

Brief Report

‘Something Drew Me In’: The Professional and Personal Impact of Working with Spirituality in Addiction Recovery

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Abstract: This research addresses the impact of working with spirituality from the perspective of the addiction worker with five separate interviews conducted with people who have been working in the area of addiction for ten years or more. Interview transcripts were analysed using qualitative thematic analysis. Three themes emerged, the findings of which indicate that there is an impact on the addiction worker when spirituality is part of the recovery process. The themes that emerged are (A) Being Constructive (B) Productivity and (C) Managing Therapeutic Ruptures. The findings pose important implications for training and supervision of people involved in addiction work in that there needs to be an openness and awareness around spirituality whether the worker believes in it or not. The findings show that when spirituality is part of the recovery process, it enables the addiction worker to deal with and manage all issues that arise with the person with the addiction, as well as enhancing the work and life of the worker. Most striking across the five participant’s transcripts was their ability to engage in the difficult work of addiction along with the opportunity that the participants have for personal and professional growth in their work and in their own spiritual life.

Keywords: addiction; spirituality; religion; addiction worker; recovery

1. Introduction

Spiritual understanding, knowledge and competence among addiction workers has been shown to enhance their effectiveness when working with individuals struggling with addictions or who are moving in to recovery (Treloar et al. 2014). Religion can be defined according to Rusinova and Cash (2007) as “an organized system of beliefs and rituals associated with an institutional structure” (p. 252) whereas the proposed working definition of spirituality ‘is the dynamic dimension of human life that relates to the way persons (individual and community) experience, express and/or seek meaning, purpose and transcendence, and the way they connect to the moment, to self, to others, to nature, to the significant and/or the sacred’ (Nolan et al. 2011). The National Centre on Addiction and Substance Abuse (2015) at Columbia University finds connections between Spirituality and Addiction and tell us that more than 80% of Americans believe in God or some other greater power and that adults and adolescents who attend religious services regularly are less likely to use illicit drugs, tobacco or alcohol (2015). Health care workers have also been demonstrated to believe in the power of spirituality and/or religiosity to influence the course of medical and psychological interventions as well as the rate of recuperation from chronic illnesses (Feher and Maly 1999; (Ross 1999) from (Piedmont 2001)).

Clients in addiction treatment speak of spirituality in terms of a turning point in their lives, protection and support from a higher power, guidance of an inner voice, life meaning, gratitude and service work with others seeking recovery (Arnold et al. 2002). The depth of this spirituality grows or develops with the length of recovery (Jarusiewicz 2000) and produces a wide range of

benefits; a spiritual orientation to recovery is associated with a higher quality of life, life contentment, optimism, social support and lower levels of stress and conflict (Pardini et al. 2000). Most clients in treatment recognise the benefits of spirituality in long-term recovery (Laudet et al. 2006) and support the availability of spiritual components of treatment (Arnold et al. 2002). A systematic review suggests that the onset of an illness may render the individual, regardless of belief to realize the lack of control over his/her life. However, the review demonstrated that religion and spirituality are usually, although not always, beneficial to people in dealing with the aftermath of trauma and that positive religious coping, religious openness, readiness to face existential questions, religious participation, and intrinsic religiousness are typically associated with posttraumatic growth (Shaw et al. 2005).

For many who work in the addiction treatment field, the use of spiritual concepts in the treatment of alcohol and drug addiction is seen as the clearest demonstration of the value of spirituality and this construct is seen as the central curative factor in recovery (Marie 2007). White et al. (2001) set about measuring spirituality to determine whether higher power levels of spirituality were associated with indicators of successful recovery from alcoholism. The results indicated that spirituality is an important element in recovery and support the concept of including the practice of spirituality as part of recovery programme. Other research has shown that increased spiritual practices have been associated with improved addiction treatment outcome (Galanter et al. 2007), that spirituality has played a role in maintaining treatment gains (Koski-Janus and Turner 1999) and that recovering individuals show more evidence of spirituality than those who relapse (Jarusiewicz 2000).

Workplace spirituality, according to Duchon and Plowman (2005), is defined as a workplace that recognises that employees have an inner life that nourishes and is nourished by meaningful work that takes place in the context of community. Work becomes more meaningful when there is a connection between the worker's roles/job and their values. According to Gini (1998) the business of work is not simply about producing goods, "but also to help produce people" (p. 708). Gini goes on to tell us that people need work, and as adults they get their identity and are identified by the work that they do (1998). The treatment centre or the addiction workers' workplace is experienced as being based on a connection to other people (Conger and Elder 1994). This connection seems to replace what used to be experienced in churches, with extended families and local social groups which for some people no longer exist. Some addiction workers find meaning at work around the impact of eastern philosophy (Giacalone and Jurkiewicz 2003), where mindfulness is offered as a way of living and working giving the worker opportunity to reflect on their values and what gives meaning to their life. Mindfulness and values-based approaches can contribute to addiction workers finding psychological support in different difficult situations (Hayes et al. 2004). A struggle for the addiction worker in finding meaning in their work is that there continues to be a difficulty in Ireland around the financial value that is put on the addiction worker, leading to demoralisation in the workplace (Mc Williams 2014; Osborn 2004).

An overall aim of this study is to examine the addiction worker's awareness of the role of spirituality with the addicted person and the impact this may have both on the professional and personal life of the addiction worker. In other words, this research attempts to elucidate on the phenomena of spirituality and how it is experienced by addiction workers, in their work and in their wider life.

2. Materials and Methods

This study was conducted using an exploratory qualitative design. This qualitative research project focuses on exploring the impact on the addiction worker as they work with their clients in the process of recovery with the issue of spirituality in the Irish context. The small sample size of five addiction workers permits an in-depth analysis of participant's responses. Utilising the mode of semi-structured interviews facilitated an open-ended investigation of the viewpoints of professional addiction workers who have been for over ten years working with clients who have addiction issues.

The researcher used qualitative thematic analysis to identify patterns and themes that would inform the data and research findings. In this research there is value put on the participants' personal

involvement and partiality' (Braun and Clarke 2013, p. 4). The local contexts are not taken out but are very much taken in to account (Miles et al. 2013, p. 11). The final written report includes the voices of participants, the reflexivity of the researcher, a complex description and interpretation of the problem, and a contribution to the literature or call for change (Creswell 2013). The researcher chose qualitative research because it has proven to be an effective, engaging and flexible method of research as it provides an in-depth exploration of an area of human experience (McLeod 2001). Participants were asked to share their understandings and experiences of religion and/or spirituality in their work and life and the impact on them during a semi-structured interview.

2.1. Sampling

The sampling for this research study consisted of people who have been involved in the field of addiction work for at least 10 years, to take advantage of their wealth of experience during this time period. Participants were recruited by contacting different treatment centres throughout Ireland. The participants of this research were of mixed genders and diverse backgrounds, some of whom were recovering and non-recovering. The roles of the five participants included an in-patient coordinator; a psychotherapist, an addiction therapist and supervisor who also worked with families, a poly-drug coordinator and family worker and finally a treatment manager of an addiction agency. It must be acknowledged that with a sensitive subject like spirituality usually people with a greater spirituality express interest in participation and so this sample is not intended to be generalizable to the wider 'addiction worker' population. It is also recognised that the range of professions included in this study is not homogenous and individual exposure to the client groups will vary; however the therapeutic relationship which is the focus of this study is universal to all of the mentioned professions and not dependent upon role responsibility.

2.2. Data Collection Method

Five semi-structured interviews were conducted with participants at various sites. The interview process of this research study was conducted in 35–45 min. In interviewing the participants, the researcher's aim was to explore and gather information from the participants about addiction, recovery, spirituality and the impact on them as they work in the field of addiction. The researcher was hoping to explore the shared meaning of people who are addiction workers (Rubin and Rubin 2012). The interviews were recorded using a digital voice recording Dictaphone and transcribed fully for analysis.

2.3. Data Analysis

The researcher used Thematic Analysis as this allowed for an accessible and theoretically flexible approach to analysing qualitative data (Braun and Clark 2006, p. 77). Thematic Analysis is " ... a method for identifying, analysing and reporting patterns (themes) within data" (Braun and Clark 2006, p. 79). The approach the researcher followed in doing the Thematic Analysis is the six stages or steps approach of Braun and Clark (2006, p. 87). After coding and initial themes were identified, three themes were finally established to represent the participant's narratives.

2.4. Rationale

The researcher has found that to date the majority of research tends to be focussed on the person with the addiction and the impact of spirituality therein. The researcher was unable to find any research about spirituality in the recovery process and the impact on the addiction worker in any (Irish) context.

2.5. Ethical Considerations

All subjects gave their informed consent for inclusion before they participated in the study. The study was conducted in accordance with the Declaration of Helsinki, and the protocol was

approved by the Ethics Committee of Dublin Business School. The ethical considerations for this study were to ensure that it was inclusive of informed consent and that confidentiality would be maintained throughout. The names and details of the participants have been anonymised. All participants were asked to read and sign an Information Form and a Consent Form prior to conducting the interview. All recordings, notes and transcripts of the interviews were kept in a safe and secure environment. All participants had a right to withdraw from the study at any time prior to submission.

3. Results

3.1. Theme A: Being Constructive

All participants acknowledged their own personal spirituality and would recognize that this developed out of the religion/faith that they practised. This shows that for them to be personally 'constructive' meant to be able to improve in order to promote further development or advancement to become more effective for themselves and others. The way participants see and experience their own spirituality, the way that they separate religion and spirituality and the way that they experience the person they are working with in addition, all impacts upon them through 'being constructive'. The participants as a result therefore are able to change and adapt to whatever is presented to them in their work (and life). They are also able to promote further development enabling them to be more effective for others and for themselves.

Sinead stated,

"I suppose for myself, I would have evolved from being religious when I was younger, to I suppose to being curious about other religions and in particularly spirituality."

Stephen stated,

"Absolutely, my biggest belief is that willpower alone in recovery is like trying to use willpower for diarrhoea it doesn't work. So I think divine intervention is actually what does happen or the penny drops. I put that down to spirituality, there is no such thing as just chance".

Rose stated,

"What brought me to work was my own personal journey, which at the time when I went in to work in the field of addiction was probably I was about 15 years in recovery".

The importance of spirituality for these participants is clearly demonstrated through these vignettes which highlight the place it has in making sense for the participants of their own position in the world and journey of growth through self-development.

3.2. Theme B: Productivity

Being productive for the participants equates to a fruitfulness and richness in how the work is experienced. This is seen by the way the participants are able to engage in the addiction work and sustain the ability to be compassionate. This seems to lead them into a cycle where the impact of spirituality through being productive enables the worker to stay involved in the difficult work of addiction, while being supported and enriched by their experiences. The addiction worker is able to be generative and creative in the work. Stephen in talking about the greatest challenge of working with someone who is in recovery said, " ... engage with their trust ... if I can make that connection I think we can do fabulous work together".

Patrick spoke about the impact on himself about what happens for him as he listens to the many painful stories of the people he works with in addiction showing his creativity and how he can have positive results by 'surrendering', when talking about visiting a 'surrender wall' in Berlin he stated,

" ... something really drew me in there, I had no idea at the time and it was later on when I was training when I reflected back on what had happened and how I felt going in there ... it was about

surrender . . . it was a very emphatic experience very embodied but I couldn't make sense of it at the time but I certainly could afterwards. It was very profound. I have experiences like that regularly".

Mary talked about how she sees her own spirituality and spirituality in general impact on her life. Here Mary shows how having positive results and being generative she is productive she stated,

" . . . to me every single human being, every person I encounter is unique and worthy of being listened to and helped and important and significant in that way".

Spirituality in this sense has allowed participants to enter into a more fruitful collaboration with their clients, established through trust and personal engagement.

3.3. Theme C: Managing Therapeutic Ruptures

The participants were aware, directly and indirectly, of their total emotional response to the person with the addiction which includes the setting and the working alliance. In the context of spirituality, the participants in this study demonstrated their attitude by their conscious, preconscious and unconscious attitudes of spirituality and the impact of this on the therapeutic alliance. This was most evident in the way that participants discussed their attempts to manage potential therapeutic ruptures. Spirituality ranked high in this regard, acting as a form of support for participants in containing often delicate therapeutic alliances.

When the client acts out through regression in their recovery journey, the worker can become depressed or angry or feel guilty due to having an unconscious sense of failure. The addiction worker can feel shattered as they discover that they are not in complete control of the work. Sinead for example stated,

"Working with people in recovery from addiction, you know, sometimes they can be doing very well . . . I am doing good work here . . . come back a few weeks later and it's all gone to pot again . . . counter-transference where I might feel frustrated with them . . . that I might be disappointed and sometimes I can, I suppose it shows".

Later Sinead in talking about how her work impacted on her life she said,

"I think if I've had a very good session with a client and all is going well, and you know, even if they have talked about the bad week they have had and worked it through and I still, I can come out of the room feeling quite positive and feeling I suppose empowered in my work. At other times then, I suppose, I would carry the trauma sometimes".

However, Rose's comment below as she talked about her own personal journey into recovery, gives us insight, into what an addiction worker has to work with when the person with the addiction wrestles with things going wrong and the place that spirituality can have in managing this,

"When I was drinking that I did not have the capacity to love I did not have the capacity to have compassion for anybody else. I didn't care about anybody else, I didn't care about my husband or child. I was able, I will make the distinction I wasn't able I was distrustful, full of anger rage and my spiritual journey is about being able to live with human qualities of caring beginning to know how to love again I was about 7 years sober before I even knew what love was. I didn't know so there is a lot of destruction on the human being on all of those aspects".

In this sense, Rose is able to draw upon her own spiritual journey to help her manage the often difficult aspects of working in recovery.

In summary, the above rich data illustrated that addiction workers, those who are in recovery themselves and those who are not, see spirituality as a value in the recovery of a person who is addicted. Spirituality is an important element in recovery and including the practice of spirituality as part of a recovery programme. The data also illustrates that the addiction workers have an inner life that nourishes their work and which sustains them in the work of addiction.

4. Discussion

In the theme of 'Being Constructive', the participants are impacted by the way they see and experience their own spirituality, the way that they separate religion and spirituality (West 2000) and the way they experience the person they are working with in addiction. This co-construction allows the participants to change and adapt to whatever is presented to them in their work (and life) (Booth 2012). They are also able to promote further development, thus enabling them to be more effective for others and for themselves. In this way, spirituality can be a catalyst of recovery initiation and as recognized by White and Laudet (2006) can be used as a protective shield in early recovery and as they also identify, as an increasingly significant dimension of long-term recovery maintenance. As such, spirituality is a valid area to explore in the assessment and service planning processes.

The second theme of 'Productivity' highlights the sense of fruitfulness and richness that the participants have in their work. This productivity enables them to engage in the addiction work and have the ability to be compassionate (New Hope Recovery Centre 2014). With this, they are able to be generative and creative in the work (Pardini et al. 2000) and the impact of spirituality through being productive is that they are enabled to stay involved in the difficult work of addiction (Duchon and Plowman 2005), while being supported and enriched by their experiences (Bell and Taylor 2004; Fry and Kriger 2009).

In the third theme of 'Managing Therapeutic Ruptures', the participants illustrated their attempts to manage the often strained therapeutic alliances in addiction work. Participants were aware of their total response to clients (Davidson et al. 1997) and despite the challenges that were inherent in this; they were able to draw upon their own internal strengths which included spirituality to sustain themselves within the work. The participants in this study show their attitude by their conscious and unconscious attitudes of spirituality and the impact of this on the therapeutic relationship.

5. Conclusions

This study was conducted using an exploratory qualitative design. The purpose of the study was to explore and understand how addiction workers can be impacted on by working in the area of addiction recovery in the area of spirituality. All the participants were reportedly happy in their roles and their work. Frankl (2006) from his painful and difficult experiences and Foroux (2015) refer to how their roles and work gave them meaning in their life and was not just about the business of work but about people and helping people (Gini 1998). This is the case with the five participants in this research; it is clear from what they say, that they are interested in people who are addicted and helping them and this impacts on them by giving them meaning in their lives. Howden (1993) said that;

'People have a common desire to find a deeper purpose, or meaning in their lives and in their work. This perceived sense of purpose may derive from the intrinsic qualities of the work itself, goals realized or sought values and or the beliefs that work is thought to serve'. (p. 4)

The participants in this research showed they had a purpose in life that gave them a sense of worth where they were impacted on and helped by spirituality. The participants were connected to other people and their workplace was a place where they experienced this (Conger and Elder 1994). This gave the participants meaning. This meaning is enhanced by the spirituality that they experience in their work place and in their work. As Pratt and Ashforth (2003) point out from their research, this is subjective but it seems to give the participants in this study the stability to be able to work in the field of addiction and to want to continue to work in this field. The participants talked about what enables them to continue to be involved in this work and referred to self-care through retreats and mindfulness or simply being in nature. Hayes et al. (2004) write about this in their study where mindfulness is seen and experienced through acceptance, values, spirituality, being in a relationship, focusing on the present moment, and emotional deepening.

Treloar et al. (2014) tell us that spiritual understanding, knowledge and competence enhance the effectiveness of a worker. In another study by McSherry and Jamieson (2011), findings indicate that

attending to the spiritual needs of patients enhances the overall quality of care. However, despite all the attention given to the spiritual dimension, the majority of healthcare workers still feel that they require more guidance and support from governing bodies to enable them to support and effectively meet their patients' spiritual needs (Baldacchino and Draper 2001). For the participants of this study, spiritual understanding, knowledge and competence did enhance their effectiveness when working with individuals struggling with addictions or who are moving to recovery. When 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 seems to increase the ability of the addiction worker to help the user/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 et al. 2014, p. 38). This would seem to suggest that if the addiction worker has not considered their own spiritual understanding, knowledge and competence, or if they believe that spirituality is not of importance when the addicted person does and so is not important for treatment, that addiction worker may not be able to address the addicted persons needs and may not be aware of the impact on themselves as a worker and as a person. It is a recommendation of this study therefore that there is the need for spiritual education with healthcare workers especially in the field of addiction. This is line with a recent study which advocates for the above alongside further research, using rigorous approaches, examining the benefits of teaching approaches (Timmins and Neill 2013).

6. Study Limitations

Due to the choice of qualitative data for this study, it must be considered that the analysis of data is not objective and there is potential for bias and misrepresentation. The sample used is a small one and not homogenous and so no claims to generalisability are being made through the results of this study. As the professional roles across the sample varied, it is unlikely that data saturation point was reached. Further research might consider looking at just one profession and their experience therein. It must also be acknowledged that with a sensitive subject like spirituality usually people with a greater spirituality express interest in participation and so this sample is not intended to be generalizable to the wider 'addiction worker' population. Finally, in terms of the available literature, it must be noted that the most pertinent literature relating to this topic dates over ten years. This is a shortcoming in terms of being able to draw upon relevant up-to-date material but also a justification for further research to be carried out in the area of the impact of spirituality on the addiction worker.

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