Practitioner Perspective

Spirituality in the Recovery Process of Addiction - Is there an Impact on the Counsellor?

By Daniel Cleary

For therapists working in the addiction treatment field, the use of spiritual concepts in the treatment of alcohol and drug addiction is viewed by some as the clearest demonstration of the value of spirituality and this construct may be seen as the central curative factor in recovery

Introduction

There may be an impact on the addiction counsellor when spirituality is incorporated into the recovery process (Treloar, Dubreuil & Miranda, 2014; Duchon & Plowman, 2005) and this poses important implications for training and supervision of therapists in addiction work. There needs to be an openness and awareness around spirituality, irrespective of whether the counsellor personally believes in spirituality or not. When spirituality is part of the recovery process, it can enable the counsellor to deal with and manage an array of issues that arise with the client, as well as enhancing the work and life of the therapist.

If the addiction worker has the ability to allow an open, non-judgmental and compassionate environment when working in the area of addiction treatment, spiritual understanding, knowledge and competence may increase the ability of the addiction worker to help the addicted person "to discover or rediscover their own purpose and core values, explore the negative consequences of the addictive behaviour on these values, and to develop behaviours that support the identified core values" (Treloar, Dubreuil & Miranda, 2014, p. 38). These negative consequences can include burnout, stress, empathy fatigue, vicarious trauma, sadness, transference and/or countertransference. Perhaps most striking, however, is the opportunity spirituality presents to the counsellor for personal and professional growth in their work and spiritual life. This article will explore addiction, recovery, the role of spirituality and addiction recovery and working in addiction recovery.

What is Addiction?

There has been a great deal of research into what constitutes addiction, with extensive literature published on the subject and its varied understandings and descriptions. Although the World Health Organisation's (1992) *ICD-10 Classification of Mental and Behavioural Disorders* outlines

clinical descriptions and diagnostic guidelines for addiction, and the American Psychiatric Association lists addiction in its *Diagnostic and Statistical Manual of Mental Disorders V* (2013), defining addiction still proves difficult because it encompasses numerous fields, namely medicine, psychology, science and biology.

Addiction can take many forms. Indeed, there is further difficulty in defining who can become addicted, what an individual can be addicted to, and what the real health effects of these addictions are. There is also confusion around the motivation to use or be involved in what an individual might be addicted to (Armstrong & Piccard, 2015). Further, addiction can be viewed as multi-faceted, including both appetitive and compulsive aspects (Chassina, Pressona, Roseb & Shermanc, 2007).

The American Society of Addiction Medicine (ASAM) (2010) states that addiction can be described as a "primary, chronic disease of brain reward, motivation, memory and related circuitry" (p. 1). Dysfunction in brain reward, motivation, memory and related circuitry leads to characteristic signs of biological, psychological, social and spiritual happenings. This can be seen in an individual pathologically pursuing reward and/or relief by substance use and/or other behaviours.

Addiction encompasses the inability to consistently abstain from "impairment in behavioural control and craving, diminished recognition of significant problems with one's behaviours and interpersonal relationships, and a dysfunctional emotional response" (ASAM, 2010, p. 1). Like other chronic diseases, addiction can involve repeated episodes of relapse and remission. Without intervention, treatment or some type of recovery, addiction is progressive and can result in long-

I *f recovery is going to be achieved and maintained, the person with the addiction must develop the capacity to form healthy and emotionally-regulatory relationships (Roth, 2016)*

term illness, injury, or condition, or possible premature death.

What is Recovery?

Recovery, like addiction, has proved difficult to define in spite of extensive research into the process. To date, there is no consensus on a definition, even among those in recovery (Laudet, 2007; Laudet, Morgen & White, 2006). A number of researchers define recovery in terms of substance use (Cisler, Kowalchuk, Saunders, Zweben & Trinh, 2005), while others refer to recovery as total abstinence from the substance (Flynn et al., 2003; Scott et al., 2005). Either way, recovery can be viewed as a complex and dynamic process incorporating all the positive effects and advantages of the physical, mental and social health that can happen when people with an addiction receive the help they need (National Council on Alcoholism and Drug Dependence 2015).

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The Substance Abuse and Mental Health Services Administration (2011) describes recovery as "a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential" (para. 2). They continue that although abstinence remains the safest approach for those with substance use disorders, it emphasises that "recovery occurs

via many pathways" (para. 2).

The role of Spirituality and Religion in Addiction Recovery

People in recovery from alcoholism or other addictions through 12-step programmes like Alcoholics Anonymous (2013) often hear phrases such as 'this is a spiritual programme' or 'you need to discover your spirituality or higher power'. Twelve-step programmes clearly separate themselves from religion, yet equally claim to be spiritual programmes. Likewise, some residential programmes attach themselves to a particular religion and also state that they offer a clear spiritual programme.

Religion is defined as "an organized system of beliefs and rituals associated with an institutional structure" (Rusinova & Cash, 2007, p. 252). While it is difficult to define the term and meaning of spirituality (Egan & Swedersky, 2003; West, 2000), it is not to be equated to a doctrinal or religious faith. According to the New Hope Recovery Centre (2014), spirituality does not need to be defined through the lens of religion. "Spirituality is recognizing a power greater than ourselves which is grounded in love and compassion. It is a power that gives us perspective, meaning and a purpose to our lives. It is a desire to connect with more than ourselves, to connect with everything" (para. 3).

Booth (2012) informs us that spirituality is about recognising that people have the power to change what it is in their lives that brings them pain. Whether it

As therapy is very often not the first port of call for people seeking help, it can be assumed that clients have spent some time coping with their difficulties in other ways

is an individual in need of greater positivity, or a person whose life has been destroyed by addiction, every one of us has the ability to initiate the healing process. Not surprisingly then, spirituality has become and continues to be an important topic in today's world.

Ciarrochi and Brelsford (2009) suggest that poor self-control, crime and substance abuse may be the result of a lack of religious or spiritual belief/connection. They propose that a person with a connection to a religious or spiritual institution has a higher likelihood of possessing psychological maturity and emotional well-being (Zinnbauer, Pargament & Scott, 1999, as cited in Ciarrocho & Brelsford, 2009).

For therapists working in the addiction treatment field, the use of spiritual concepts in the treatment of alcohol and drug addiction is viewed by some as the clearest demonstration of the value of spirituality and this construct may be seen as the central curative factor in recovery (Borman & Dixon 1998; Green, Fullilove & Fullilove 1998; Warfield & Goldstein 1996). And it appears to be a growing phenomenon: "Get used to it. Spirituality is creeping into the offices… And companies are turning inward in search of a 'soul' as a way to foster creativity and to motivate leaders" (Galen, 1995, para 2).

Workplace spirituality, according to Duchon and Plowman (2005), is defined as a workplace that recognizes that employees have an inner life that nourishes and is nourished by meaningful work

that takes place in the context of community. Other authors have explored spirituality in the workplace (Bell & Taylor, 2004; Carroll, 2013; Duchon & Plowman, 2005; Fry & Kriger, 2009; Lips-Wiersma & Mills, 2002). These authors, among others (Ashmos & Duchon, 2000; Dehler & Welsh, 2003: Gibbons, 2001: Kinjerski & Skrypnek, 2006; Mitroff & Denton, 1999), show spirituality at work as being comprised of three components: the inner life, which refers to human self-concept; meaningful work, which refers to work content; and community, which concerns the working context.

In their study on 'Nurturing the spirit at work: Impact on work unit performance', Duchon and Plowman (2005) note that work-unit leaders likely have an impact on the degree to which work units acknowledge and encourage issues of spirituality. Workers want to be involved in work that gives meaning to their lives (Ashmos & Duchon, 2000). Significantly, work becomes more meaningful when there is a connection between the worker's roles/job and their values.

Working in Addiction Recovery
Alcohol and drug counsellors are responsible for providing confidential addiction counselling, education and support to the individuals presenting with addiction(s) or addictive behaviour and may also be required to provide support to the family and the wider community (Alcohol and Drug Counsellor, 2005).

The type of work that a person chooses is significant for several

reasons; work is good for our health and well-being and contributes to our happiness, confidence and self-esteem. It is an integral part of our existence and identity and thus cannot be easily separated from the rest of one's life. According to Gini (1998), the business of work is not simply about producing goods, "but also to help produce people" (p. 708). Gini states that people need work and, in turn, develop their identity and are identified by the work they do. He concludes by stating that people need to be careful about what they choose to do for a living; for what we do is what we will become. Choosing well generally means deciding on a line of work that will lead to happiness because happiness leads to and fuels success. When a person is positive, their brain is more motivated, engaged, creative, energetic, resilient and productive (Action for Happiness, 2016).

What is it that could provide meaning or purpose or add to a person finding meaning or purpose in their role as an addiction therapist? Victor Frankl (2006) a psychiatrist and Holocaust survivor believes that the search for meaning is the most important aspect of a person's life; it is not the destination that matters, rather, it is the journey that is important. Highlighting this, students from the Johns Hopkins University in Baltimore, Maryland, US, were asked what they considered to be central in their lives. Some 78 per cent answered that finding a purpose and meaning in life was most important to them (Bulka, 1997).

Howden (1993) informs us that purpose is the process of searching for or discovering events or relationships that give a sense of worth, or reason, for our existence. The treatment centre or the therapist's workplace is,

like other workplaces, a place that provides connectedness to others or the self (Conger & Elder, 1994). This connection could be viewed for some as replacing what used to be experienced in churches, with extended families and local social groups that may no longer exist.

Pratt and Ashforth (2003) suggest that meaning is a subjective sense that people make of their work. According to Baumeister and Vohs (2002), meaning is a tool used by individuals for imposing stability in their life - something lacking in the life of an addicted person. Baumeister (1991) suggests that as people's work lives evolve, they strive to fulfil needs for purpose, values, efficacy and self-worth. Thus, people look for a purpose and often a deeper purpose in their work.

Some addiction therapists garner meaning at work from the impact of Eastern philosophy (Brandt, 1996). Where mindfulness is offered as a way of living and working, it provides an opportunity to reflect on values and what it is that brings meaning to one's life. Mindfulness and values-based approaches can contribute to a therapist finding psychological support in differential troublesome situations (Hayes, Follette & Linehan, 2004).

A possible struggle for the addiction therapist finding meaning in their work is the financial value put on the therapist and this can lead to a feeling of demoralisation (Brandt, 1996; Hamal & Prahalad, 1994; McWilliams, 2014; Osborn, 2004).

Some addiction therapists accept that spirituality is not religion and the two should be regarded as separate entities and can be treated and used differently (West, 2000). Irrespective of faith and/or beliefs, practices and or spirituality of the therapist, or indeed if the therapist does not identify with any of the above, it is important to be

*W*here mindfulness is offered as a way of living and working, it provides an opportunity to reflect on values and what it is that brings meaning to one's life

aware of the influence of Church, faith practices or spirituality in his/ her life (Rusinova & Cash, 2007). Spirituality for some therapists can be more far-reaching and broader than religion. Counsellors have the knowledge and experience to know that people struggling with addiction can change and recover because spirituality offers healing and is essentially about recovery (Booth, 2012) or can have improved treatment outcomes (Carter, 1998).

The change or recovery occurs when spirituality impacts on the therapist's life due to a turning point or because of the protection and support from a higher power. The change can also occur because the counsellor is grateful to be of help to those seeking recovery (Arnold, et al., 2002).

Spirituality for some therapists can include a 'higher power' that encompasses love and compassion of the self and others (New Hope Recovery Centre, 2014). Some addiction therapists believe incorporating spirituality into the recovery process offers themselves and the client social support, optimism, and the ability to manage and deal with stress, anger and sadness and also help with conflict resolution - all of which contribute to a positive result (Corrington, 1989 & Pardini, et al., 2000). There are addiction therapists who, in a variety of ways, show their ability to be fruitful and rich in their therapeutic work, as well as having positive results being creative, generative, and compassionate, connected to people as well as being supported and enriched by different experiences that they have had.

Self-care is often referred to as a necessary and beneficial part of working in counselling and some therapists find nature and mindfulness soothing. Likewise, benefit can also be found in 'supervision', which is a place where counsellors are psychologically supported (Hayes, et al, 2004).

Some counsellors maintain that spirituality significantly influences both the addict and themselves in their ability to live responsibly (Dilorenzo, Johnson and Bussey, 2001). When this is experienced, some therapists believe they should talk about and promote spirituality as a way of getting into recovery (Newport, 2011 & Dossey, 2000).

Workplace spirituality (not religion) can, according to some therapists, nourish them and their work because they view their work as 'meaningful' (Duchon & Plowman, 2005). Likewise, some addiction counsellors may find they are impacted by the support that is often present in group and community settings where people are on similar journeys. These therapists also suggest that their own spirituality and life is impacted by what they experience in their work (Bell & Taylor, 2004; Fry & Kriger, 2009; Dehler & Welsh, 2003, and Kinjerski & Skrypnek, 2006).

Similarly, some addiction therapists note they are aware they are impacted by spirituality through discovering or rediscovering "their own purpose and core values, [and by exploring] the negative consequences of the addictive behaviour on these values" (Treloar, Dubreuil & Miranda, 2014, p.38), or by developing behaviours "that

support the identified core values" (Treloar, Dubreuil & Miranda, 2014, p.38), whether it is the addicted person seeking recovery, or the therapist, working through issues/ difficulties in the recovery process of addiction. The impact also includes being productive and constructive. Some counsellors find that because of the impact of spirituality they are able to work in the challenging area of addiction therapy and their work is significantly enhanced by it.

Conclusion

Addiction therapists are generally happy in their roles and their work (Howden, 1993; Pratt & Ashforth, 2003), which in turn provides them with meaning and purpose in their life (Frankl, 2015). Work is not just about the business of therapy, but about people and helping people (Gini, 1998). Addiction therapists have a purpose in life that gives them a sense of worth that is impacted on and helped by spirituality (Howden, 1993). Therapists are connected to other people and their workplace provides this connectedness (Cogner and Elder, 1994). Being connected to other people gives therapists meaning and this meaning is enhanced by the spirituality that they experience in their workplace and in their work. While this is subjective (Pratt & Ashforth, 2003), this spirituality appears to give therapists stability to be able to work in the field of addiction and to want to continue to work in the field.

Spiritual understanding, knowledge and competence among addiction therapists enhances their effectiveness when working with individuals struggling with addictions or who are moving into recovery (Treloar, Dubreuil & Miranda 2014). When the therapist has the ability to provide an open, non-judgmental and compassionate environment when working in the area of addiction treatment, spiritual understanding, knowledge and competence seems to increase the ability of the addiction worker to help the addicted person.

According to Treloar, Dubreuil & Miranda (2014): "When working in the area of addiction treatment, spiritual competence may increase the ability of the provider to help the client to discover or rediscover their own purpose and core values, explore the negative consequences of the addictive behaviour on these values, and to develop behaviours that support the identified core values" (p. 38). This would seem to suggest that if the addiction therapist has not considered their own spiritual understanding, knowledge and competence, or if they believe that spirituality is not of importance, when the client does, the therapist may not be able to fully address their client's needs and may not be aware of the impact on themselves as a worker and as a person. ☾

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