that he is part of a bigger picture and allowing himself to flow with life. The participants have been born to a new life through the experience of great change; change in their understanding of themselves and the world around them, change in their manner of relation: both to themselves and to others. They were shown the way, and they are now practiced in taking those vital steps of their own towards a new way of life.

For the participants with further years in recovery, their journey has become a story of personal growth and of positive meaning. The following extract exemplifies how a successful recovery is part of a narrative of self-growth:

Recovery has given me a lot of faith in myself and in the world, and in people.
Even when things are not being on my terms and the way I want them to be, deep down I know that it’s going to work somehow. [Sean]

Having experienced and gained confidence in his ability to achieve what he once considered impossible, and knowing that he has successfully healed himself to a great extent, he now belongs to the world through faith in himself and in others. His most fundamental relationship is with his self, which has blossomed with the emergence of a more positive outlook. Having endured the challenges of recovery, he is confident in his ability to face life’s next trials. Similarly, Danny relates the spiritual dimension of his journey:

It allowed me to begin a dialogue with God (whatever that is), even if I don’t believe in God.

Danny has created his own spirituality based on an openness of the self. His assertion of ‘regaining’ such a lost dimension of the self suggests that he may also have had previously negative experiences of religion. The recovering journey has gifted him with the opportunity to explore his self, his life experience and the possibility of developing a sense of spirituality. Rather than placing some locus of authority outside of themselves, the spiritual dimension of recovery for participants here has come to signify an embrace of life and a newfound courage to be authentic; the young men exhibit knowledge and comprehension of both negative and positive ‘selves’. They are now more mindful of the quality of their interaction with the world and the greater questions of life, and in this manner their recovery becomes synonymous with life itself:

I have been given life … and a meaning and a purpose to my existence. [Jamie]

I love going to the meetings as I really love the sense of unity and hope. I live my life outside of recovery now, and try to integrate more of the ‘real’ world in my life ... I have a huge sense of excitement about life. [Mark]
Jamie’s recovery has been founded on the development of a more meaningful existence. Mark considers AA something very positive and still participates in it, he goes there to care for and support others in recovery and still feels some sense of belonging when there. Mark shows that he has been able to maintain his own recovery without being engulfed by the more limiting and prescribed ‘recovering self’ of his earlier days. Crucially, he has been able to retain authenticity and trust in his own experience and insight.

4.0 Discussion

This study examined how young adult men in the UK reflect on their experience of recovery and identity transformation in light of the spiritual recovery of the Twelve Step programme. Participants in early recovery (Eric, Adam, Bill, Alexis and Peter) suggested a major concern with abstinence and the establishment of their Twelve Step recovery programme. The long-term recovery participants’ accounts were focused on self-change as a sequence of events that facilitated passage towards a mature and spiritual selfhood. Spiritual values of belonging, hope, faith, authenticity, care and love were present in the narratives of the participants’ recoveries.

Early recovery narratives corresponded to a ‘prodigal son returns home’ story, where the fellowship symbolises the welcoming family (Hänninen and Koski-Jännes 1999); participants in long-term recovery (Sean, Mark, Henry, Danny and Jamie) depicted ‘personal growth’ stories, with more individual reflections on their involvement with the fellowships through their life-course. Participants in early recovery clearly depicted an epiphanic moment (e.g. dark night of the soul), triggered by hitting a ‘rock bottom’, which sparked their process of self-change. Denzin (1989) proposed that epiphanies represent interactional moments that leave a mark on people’s lives by altering their fundamental structures of meaning, facilitating a ‘before and after’ narrative framework. The master story of AA and Twelve Step philosophy is aligned to this narrative structure. Participants who have spent more time (five to ten years) in recovery, however, place less emphasis on AA’s master story: the passage of time and developmental experience has accommodated a self-understanding within a larger ‘life-plot’, thereby making their stories appear more individual. An important observation by Hänninen and Koski-Jännes (1999: 1847) is that recovery stories (including TSF groups) reveal great changes in recoverees’ values: ‘articulation of a new guiding value thus seems to be an important part of maintaining such a demanding life change’. Having experienced the realisation of addiction as a breakdown of, or at least a great disruption in
their lives, recovery stories can show the building of new relationships with the self, world and others. Participants described identifying with their associates in the fellowship by finding inspiration from more experienced members; ‘recovering addicts’ could become their new adult role models in light of a new system of meanings and spiritual values. This was significant for some participants who struggled initially with the religious language of the fellowships; the attractive pull of meeting people who have recovered was key in engaging with the programme, particularly in the early days of recovery. Long-term participants who reflected on religious concepts, such as God, seem to have developed an understanding of spirituality that could accommodate these concepts in a meaningful way to them. This also illustrates the variety of spiritual recovery experiences (e.g., religious, secular or atheist) that are present in the TSF (Kurtz and White 2015).

Tatjana Schnell’s (2011) work on the meaning-making function in implicit religiosity from a psychological perspective illustrates how spirituality contributes to meaningfulness particularly through spiritual values such as belonging, significance, direction, and coherence. What makes these values ‘spiritual’ are their life-enhancing qualities, providing meaningfulness in people lives (Elkins et al. 1988; Solomon 2002), which may be critical in any process of healing and psychological transformation. In the present study, TSF values of belonging, authenticity, care and love continue to guide and provide a life-structure, even as participants progress into long-term recovery. These spiritual values seem to have helped them to address key maturational issues in their life-course, including the development of a masculine identity based on love and care towards others, whilst also providing a sense of coherence and direction (Schnell 2009). Sean, Mark and Danny show very vividly that sharing and giving back to others in their various masculine roles (father, son, husband, sponsor) was key to deepening their sense of spirituality, life-meaning, and purpose (e.g. ‘that’s the spiritual side of me’). Studies have shown that while engagement with other TSF members may diminish in long-term recovery, TSF spiritual values still permeate participants’ emotional and relational health development throughout their life-span (Flaherty et al. 2014; Weegman and Piwowoz-Hjort 2009).

One salient value in all of the participants’ autobiographies was the description of a sense of belonging. Belonging is a fundamental human need, dependent on interpersonal relatedness and affective concern, which is made possible through emotional attunement and the development of a shared mutuality (Maslow 1968; Schnell 2009). This increases our understanding of the participants’ new process of identification, being facilitated through a
positive self-feeling (self in the present) and hope for what may come (self in the future). It is worthwhile to align this felt sense of connection and community when in recovery with the definition of addiction as a disease of isolation. Participants found a sense of belonging to a greater social nexus based on recovery principles and the possibility of horizontal transcendence (Schnell and Keenan 2010). Narratives from long-term recovery show a further established self-regulation and self-care, suggesting that recoverees were able to address their needs for intimacy and love once the initial ambivalences of the early days had passed. Care towards others facilitated a broadening of their social world, thereby enabling greater agency and a move towards more self-actualizing possibilities, described by Abraham Maslow (1943: 370) as a desire for self-fulfilment, and ‘to become everything that one is capable of becoming.’ With a foundation of authenticity, based on love and care towards others, participants are compelled to explore their further possibilities, extending the scope of their personal and emotional development.

Authenticity is an important and recurring concept in Twelve Step recovery studies (e.g., Koski-Jännnes 2002; Reith and Dobbie 2012). As the participants are concerned with their recovery, they open themselves up to authenticity as an ‘opportunity for being’, and as stated by Rogers (1961: 164), ‘[this] involves the stretching and becoming more and more of one’s potentialities.’ The potentiality of ‘becoming’ thus assumes a large part of participants’ existential concerns, as they are compelled to address their need for authenticity. In early recovery, this entails a process of stripping down what they have come to believe in as their ‘self’: it is by dismantling their previous ‘addict identity’ that they can become a new self in recovery. This seemed to have still been a great challenge for Alexis, who felt nostalgic for his previous drug-fuelled criminal identity. For the long-term recovery participants, being authentic was about adapting their recovery identity in a satisfying way to the busy midst of their everyday life. Sean and Mark illustrated a process of transcending AA’s master recovery identity: Mark has decided not to identify himself as a ‘recovering alcoholic’, yet he still participates in AA meetings in order to support the recovery of new members; Sean finds agency and strength in his new existential position through a re-interpretation of AA’s notion of powerlessness. Both groups also illustrated how self-actualizing possibilities in their adult, masculine roles are critical to envisioning the person they want to become; this suggests that they perceive authenticity to be a kind of ‘finding their feet’ between possibility and actuality. The long-term recovery participants seem more able to break free from the mundane quotidian circumstances in which they found themselves, to live a more authentic
life, in increased awareness of their potential for becoming. Carl Rogers (1961) described authentic actions as those initiated without concern for the approval or disapproval of others, but instead with concern for ways of living which are satisfying and expressive of one’s individuality. Recovery, as presented by the participants, has become a metaphor for life - a process of reawakening and a resurgence of being. Many of their metaphors had to do with the processes of life: journeys, battles, even death. Participants not only expressed this as personal insight, but also as care for meaningful action. Peter, Mark and Danny gave statements that presented care for others as being affirmative and authentic actions that work in aid of their own recovery, and of their ongoing healthy development as young adult men.

5.0 Conclusion

The aim of this paper was to examine how participants reflect on their experience of recovery in light of their involvement with the spiritual values and practices embedded in the TSF. All participants’ accounts included reference to the Twelve Step programme’s values of belonging, authenticity, care and love as key to their developing sense of self in recovery through their life-course. The findings provided an idiographic analysis of participants’ sense-making in light of TSF spirituality, and foundational aspects of the experience of recovery throughout their life-course were discussed. The study provides a nuanced picture of young adult men’s recovery in Twelve Step programmes by adopting an inductive experiential and qualitative approach, and thus enhancing our understanding of the role of Twelve Step programmes’ spirituality in addiction recovery. Since the study is exploratory in nature and based on a small group of participants, findings cannot be generalised. Future research examining the spiritual values of TSF across larger samples and with different cohorts (e.g., young women) is desirable. Similarly, future studies can further explore the meaning-making function of implicit religion through looking at the psychological aspects of spirituality and its life-enhancing values based on individuals’ lived experience.
References


Author. 2014.


MEN’S AUTOBIOGRAPHICAL ACCOUNTS OF RECOVERY


**MEN’S AUTOBIOGRAPHICAL ACCOUNTS OF RECOVERY**

Figure 1. Participants’ ethnic background and length of recovery

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Ethnic background</th>
<th>Type of substance abuse</th>
<th>Length of recovery</th>
<th>Fellowships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eric</td>
<td>26</td>
<td>White</td>
<td>Alcohol</td>
<td>6 mos.</td>
<td>AA &amp; NA</td>
</tr>
<tr>
<td>Alexis</td>
<td>26</td>
<td>Mixed race</td>
<td>Polysubstance use</td>
<td>5 mos.</td>
<td>NA</td>
</tr>
<tr>
<td>Bill</td>
<td>31</td>
<td>White</td>
<td>Cocaine</td>
<td>9 mos.</td>
<td>NA</td>
</tr>
<tr>
<td>Peter</td>
<td>29</td>
<td>Black</td>
<td>Heroin</td>
<td>2 yrs.</td>
<td>NA</td>
</tr>
<tr>
<td>Sean</td>
<td>29</td>
<td>White</td>
<td>Heroin</td>
<td>5 1/2 yrs.</td>
<td>NA</td>
</tr>
<tr>
<td>Jamie</td>
<td>32</td>
<td>White</td>
<td>Polysubstance use</td>
<td>6 yrs.</td>
<td>NA</td>
</tr>
<tr>
<td>Mark</td>
<td>34</td>
<td>White</td>
<td>Polysubstance use</td>
<td>10 yrs.</td>
<td>AA</td>
</tr>
<tr>
<td>Henry</td>
<td>32</td>
<td>White</td>
<td>Polysubstance use</td>
<td>6 yrs.</td>
<td>AA &amp; NA</td>
</tr>
<tr>
<td>Danny</td>
<td>35</td>
<td>White</td>
<td>Polysubstance use</td>
<td>9 yrs.</td>
<td>AA &amp; NA</td>
</tr>
<tr>
<td>Adam</td>
<td>29</td>
<td>Black</td>
<td></td>
<td>7 mos.</td>
<td></td>
</tr>
</tbody>
</table>
Figure 2. Summary of the themes and sub-themes emerging from the participants’ accounts.

<table>
<thead>
<tr>
<th><strong>Self and Addiction</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>I kind of knew it was all up: Loss of control and agency</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Self and Recovery</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sense of belonging and identification</td>
</tr>
<tr>
<td>I’m becoming my own person: Authenticity</td>
</tr>
<tr>
<td>That’s the spiritual side of me: Towards a spiritual masculine identity</td>
</tr>
<tr>
<td>The meaning of recovery</td>
</tr>
</tbody>
</table>