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Spirituality, Alcohol and Other Drug Problems: Where Have We Been? Where Are We Going?

Oliver J. Morgan, PhD, NCC

SUMMARY. A brief examination of the history, central figures, and literature of spirituality in addiction studies is followed by a review of central concepts and a look toward the future of spirituality research. Some current initiatives are also examined. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <getinfo@haworthpressinc.com> Website: <http://www.HaworthPress.com> © 2002 by The Haworth Press, Inc. All rights reserved.]

KEYWORDS. Spirituality, alcohol problems, addiction, research

At present, it must be acknowledged that our lack of knowledge on these matters far outweighs what is known. There is much to be discovered about spirituality and how it relates to addiction disorders and their treatment.

-National Institute for Healthcare Research, 1997

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Hailed as a new "Fifth Force" in the overall development of counseling, psychology, and clinical practice (Stanard, Sandhu, & Painter, 2000), spirituality is currently a "growing edge" topic in the field of addiction studies as well.

Morgan (1999b; in press) has described the development of addiction science and the later emergence of spirituality as an important topic for research and practice. As the "science" (medical, neurochemical, physiological, psychological) of addiction inquiry became ascendant in the early days of the field, other ways of thinking became less prominent. The early promise of a collaborative and integrative model receded into the background (Keller, 1975; Morgan & Jordan, 1999). Many areas of addiction science that are critically important today evolved during this time, including research into the genetics and chemistry of addiction, greater understanding of the neurochemical pathways in the brain, cross-cultural and epidemiological studies, research into the "stages of change" leading to recovery, relapse prevention, and the like.

With the arrival of *family systems* theory and exploration into the family dynamics at work within the lives of addicts, greater understanding developed around the intergenerational patterns, adaptive mechanisms, and familial consequences of addictive behavior (Morgan, 1999b). Various models of treatment–for addicts and for those who love them–became available. This was an important second phase in the evolution of addiction studies. It is worth noting that the work of several specialists from within the family field, such as Gregory Bateson (1972) and David Berenson (1990), helped pave the way for what was to come.

The next phase of development within addiction studies came with renewed interest and attention to the dynamics of *recovery*. The work of Stephanie Brown (1985) was particularly important here. Her work marked a return to (a) scientific interest in the development, progression and dynamics of recovery as a process of its own, separate from the addictive "career," (b) understanding the dynamics of mutual-help groups such as Alcoholics Anonymous, (c) attention to the "lived experience" of addicts and recovering persons themselves, and (d) an understanding of the need for collaboration among all those concerned with fostering recovery, particularly between clinical professionals and the recovery movement as "partners" (Brown, 1985, pp. x-xiii; see also Morgan, 1995, 1999). Brown's work has proven to be fertile ground for many of those studying the dynamics of recovery and the importance of spirituality (Kubicek, 1998; Morgan, 1992; Sommer, 1992; Turner, 1993; Kubicek, Morrison, & Morgan, in press).

The turn to recovery research was a decisive moment in the emergence of a focus on recovery spirituality.

MID-1980s: A TIME OF FERMENT

However, it must also be noted that other investigators and practitioners within the field of addiction studies were coming to similar conclusions and that their writings fostered a mounting interest in the spiritual dimensions of addiction and recovery (see Table 1).

In 1984 the first volume of Alcoholism Treatment Quarterly appeared and signaled its intention to help initiate and contribute to a conversation on the role of spirituality in alcoholism/addiction. That first volume included a three-part series (Volume 1, Numbers 1, 2, and 4) by Charles Whitfield on "Stress Management and Spirituality During Recovery: A Transpersonal Approach," including a copy of Whitfield's 36-item Spirituality Self Assessment Scale. In that same first volume, Rev. Leo Booth published two Clinical Comments, utilizing his experience as Spiritual Director of Chemical Dependency at San Pedro Peninsula Hospital, while a very positive review of Not-God: A History of Alcoholics Anonymous by Ernest Kurtz (1979) appeared. It is instructive that Booth forcefully challenges the staff of treatment centers to take spirituality seriously as part of recovery (1984, p. 139), while the reviewer points out Kurtz's insight that "what A.A. has done so well is to make the word 'spiritual' acceptable" (1984, p. 148). These are small indicators of the embryonic "state of the conversation" around spirituality and recovery at that time.

In 1985, along with the publication of Brown's book, *Treating the Alcoholic*, Whitfield published his *Alcoholism*, *Attachments and Spirituality: A Transpersonal Approach* and began conducting a number of workshops around the country on the dynamics of spirituality and recovery; Booth (1985) published *Spirituality and Recovery*. Rev. James Royce, S.J. (1985a and b) also published two articles on recovery spirituality that same year.

Perhaps not surprisingly, 1985-1986 saw the emergence of a counter-movement against the notion of spirituality, particularly in its connection with recovery through A.A. Albert Ellis (1985) published his influential article, "Why Alcoholics Anonymous Is Probably Doing Itself and Alcoholics More Harm than Good by Its Insistence on a Higher Power," bringing into clearer and more specific focus some of his earlier arguments in *The Case Against Religiosity* (1983), and foreshadowing his more developed views in "Divine Intervention and the Treatment of Chemical Dependency" (1990). Ellis' primary concerns revolve around (a) those who cannot or choose not to enter recovery through Alcoholics Anonymous, in part because of the air of "religiosity" in A.A., and (b) the potential iatrogenic effects of believing in a God or Higher Power as a way to recovery rather than believing in one's self and in one's own resources. It is interesting to note that in the same 1985 first issue of *Employee Assistance Quarterly*, following Ellis' review, there were two brief follow-up

TABLE 1. Select Spirituality Timeline

| Founding of A | Addiction Studies (see White, 1998; Morgan, 1999b) | | | | | |
|---------------|--|--|--|--|--|--|
| 1935 | Alcoholics Anonymous founded (A.A.) | | | | | |
| 1937 | Research Council on Problems of Alcohol (RCPA) | | | | | |
| 1939 | First Edition of "Big Book," Alcoholics Anonymous | | | | | |
| 1940 | Founding of Quarterly Journal of Studies on Alcohol (QJSA) | | | | | |
| 1943 | Yale Center of Alcohol Studies Yale Summer School of Alcohol Studies | | | | | |
| 1944 | Yale Plan Clinics National Committee for Education of Alcoholism | | | | | |
| 1942 – 1961 | Harry Tiebout, "1st advocate and friend of A.A. from within psychiatry" (White, 1998, p. 142) publishes seminal articles | | | | | |
| Addiction and | Spirituality: Early Days | | | | | |
| 1951 | Ford, SJ: Depth psychology, morality and alcoholism | | | | | |
| 1954 | Founding of NYC Medical Society on Alcoholism (later, American Society of Addiction Medicine) | | | | | |
| 1955 | Ford, SJ, Man takes a drink (What about your drinking?) | | | | | |
| 1961 | Clinebell, Understanding and counseling the alcoholic (1st edition) | | | | | |
| 1963 | Clinebell, "Philosophical-religious factors in the etiology and treatment of alcoholism." QJSA, 24, 473-488. | | | | | |
| 1966 | Harry Tiebout dies. | | | | | |
| 1971 | Bateson, "The cybernetics of 'self': A theory of alcoholism." | | | | | |
| 1979 | Kurtz, Not-god: A history of Alcoholics Anonymous | | | | | |
| 1982 | Kurtz, "Why AA works: The intellectual significance of Alcoholics Anonymous." | | | | | |
| 1983 | Ellis, The case against religiosity | | | | | |
| Mid-1980s: A | Watershed; Time of Ferment | | | | | |
| 1984 | ATQ, Volume 1, Number 1 (Spring). This Journal signals its intention to publish at least some articles in the area of spirituality and alcoholism/addiction with series by Whitfield, Booth and book review of Kurtz's Not-god | | | | | |
| 1985 | Whitlield, Alcoholism, attachments and spirituality: A transpersonal approach | | | | | |
| | S. Brown, Treating the alcoholic | | | | | |
| | Booth, Spirituality and recovery | | | | | |
| | Royce, "What do you mean, spiritual illness?" AND "Sin or solace? Religious views on alcohol and alcoholism" | | | | | |
| | Ellis, "Why Alcoholics Anonymous is probably doing itself and alcoholics more harm than good by its insistence on a higher power" | | | | | |
| | Christopher, "Sobriety without superstition" | | | | | |

Rational Recovery (R.R.) founded by Jack Trimpey

| | 1986 | First meeting of Save Our Selves/Secular Organizations for Sobriety |
|--|--------------|--|
| | 1987 | Buxton, Smith & Seymour, "Spirituality and other points of resistance to the 12-step recovery process" |
| | | Seymour & Smith, Drugfree: A unique, positive approach to staying off alcohol and other drugs |
| | | Royce, "Spiritual Progression Chart" |
| | 1988 | Brown, Peterson and Cunningham, three part series in ATQ volume 5, plus three more articles in 1989, 1990, and 1991 Tom McGovern takes over as Editor of <i>ATQ</i> , succeeding Bruce Carruth |
| | 1989 | May, Addiction and grace Christopher, How to stay sober: Recovery without religion Trimpey, Rational recovery from alcoholism: The small book |
| | | • |
| | | Ongoing Development |
| | 1990 | Berenson, "A systemic view of spirituality: God and twelve step programs as resources in family therapy" |
| | | Miller, "Spirituality: The silent dimension in addiction research. The 1990 Leonard Ball oration" |
| | | Ellis & Schoenfeld, "Divine intervention and the treatment of chemical dependency" |
| | 1995 | Howard Brown, Jr. dies |
| | 1996 1997 | Mercadante, Victims & sinners: Spiritual roots of addiction and recovery Miller, "Spiritual aspects of addictions treatment and research" |
| | | National Institute on Healthcare Research, Scientific Research on Spirituality and Health: A consensus report |
| | 1998 | Clinebell, Understanding and counseling persons with alcohol, drug, and behavioral addictions [revised and enlarged edition] |
| | | Miller, "Researching the spiritual dimensions of alcohol and other drug problems" |
| | | White, Slaying the dragon: The history of addiction treatment and recovery in America |
| | 1999 | Miller & Bennett, Annotated Online Bibliography – Spirituality and substance use |
| | | Morgan & Jordan, Addiction and spirituality: A multidisciplinary approach |

articles by G. Alan Marlatt, a cognitive behavioral psychologist, and Abraham Twerski, psychiatrist and rabbi, both of whom are a bit more sympathetic to A.A. and to the notion of spirituality. These three brief articles in response to the publication of *Alcoholics Anonymous*, 3rd edition indicate once again the vigorous discussion that was occurring around these ideas.

NIAAA & Fetzer RFA [AA-00-002]: "Studying spirituality and alcohol"

2000

At the same time, James Christopher and Jack Trimpey made their appearance in the field. Each was the founder of a new mutual-help recovery resource.

Trimpey founded Rational Recovery (R.R.) in 1985 and Christopher held the first meeting of Save Our Selves/Secular Organizations for Sobriety (S.O.S.) in 1986. Both groups consciously offer alternatives to A.A. *and* its spiritual approach to recovery. Once again, these very events bring spirituality to the fore.

CONTINUED DEVELOPMENT

From the mid-1980s until now, as the reader can see in reviewing the Select Spirituality Timeline (Table 1), the topic of spirituality has been the subject of increasing reflection, research, and publication. Several important names and seminal publications have appeared. David Smith, M.D., founder of the Haight-Asbury Clinic, and his collaborators Richard Seymour (1987) and Millicent Buxton (1987) have published several key works that highlight the role of spirituality. James Royce (1987) and Charles Whitfield (1987, 1989) continued to publish in the same area.

Over time new names appeared and made significant contributions. Before the untimely death of Howard Brown, Jr., in 1995 (see Miller, 1996), he and his colleagues published a number of important articles in *Alcoholism Treatment Quarterly* and other journals, exploring a psychospiritual approach to addiction assessment, treatment, aftercare, and scientific understanding (Brown et al., 1988a, b, and c, 1989, 1990a and b, 1991, 1992, 1993). They called their perspective a "behavioral/cognitive spiritual model." Brown's initial work appeared in *ATQ* in 1988, as Tom McGovern took over editing the journal. This was the same year that Gerald May (1988) published the popular *Addiction and Grace*, in which he argued that notions such as "addiction" and "attachment" might be useful for a modern understanding of sin (see Miller, 1998).

The important work of William Miller into the spiritual dimension of addiction and recovery began to appear in 1990 (Miller, 1990, 1995, 1997, 1998). His explorations have led to several important research initiatives, which we will discuss at the end of this article. In 1995 Robert Kus edited a fine volume entitled Spirituality and Chemical Dependency, bringing together a number of older and newer writers on the topic. In 1996 Linda Mercadante published Victims & Sinners: Spiritual Roots of Addiction and Recovery, a provocative theological exploration of 12-step spirituality, the recovery "movement," and allied issues. It stands as a serious work that must be included in any contemporary reflections on the topic. One of the earliest and most provocative writers on addiction from within the field of pastoral counseling, Howard Clinebell, Jr., resurfaced in 1998 with a revised and enlarged edition of his classic work, Understanding and Counseling Persons with Alcohol, Drug, and Behavioral Addictions.

In 1999 William Miller and Melanie Bennett released their online comprehensive bibliography, *Spirituality and Substance Use*, providing a rich resource for addiction scholars and investigators. In that same year Morgan and Jordan published *Addiction and Spirituality: A Multidisciplinary Approach*, gathering both familiar and new voices into the conversation about addiction and spirituality, while pointing a way forward for this field of inquiry.

As the reader can see, this has been a varied and rich history. In what follows we will review some of the developments, important figures, and possible future directions for the ongoing understanding of spirituality as it relates to addiction. We will examine the thinking of several major advocates for inclusion of this theme in a more comprehensive model of understanding. As we will see, some of the literature is more narrative in tone and speculative in nature, while newer literature moves in the direction of standard social science research designs that are more likely to be published in peer-reviewed professional venues and, therefore, may have broader impact (Miller, 1998). Finally, we will examine several recent developments in this area and some potential ways in which research and thinking may fruitfully proceed.

It should be noted that, while spirituality as it relates to addiction may be discussed in other ways and a number of spiritual traditions may be usefully examined in this regard (see, for example, O'Connell & Alexander, 1994), our discussion will focus primarily on the classic writers and literature related to 12-step spirituality and Alcoholics Anonymous. This understanding will help to ground future, and hopefully more diverse, work.

SPIRITUALITY, RELIGION, AND RECOVERY: WHAT HAVE WE LEARNED?

In "Spirituality and Other Points of Resistance to the 12-Step Recovery Process," Smith and his colleagues (1987) outline a number of the issues that have dogged discussion of 12-step recovery. They discuss the focus on recovery, especially as it occurs through 12-step support, as a starting point for renewed interest in spirituality (p. 279) and then proceed to distinguish between "religion" and "spirituality," as other authors have, before and since (see, for example, Brown et al., 1988a; Chappel, 1993; Kurtz, 1979; Miller, 1998; Tiebout, 1946).

Religion is often seen and defined in the literature as a "social phenomenon," an "organized structure... defined by its boundaries—by particular beliefs, practices, and forms of governance and rituals" (Miller, 1998). Sometimes it has been hard to untangle the interwoven threads of religious roots and history in A.A., so that its *spiritual* dynamics might emerge more

clearly (Buxton, Smith, & Seymour, 1987). The confusion of religious antecedents and themes with spirituality, and the obvious connections of *both* religion and spirituality to A.A., has often made for some of the difficulty and resistance within the scientific community to appreciating the role of spirituality, as well as to the fellowship and program of A.A.

Spirituality, however, has also been difficult to define (and operationalize) in its own right, making it difficult to study in any scientific way (Buxton et al., 1987; Miller, 1998). The standard scientific research into addiction and recovery uses methodological assumptions and a quantitative research paradigm that, while valuable for investigating a number of phenomena, may be of limited utility in studying the realm of spiritual experience, at least initially. Kurtz (1986, 1991) has suggested that spirituality is so deeply ingrained in the realm of personal experience that attention to narrative and story—more qualitative dimensions of human living—may be the only way that spiritual dynamics will fully reveal themselves (see also Whitfield, 1985).

A CRITICAL CROSSROAD

It is at this point that we come to a critical crossroad in our discussion. Much of the literature that exists currently in the field of spirituality and addiction is more reflective and speculative in nature, often rooted in the lived experience of addicts themselves and gathered through clinical, qualitative and narrative research (Morgan, 1999b & c). It is often augmented by the writer's sense of recovery history and cultural context (for example, Kurtz, 1979), philosophy (Kurtz, 1982), theology (Clinebell, 1998), transpersonal psychology (Alexander, 1997; Grof, 1993; Small, 1981), and Eastern mysticism (Whitfield, 1985; see Kurtz, 1982 as well). This material describes the "core spiritual experiences" of addiction and recovery somewhat densely and theoretically, trying to present the whole of the experience and its deep psychological and philosophical roots. This literature is important and foundational.

There is another strain in the literature, however, that attempts to be more directly "empirical" and descriptive as these terms are commonly understood. This body of literature utilizes a more standard social scientific paradigm, gathering data through surveys, research interviews, and psychometric instrumentation. Less theoretical, it often feels more grounded and practical to the reader. This strain has been used, sometimes alone and sometimes in conjunction with qualitative methods, in several hallmark studies (Brown, 1985; Brown, Peterson, & Cunningham 1988a, b, & c; Project MATCH Research Group, 1993, 1997). Increasingly it is being seen as the "next step" in studying spirituality in addiction science.

Both strains are important to this field of study, but they make for very different reading. We will first present a synthesis of the core spiritual experiences of addiction and recovery, gathered from a number of writers in the speculative camp. As we will see, their assertions, though profound and often acknowledged positively by recovering persons, are also difficult to prove and hard to follow-up with further studies. Next, we will look at how contemporary researchers are beginning to explore the question of spirituality, not so much by speculation spun out of whole cloth but rather through examination of various spiritual changes, beliefs and practices that are acknowledged by a wide range of recovering persons.

CORE SPIRITUALITY: A TALE OF DEGENERATION, SURRENDER, AND TRANSFORMATION

From the beginnings of the recovery movement and the founding of addiction studies, there have been those professionals (physicians, researchers, pastors, etc.) who, in listening to the lived experience of successfully recovering persons, have underscored the importance of spirituality in the recovery process.

Rev. John C. Ford, S.J. (1902-1989), a confidante to Bill Wilson and other early recovery leaders, was a strong pastoral voice in favor of the young A.A. movement and over the years helped to forge a pastorally-sensitive, ecumenical view of alcoholism and addiction. His work with the Yale Summer School on Alcohol Studies and his relationships both with A.A. and with many early addiction scientists aided in the formation of the early collaborative approach to alcohol and other drug problems (Morgan, 1999a & b).

Ford took seriously A.A.'s "threefold disease" concept—a disease of body, mind, and soul—as the way to understand the nature of alcoholism and addiction. He listened carefully to the testimony of recovering persons and their families, and found agreement with this concept. He listened as well to the evolving scientific views that were coming to the fore. To these perspectives he added his own clear theological voice, seeing the progression of alcoholism as having a "definite degenerative effect" on its sufferers (Morgan, 1999a, 38):

Alcoholism is not just a disease, and not just a moral problem. It is both. It is a sickness of body, mind, and soul.

The sickness of the body refers to whatever physiological factors scientists can point out as contributing to the abnormal drinking.

The sickness of the mind is the compulsive or addictive thinking which sometimes takes possession of the alcoholic with regard to drinking.

The sickness of the soul is the moral and spiritual deterioration characteristic of so many alcoholics. (Ford, 1961, 111; emphasis mine)

In Ford's view, over time and with continued use of alcohol to "escape from pain," personal virtues (e.g., honesty, humility) and character begin to deteriorate, the person becomes increasingly more self-centered, "spiritually bankrupt," and "at odds with God, at odds with his [sic] own conscience, and finally deprived of his own self-respect" (1961, p. 110).

This "diagnosis" allowed Ford to attribute the success of A.A. to its understanding or "definition" of addictive illness (see also Siegler, Osmond, & Newell, 1968) through the threefold disease concept as well as its application of spiritual principles ("medicine of the soul") to recovery. He believed that the Twelve Steps were "a program of moral and spiritual regeneration" that counteracted the degenerative effect of addiction as a "sickness of soul" (Ford, 1950, p. 4; 1951, p. 63). Spirituality in this view is related to character, virtue, and one's responsible relationship to the self, to others, and to the world of God's creation (Morgan, 1999a).

Harry Tiebout, MD (1896-1966), sometimes called "A.A.'s psychiatrist," was influential in fostering relationships between A.A. and the world of medicine. He was also one of the first writers to grasp and articulate the need for a spiritual perspective in addiction treatment, something he learned from his work with those in recovery (Tiebout, 1946).

Tiebout began to notice that his difficult patients were recovering from alcoholism through the new A.A. and, what's more, that real character change was occurring as well. His investigations led him to listen keenly, producing some unexpected insights.

Something had taken place under my very nose which could not be doubted and which could not be explained away as mere coincidence. I found myself facing the question: What had happened? My answer is that the patient had had a religious or spiritual experience. The answer, however, did not prove particularly enlightening and it was not until much later that I began to appreciate the real meaning of the answer. (1944, pp. 468-469)

In a long series of publications, Tiebout describes a deeply transforming process that leads to successful recovery, a "deep shift in the patient's emotional tone" and a "discrete pattern of response" (1961, p. 53). He speaks of "surrender" to a "Power greater" and the reduction of ego that accompanies it, as the crucial elements leading to recovery. Tiebout admits that "surrender" was a new word added to his psychiatric vocabulary. He came to see it as the healthy result of "hitting bottom" which engendered authentic humility.

It is now clear that hitting bottom can produce a surrender and that without surrender an individual can hit bottom a thousand times without anything significant taking place.... In A.A. language he has accepted a Power greater than himself. He has quit competing for his place in the ranks of the high and mighty. A.A. members would say that his ego has been reduced. And they are right....

A conversion occurs when the individual hits bottom, surrenders, and thereby has his ego reduced. His salvation lies in keeping that ego reduced, in staying humble. These insights, gained from long study of Alcoholics Anonymous and the process it initiates, appear to give meaning and order to the change which A.A. induces. Conversion is no longer an event "out of the blue" but a logical outgrowth of human responses; hitting bottom and surrender. (Tiebout, 1961, pp. 58, 65)

In Tiebout's view this "change which A.A. induces" is a spiritual process of conversion and surrender with clear psychoemotional, cognitive, and behavioral roots and dynamics. Surrender to a Power greater and acceptance of one-self leads to cognitive and behavioral change, to a transformation of identity, and to a profound difference in terms of lifestyle (Morgan, 1992, 1995).

Others have undertaken the task of exploring and understanding these dynamics in more detail.

FURTHER ELABORATION OF SPIRITUAL ELEMENTS

What is the addict's central (spiritual) problem? The diagnosis of Alcoholics Anonymous is clear on this point. In the Big Book of A.A., the reader is told: "Selfishness—self-centeredness! That, we think, is the root of our troubles . . . the alcoholic is an extreme example of self-will run riot, though he usually doesn't think so" (Alcoholics Anonymous, 1976, p. 62; emphasis mine). When this insight is combined with another from Twelve Steps and Twelve Traditions, we get a clear picture of the alcohol/addict's plight: "The chief activator of our [character] defects has been self-centered fear" (Alcoholics Anonymous, 1986, p. 76; emphasis mine). Taken together, these insights—"self-will run riot" and "self-centered fear"—allow us to delve into the heart of the spiritual dilemma the addict faces and what s/he needs for full recovery.

In a seminal article published in 1982, Ernest Kurtz attempts to address these issues and, in doing so, provides a perspective for understanding how A.A. works (Kurtz, 1982). His work is similar to the understanding of others trying to unravel the threads of addiction and recovery spirituality. We will try to weave these threads together into a coherent summary below.

"Addictions are attempts to shortcut and outsmart our finitude by the illusion of chemical transcendence," says Howard Clinebell (1998, p. 270). Faced with the truth of essential limitation and finitude as a human person, yet yearning to transcend this truth, the alcoholic/addict experiences existential anxiety. S/he experiences what could be understood as a religious and spiritual "hunger," potentially leading to deep affiliation with God (Clinebell, 1998, p. 267). This hunger is in all of us.

Yet in the addict this hunger is hijacked! In a futile attempt "to satisfy deep inner conflicts and hungers," the alcoholic/addict constructs piece-by-piece a "pseudo-religious solution" (Clinebell, 1963; 1998, p. 121), a "counterfeit" spirituality (van Kaam, 1966), an idolatrous spiritual stance (Miller, 1998; Morgan & Jordan, 1999), claiming "God-like powers" such as absolute control over feelings, the environment and others (Kurtz, 1982), attempting to will "what cannot be willed" (Tiebout in 1954 had described the addict as "His majesty, the baby"), and claiming absolute independence. Because of this resort to power and control in the face of anxiety, the addict experiences alienation, loneliness, isolation, shame, feelings of unloveability, fear, and hopelessness (Kurtz, 1982). Alienation and loneliness arise from the refusal to accept one's essential limitation, the central truth of human life. Alcohol and other drugs become a substitute higher power (Miller, 1998). As Whitfield (1985, p. 1) had said earlier, "We become addicted or attached to the way we think things should be." The addict accepts a host of false and negative beliefs-an "implicitly negative theological script"-about the self, about the world, about others, and about God (Morgan & Jordan, 1999, pp. 256-257).

Alcoholics Anonymous brings two "core insistences" to the task of recovery, namely the acceptance of essential limitation and the need to live in humble mutuality (Kurtz, 1982, p. 39). In the view of some, these two pillars of recovery are exactly what C. G. Jung had suggested to Bill Wilson long ago: spiritus contra spiritum (Buxton, Smith, & Seymour, 1987). The acceptance of limitation is seen in the title of Kurtz's book, Not-God (1979); in recovery the struggling alcoholic/addict surrenders to the essential limitation of human living and being, and comes to understand that she is "not god" and that no one else is, either. That is, the acceptance of limitation—the relinquishment of power and the myth of control, as well as adopting a stance of "letting be" toward the world and others—leads one to affirm "connectedness" with others who are similarly limited and vulnerable. These two core dynamics, the acceptance of limitation and the affirmation of mutual connectedness, are the heart of what Kurtz sees as "A.A.'s therapeutic dynamic: shared honesty of mutual vulnerability, openly acknowledged" (Kurtz, 1982, p. 42).

Along with the important aspects of addiction related to physiology, biochemistry, brain function, habit, conditioning, personality, and the like, these elements of anxiety, power, control, alienation, distorted beliefs, and acceptance of self are also intimately related to the experience of addiction, as a human drama. They are part of the deep background, the philosophical and theological core, of spirituality (Morgan & Jordan, 1999a).

What, then, is the central core of recovery? Harry Tiebout spoke, as the 12 steps and the Big Book of A.A. do (Alcoholics Anonymous, 1976, pp. 569-570), of a "spiritual awakening" that was necessary for true sobriety:

Characteristic of the so-called typical alcoholic is a narcissistic egocentric core, dominated by feelings of omnipotence. . . . Inwardly the alcoholic brooks no control from man or God. He, the alcoholic, is and must be master of his destiny. He will fight to the end to preserve that position. . . .

. . . a religious or spiritual awakening is the act of giving up one's reliance on one's omnipotence. The defiant individual no longer defies but accepts help, guidance and control from outside. And as the individual relinquishes his negative, aggressive feelings toward himself and toward life, he finds himself overwhelmed by strongly positive ones such as love, friendliness, peacefulness, and pervading contentment, which state is the exact antithesis of the former restlessness and irritability. And the significant fact is that with this new mental state the individual is no longer literally "driven to drink." (Tiebout, 1944, pp. 469-470)

As he says in several places, Tiebout believed that this "giving up" or "surrender" was a powerful psychological event with spiritual effects, "leading to a new type of inner response, spiritual in quality" (1946, p. 158; 1949). He describes the effect as a new "frame of mind," characterized by qualities such as peace, calm, contentment, serenity, and the like. And, along with these changes in emotional tone comes a concomitant change in personality, in which an "egocentric hostile pattern" is replaced and "spiritual strengthening" occurs (1946, p. 164). This change of character and approach to life was dramatic, and seen in the way one lived one's life ever after.

The spiritual program of the 12 steps and engagement in fellowship with "fellow sufferers" leads to recovery in this view. Steps 1 through 3 lead to an acceptance of limitation and reality as it is (Kurtz's "not-god"), while the rest of the 12 steps build on this acceptance and branch out into (1) a "therapy of mutuality" through sharing of stories—experience, strength and hope—among fellow sufferers and (2) tools for ongoing sober living. As Whitfield and Kurtz both suggest, the telling of stories in recovery is a powerful recovery tool for "remapping our belief systems into a new way of life that involves a new way of thinking, and the process of identification with the stories of others" (Whitfield, 1985, p. 86; see also Kurtz, 1986). Stories complement other tools such as moral inventories, use of recovery sponsors, confession, and service.

These factors counteract the "self-centeredness" at "the root of our troubles" (Kurtz, 1982, p. 58), and lead to a daily acceptance of life as "mystery" and openness to "miracles" happening (versus control), with characteristic attitudes such as release, gratitude, humility, and tolerance (Kurtz, 1986; Morgan, 1995).

If the experience of addiction leads to a degeneration of spirit, then the experience of recovery may be seen as "regeneration," a gradual transformation of self, rooted in surrender (Clinebell, 1963; Morgan & Jordan, 1999).

STUDIES OF RECOVERY SPIRITUALITY

The spiritual dimension of those "core" experiences, described above in more speculative terms, has been helpfully described and elaborated in studies utilizing both quantitative and qualitative research paradigms.

Brown, Peterson, and Cunningham (1988a, b, & c) identified a "working definition" of spirituality as related to relationship with self, others and God. They then proceeded to "operationalize" this working definition into sets of cognitive and behavioral factors suitable both for research and for inducing change.

Brown and his coworkers labeled their approach a "behavioral/cognitive spiritual mode," phraseology which both emphasizes the value of behavior in effecting spiritual change, and they present spirituality as capable of being operationalized through measurable behaviors and cognitive actions. Their work represents a real step forward in opening possible empirical and quantitative approaches to spirituality and recovery, as well as the potential uses of spirituality in treatment and aftercare; their focus on "spiritual behaviors" and growth in a "spiritual lifestyle" is also important as research moves forward. As we will see, a number of contemporary researchers are building on their work.

In a study of long-term recovering alcoholics, Morgan (1992) found that the founding moment of recovery-surrender, conversion—was understood as a moment of intervention and grace, pulling addicted persons out of the vicious cycle of addiction, degeneration, and loss of self. Those who spoke about this experience also described a felt experience of being cared for, of being the recipient of providential care. Over time in recovery, these persons described a deepening attitude of trust, acceptance, and reliance on providence, attitudes not confined to past experience but involving deep beliefs about the present and future as well. They experience God or their "Higher Power" continuing to intervene and work in and through their lives, along with a sense of guidance and protection in living, a sense of "miracles" happening, and a sense of "benevolent serendipity" operative in living (Morgan, 1992; Morgan & Jordan, 1999, p. 262).

These changes made a difference in the way they lived their lives. Many recovering persons believe in the ongoing care and intervention of their Higher Power. They stake their recoveries, and their lives, on this confidence. This profoundly altered view of self, their relationship to God and to the world lies at the core of recovery spirituality (Brown, 1985; Morgan, 1992). God becomes approachable and prayer becomes meaningful; service to others, particularly to those still caught in the mire of addiction, becomes a vocation. Loved and loveable, these recovering persons experience a kind of mutuality and connectedness that is truly life-changing (Morgan, 1995).

WHERE DO WE GO FROM HERE?

Taken together, the classic literature of spirituality in addiction studies illuminates both the "core experiences" of addiction and recovery spirituality, and the "effects" of those experiences. These effects are behavioral, cognitive, attitudinal, affective, and relational. This distinction has led to "a way forward" in new addiction research.

A number of contemporary researchers, spurred particularly by the work of Miller (1990, 1998), are coming to understand that spirituality can be seen as a "multidimensional" construct, much like health or personality. As such, one can articulate certain dimensions or elements ("effects") of spirituality, such as behavior or beliefs, operationalize them, and then move to study them in the experience of a wide range of addicts and recovering persons (Fetzer Institute, 1999a & b; Miller, 1998; Larson, Swyers, & McCullough, 1997).

Within a multidimensional construct like "spirituality," some aspects or experiences such as "surrender" or a sense of "providential care" and "serendipity" might be difficult to study without narrative tools. Indeed, the deep meaning of some aspects, such as "self-centeredness," or "humility," or "gratitude"—or, indeed, an ongoing relationship with a Higher Power—may not be available for direct study and may only reveal something of itself through story and relationship. This ought not be surprising. However, other aspects of spirituality understood as a multidimensional construct—for example, the cognitive, attitudinal or behavioral "effects" of true surrender or of a relationship with God—may appropriately and productively be studied using more standard social scientific models and instruments. Tiebout (1946) had foreshadowed such an eventuality in his writings. Interestingly, a body of psychometric instruments for the study of spiritual and religious constructs does exist in the literature of psychology and religion (Hill, 1999; Hill & Hood, 1999; Miller, 1998).

A WAY FORWARD

To that end a number of research initiatives are currently underway that offer great promise for the elaboration of a more nuanced and complete understanding of addiction and spirituality. The Consensus Report on *Scientific Research on Spirituality and Health* (Larson, Swyers, & McCullough, 1997), utilizing the work of many respected professionals in a variety of fields, called for new kinds of research into spirituality. The panel members examining "Addictions: Alcohol/Drug Problems" included many of those scientists and practitioners concerned with the spiritual dimensions of recovery, such as Bill Miller, Stephanie Brown, G. Alan Marlatt, Peter Nathan, John Wallace and others. Their concern about increasing the quality and credibility of research in this area is notable. Their recommendations regarding use of "good science," increased funding, and renewed, honest communication among researchers in the area of addiction and spirituality are important and timely (NIHR, 1997, pp. 77, 79).

The recent RFA on "Spirituality and Alcohol" issued by the National Institute on Alcohol Abuse and Alcoholism in conjunction with the Fetzer Institute (2000), and the subsequent granting of research monies for several quantitative and qualitative projects, is another indicator of expanded interest in the topic and a follow-up to the recommendations of NIHR. The work of Project MATCH, "the largest randomized trial of a spiritually based treatment," is an example of the benefits of such an approach (Miller, 1998). Clearly, sustained scientific study of spirituality and its interrelationships with addictive illness is now understood as a critical endeavor in addiction studies.

The Fetzer Institute's Multidimensional Measure of Religiousness/Spirituality and its accompanying materials (1999a & b), adapted from examination of many other useful instruments and scales, will be increasingly used to examine operationalized aspects of spirituality (e.g., Forgiveness, Religious/Spiritual Coping, Religious Support, Commitment) across a range of populations and conditions. It is a work-in-progress but is already being used to good effect in research. Other instruments, old and new, and several structured interview formats are also being used in addiction research (Morgan, in press; Tonigan, Toscova, & Connors, 1999).

The next five to ten years may prove to be an exciting time in the study of spirituality within addiction studies. Now that there is more general acceptance of the need to study this phenomenon, several "next steps" need to be taken.

Study of spirituality will require a willingness on the part of researchers (a) to consider new questions and ways of pursuing them, (b) to include questions of spirituality into more general studies utilizing appropriate instrumentation,

and (c) to attempt research efforts with an expanded base of participants, including but moving beyond A.A. recoverers and 12-step programs (Miller, 1997, 1998).

Hopefully, studies of spiritual variables in treatment as well as recovery will be forthcoming, and will utilize rigorous quantitative and qualitative empirical paradigms and methods. Several studies of such variables and recommended interventions are available for further follow-up (Miller, 1997; Project MATCH, 1993, 1997).

Future efforts will require new and sustainable sources of funding, as well as institutional and governmental support, so that high quality investigations can be conducted over time. An area of support that is very much needed will include the training and mentoring of young researchers who are interested in pursuing spiritual questions for understanding (Miller, 1998). At present, only a select cadré of investigators are examining the spiritual dynamics of addiction and recovery, and many standard training programs in psychology, counseling and medicine do not include study of spirituality. Learning from senior researchers and previous literature will be a crucial task for apprentice scholars in this field.

There is still much to learn in the area of spirituality and addiction/recovery. Much has been done recently to inject new life into this intriguing area of study. Further research offers the promise of more complete understanding and greater effectiveness in our approach to addictive illness.

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