Narcotics Anonymous: Understanding the "Bridge of Recovery"

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ABSTRACT Psychoactive substance addicts usually belong to a drug sub-culture which runs counter to the prevailing culture. Narcotics Anonymous (NA) is considered as a sub-culture of recovery bridging the drug sub-culture and the prevailing culture. Based on a phenomenological study of NA in Israel, certain components of the recovery sub-culture are described: sobriety as an innovation; recovery as a basis for value systems and behavioral norms; the language and rituals of recovery; social situations, role definitions and actions related to recovery. It is argued that NA, as a sub-culture of recovery, serves both as a bridge to society as a whole, and also as a shield from its influence. Since the study was conducted in Israel, it implies the inter-cultural attribute of NA's values, significance and methods. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworthpressinc.com]

Drug addiction is an illegal behavior, one which is considered deviant and usually involves other illicit behavior. Probably due to the illegality of marketing and consuming drugs, drug addiction is interrelated with criminality (Abadinski, 1989). Addicts contending on a daily basis with addiction experience it in the form of specific relations with the outer world (Denzin, 1987a), which place them in a distinct location beyond this world. Addiction and drugs permeate the entire structure of the addict's life and stigmatize it. Partly as a result of societal reactions to drug abuse, addicts form a special sub-culture—the drug sub-culture (Waldorf, 1973).

While the drug sub-culture protects its members from society as a whole, it also encourages their addictive behavior.

Originally, the idea of a "sub-culture of deviance" assumed a way of life defined as the negative pole of predominant norms and values (Cohen, 1955). Sub-cultures borrow several elements from society as a whole, reworking them into distinct forms with appropriate meaning (Downs & Rock, 1982). These elements are available to everyone (e.g., hedonism, violence, excitement), but within the sub-culture they acquire extraordinary importance and are engaged in regularly by its members.

One crucial condition for the emergence of a new cultural form, such as the drug sub-culture, is the existence of several actors undergoing similar problems of adaptation and effective mutual interaction. Thus, creating a sub-culture provides a solution for their social problems (ibid.).

While previous theories of sub-cultures are considered functional, newer theories (mostly British) derive from the conflict tradition. The delinquent was transformed by these theories from a "frustrated social climber" into a cultural innovator and social critic (Cohen, 1981). Sub-cultures became a field of combat between cultures and classes.

Johnson (1980) describes the motivation for innovation as one of the primary contributors to the creation of a drug sub-culture. In order to win group approval, members of the peer culture initiate behavior deviating from the norms of the prevailing culture. When such behavior wins the approval it seeks, it serves as a model for other members, and thus defines new norms of the sub-culture. Based on innovations, these norms contravene the prevailing ones.

The terms "culture" and "sub-culture" relate to the existence of systems of meaning—a symbolic meaning, known and agreed, which transcends physical, biological or teleological properties (Shapiro & Ben-Eliezer, 1989). It is manifested by several elements defining a sub-culture (Johnson, 1980): values, behavioral norms, social situations, language, rituals, role-definitions and actions. In the drug sub-culture these elements are related directly to substance use and abuse. They are responsible for shaping members' behavior towards aggravation of the abuse.

Socialization into the drug sub-culture places addicts directly in the drug market, both as consumers and traders (Waldorf, 1973). But it also intensifies their alienation, and affects the recovery process. Even if addicts become temporarily 'clean,' socialization forces them towards continued addiction. Thus the recovery process requires a new form of socialization with a different orientation.

Narcotics Anonymous (NA) is the largest worldwide self-help organization for drug-abusers and substance-dependents (Peyrot, 1985).

Derived from the ideology and pragmatic principles of Alcoholics Anonymous (AA), its "Twelve Step" program can be construed both as a spiritual program and a way of life. Successful participation in NA should lead initially towards a substance-free life (any substance, including alcohol), but also towards a lawful and honest life, devoid of crime and violence, and based on firm faith in a "Higher Power."

It may safely be assumed that most members of NA (unlike those of Alcoholics Anonymous) have a history of involvement in criminal behavior (Terry, 1996). Thus, the process of recovery from active drug addiction must also relate to law-breaking behavior and directly encourage its cessation.

Although sub-culture theory usually analyzes and explains the formation of deviant behavior among groups of individuals, our aim here is to describe how a sub-culture may also contribute to the recovery process. We assume NA to be such a sub-culture of recovery, composed of those elements of the drug sub-culture; in NA, however, they act in the opposite direction. Thus NA, as a sub-culture of recovery, functions as a bridge between the drug sub-culture and society as a whole. It symbolizes the conclusion of the previous combat. Since drug addicts were formerly alienated from the prevailing culture, bridging between the opposing poles is perceived here as crucial for a complete recovery process.

METHOD

Qualitative methods that delve into local particular meanings, language, beliefs, etc., are necessary to adequately understand and study individuals and groups. (Borkman & Schubert, 1994, p. 52)

This research uses qualitative techniques (Cicourel, 1964) such as process analysis, based on participant observation, open-ended interviews, and informal conversations with NA members. Adhering to the phenomenological tradition, our emphasis was on the subjects' intentions and meanings, i.e., their own perceptions of social and personal processes (Bruyn, 1966; Polkinghorne, 1987). The aggregate of these conveys the group's worldview and is at the core of what is important to group members (Kennedy & Humphrey, 1994).

Special attention was paid to the naturalness of the research design (Tunnell, 1977). Our dependent variable was the natural behavior, meanings and intentions of the subjects, within their natural environment. The independent variable was the natural process of participating in NA. To safeguard naturalness as well as NA's anonymity, only short notes were taken during participant observations and most of the interviews. Full

reports were written afterwards. The need for anonymity precluded taping, except for sobriety anniversaries, where it is customary to record the sharing.

The subjects in this inquiry were Israeli NA members, mostly resident in the Tel Aviv area, where most NA activity takes place. During the period of the study, in-depth observations were made in a particular Tel Aviv group, one considered to be very popular among members from throughout the country. Other groups in the area were also observed, but less continuously.

Participant observations were made in over 300 meetings, during the years 1991-1993. They elicited data via the "inquiry from the inside" method, whereby the researcher acts as one of the subjects and describes social interactions which he experienced personally, to some extent (Evered & Meryl, 1981). Thus the researcher joined an NA group, and participated in all its activities, including serving NA, studying the steps with a sponsor, and sponsoring others.

Various kinds of NA meetings were observed:

- Open meetings (open to the public)
- Closed meetings (for addicts only)
- "Group conscience" meetings (for group decisions)
- National Service Committee meetings
- Small informal "home" meetings
- "Step" meetings (where members study the steps with their sponsor)
- Social meetings in cafés, NA marathons and parties.

A further 21 open-ended interviews were conducted. Some of these were regular conversations in non-interview settings. Most NA attendees who were asked to take part in the study expressed considerable suspicion and refused. Hence those interviewed are attendees who agreed; however, after considerable time spent in NA meetings and in informal activities with NA members, the importance of the interviews decreased.

RESULTS

Narcotics Anonymous in Israel

NA was introduced to Israel in 1984, by two Israeli addicts who became familiar with it in the USA. Its initial stages were marked by constant

struggles. One of the co-founders OD'd, while the other had a long relapse. Most of the first attendees showed up only a few times and then regressed into active addiction. However, it became clear to us in NA meetings that many of these pioneer members have returned to NA after additional periods of active addiction.

The first group consisted of a small number of addicts, of whom only a few were in recovery. They met in private homes—informal meetings which followed no particular format. Eventually they obtained support from Tel Aviv's Mayor and were allowed to use a municipality room. Since this beginning, the misgivings of the authorities decreased, and a growing number of municipalities have allocated public rooms for NA meetings. After several troubled years, NA's growth has stabilized.

NA is currently well disseminated throughout Israel. Close to two hundred groups operate nation-wide, and membership is estimated at 3,000-5,000, mostly male. In the meetings we observed, the average number of men participating was three to four times greater than that of women.

NA in Israel operates a National Service Committee which annually sends a representative to the NA World Service Committee. The "Big Book" of NA (Narcotics Anonymous, 1988) has been translated to Hebrew and serves as the basic text for members. The groups' structure, their meetings and the "Steps work" are followed as they are in the USA, without having been modified or adapted for local addicts (Ronel, 1995). The overall perception of Israeli NA members is that they belong to a world-wide fellowship.

In Israel, NA is far more active than AA. We encountered some AA veterans who became active in NA because they perceived it as "more authentic and more alive" than AA. We also witnessed some over-eaters who preferred NA to OA meetings. A considerable number of (mostly veteran) members admitted to simultaneously participating in NA and OA activities. This sub-group, consisting of influential figures in NA, introduced to NA the food-addiction message of OA, which resulted in NA members abstaining from certain food products, as well.

Most treatment units for substance-abusers in Israel are governmental, or supported and supervised by governmental authorities. Those units apply conservative professional methods—Methadone maintenance, group and individual psychotherapy based on behavioral-cognitive or dynamic approaches, as well as therapeutic communities combining professional care with self-help methods. However, in recent years, NA Israel has won growing professional recognition and approval. In any professional unit dealing with substance-abuse, clients are referred to NA meetings in the

community. Most units employ recovering addicts as drug-counselors who liaise between the unit and NA. There are also two private units following the "Minnesota Model" (Cook, 1988), which apply the 12-Steps as their main technique. (On the differences between treatment techniques and values see: Humphreys, 1993.) The "Recovery Movement" as a social movement (Room, 1993; Riessman & Carroll, 1995) is still, however, in its infancy here.

Sub-Culture of Recovering Addicts

Innovation

One of NA Israel's unique features is the fact that members throughout the country are acquainted with each other. Probably as a result of Israel's relatively small population, NA members know each other well from their periods of active addiction and their criminal past. This fact often helps newcomers in the affiliation process.

A typical example is the member who met an old friend in his first meeting (Interview 4):

I hadn't seen him for almost two years. I was sure he'd already OD'd, but suddenly I saw him here, sober and looking well . . . Much better than myself! . . . We used to use together. I realized that if he could make it, I can make it too. I wanted to follow the same path as his, so I stayed here. . . .

This meeting set a new challenge to the newcomer—the challenge of sobriety. As a result of their common background and the identification process (Robinson & Henry, 1977), his old friend served him as a model for innovation in an unforeseen direction—that of recovery.

In NA the innovation is located towards the end of the deviance, i.e., a process of recovery from active addiction and from criminal and deviant behaviors. The more members demonstrate progress towards recovery, the more they are considered as suitable peer-models. In group meetings, when members presented their message of recovery and spirituality, their sharings were the most approved. They win social reinforcement for their innovation, which in turn encourages them and their peers in the common struggle for recovery.

The case of I. (Interview 17, held in prison) presents the need for innovation. A well-known former criminal, ranking high in the delinquent sub-culture, he became clean and adopted the NA way of life. He was later jailed for previous offenses. Social peer-pressures meant that remaining clean and adhering to NA's principles in jail would not be easy. As an

inmate, his expected role was to comply with criminal norms. The way of NA, however, is different: I. became an innovator, supported by the NA program and fellowship. He formed NA groups in his prison, established "clean cells," and cooperated with the prison authorities. After constant struggles, he managed to win the approval of the prison authorities and inmates alike, and eventually spread his message of recovery in other jails.

Cultural Conflict

In their sharing of personal stories, NA members repeatedly describe the internal conflicts generated by the transition from the drug sub-culture to a new sub-culture which embraces many of the prevalent society's norms. For example, in the last moments of a meeting devoted to the issue of honesty, presenting it as a desired quality, a young member said (unrecorded observation):

I've been clean thirty days already. I thought that if I get clean I'll feel good, but I don't feel well yet. I didn't know why. Today I understood. All this period I kept on being a thief and a burglar. But today I learned that I must stop it, if I want to feel better.

In the process of ending the deviance, several of the newly-adopted values and norms contradict those of the delinquent sub-culture. Members who formerly acted against the prevailing norms of society, must now act in opposition to those of their former sub-culture. They must stop committing offenses. As members often note, this is a difficult task. The role of NA fellowship in supporting this process, while serving as a bridge between opposing cultures, is considered crucial by members.

Since NA bridges two opposing cultures, it gives space to values and norms from both poles (unless they conflict with those of NA itself). Co-existing contradictory values and norms may be encountered, but none of them conflict with NA's definition of recovery.

An extreme example is that of a member employed as a counselor in a rehabilitation unit, who stated that, if he heard a fellow-member confess in an NA meeting to a murder, he would not report it. The act of murder related to the other's recovery, not his own. In adhering to NA's tradition of anonymity, his own recovery would be unimpeded. This is considered as more important. We see here how the old norms of the criminal sub-culture, which required non-cooperation with the law, have interwoven into NA's values.

Declared non-cooperation with the law and distrust of non-addicts typified most NA members we encountered, especially those with criminal backgrounds. This research itself encountered suspicion, despite the researcher's being well-known and having gained members' respect. Suspicions were generated by the idea of research, which is not associated with recovery in NA, nor with the norms of the drug sub-culture.

Another example is the NA member who confessed to his therapist that he had relapsed. The reaction of his peers was typical (unrecorded personal conversation):

You should never tell them the truth. They can't be trusted. They never understand us. You should tell it only in meetings!

However, it was observed that the longer the period of sobriety, the less members persist in this social distinction between "them" and "us." For example, on his eighth anniversary of sobriety, a member shared his proposal that his sponsored-ones should reduce the frequency of their activities in NA after a considerable time within the groups. He also recommended that they engage in social interactions outside NA, in order "to open their minds."

Another member (Interview 13), male, 37 years old, two years of sobriety, revealed his desire to return to the prevailing culture, and get away from the criminal sub-culture. A family member is a well-known, violent criminal and life prisoner; he himself had a violent criminal career, and had served long jail-sentences. The longer his sobriety continued, the more he wanted to conform with middle-class behavioral norms. It motivated him to complete his studies and to work as a counselor in a rehabilitation unit, in spite of the low pay.

Further complicating this account of conflicting values, we observed that, even during their active addiction period, several members were already in conflict with their own norms of behavior. Since they conformed to the drug sub-culture, their behavior contradicted their own value system. For example (Interview 4), one member stated:

I always knew that I'm good. Even when I did very bad things, I knew that it wasn't me. I was led to it. I didn't have the guts to behave like my true nature, to be good. That is why I was caught up in the program. It allows me to be what I am—good.

On the basis of this long-time conflict, NA succeeded in providing a new value system.

Another example is the member who shared that when he was 19, he stolc money from an old man who later died. His conscience troubled him for years. To evade it, he embarked on periods of very heavy drug abuse. Finally, as he began his recovery, he lit a candle in memory of the old man, and asked his, and God's, forgiveness (Observation 38).

The conflict between a former value system and norms (active addic-

tion and criminality) and new ones (recovery and the return to society) may impede the achievement of NA's goal of recovery. NA therefore provides its members with all the components of a sub-culture, which will influence members' lives in the direction of recovery.

These components share several features with the former norms and value systems, thus facilitating the affiliation process, but they never conflict with the goals of NA.

The Value of Recovery and Its Norms

The basic value of NA is recovery itself. Recovery consists of remaining clean and sober, i.e., following a certain way of life and practicing those behavioral norms which assist recovery. Most sharings by members related in some way to recovery. One of the basic mottoes which members hear constantly is: "First of all—recovery!" Since recovery is the primary value, anything contradicting it is rejected.

For example (Observation 21), a newcomer to NA told the group that while paying in a grocery, he received excess change. Some non-addict friends, with him at the time, said he should enjoy the money. He felt ambivalent, however, and submitted the occurrence to his group as a question. The leader's immediate advice was to return the money to the store-owner, because NA's way is one of honesty. Pocketing the man's money was dishonest and counteracted recovery. Since recovery takes first place, by returning the money the member would be assisting his recovery. A week later he reported doing so.

The above accounts reinforce the issues of morality and moral responsibility, which form the basis of AA's and NA's spiritual value systems (for example: Alcoholics Anonymous, 1957; Lehman, 1990). In NA, members identify the moral code of the drug sub-culture as related to the addiction disease. In order to cure it, any approach which originates from the disease must be abandoned. The criminal code is such an approach and is considered to result from the addiction disease (Narcotics Anonymous, 1988).

As a spiritual way of life, the NA program guides its member towards an absolute understanding of right and wrong. Although members are never supposed to attain absolute morality (Kurtz, 1990), this distinction is crucial in the case of recovering addicts, where the tendency or temptation to return to a life style of active addiction still exists. Any relative or unclear moral code, which can enable deviation, may be damaging to recovering addicts and may even lead to relapse. Thus, in accordance with most religious ideologies (James, 1949), NA defines an absolute moral code based on spiritual faith: the good is "God's will," and the bad is the disease, as expressed in the individual's self-centered will.

In order to direct its members towards normative society, NA therefore adopts a moral code which transcends the accepted code—a more extreme one, leaving no room for compromise (Maxwell, 1984, pp. 145). As one member shared (Observation 31):

When I drive 150 kph God doesn't like me, but when I drive 90 kph [the Israeli speed limit], God loves me.

The next account will present this issue further (unrecorded personal conversation): A., a recovering addict, four years clean, aged 33, found himself in an unpleasant situation which recalled his past life—a policeman came to arrest him in his parents' apartment where he was staying. A. was surprised, since he had already cleared up all his previous complications with the law. It transpired that a fine, dating from his active addiction period, remained unpaid. The policeman then noticed that identifying details were missing from the original fine record. Since A. and his family did not seem to be criminals, the policeman made a generous suggestion: "You can claim that you're the wrong man, and they can prove nothing against you!" Although his parents immediately agreed, A. himself rejected the idea: "I can't say that I'm the wrong person. I remember this case now. It was me, and I never paid the fine." Even at the risk of arrest, A. did not want to behave dishonestly, stating: "It is against my beliefs. It is against God's will to lie. Lying comes from our disease, and recovery is based on our being honest. I trust God."

This account may be an extreme example. Actually, when A. himself asked for his peers' advice, most of them told him to lie, in order to save himself from the risk of arrest. Only a minority insisted on strict honesty and on doing God's will. When A.'s case was heard, the judge cited his honesty and helped him resolve the case with the prosecution. For A. it was a successful solution which proved the rightness of following God's will. It also served as a model for others.

As we saw, the shift in the moral code is not an instantaneous event but a gradual one, where members learn the new code via others' experiences and how to apply it in their own lives. Any discrepancy between the prescribed code and the actual code of a member is met with the motto: "Progress but not perfection." Sometimes this motto correctly describes reality, but it also serves as a neutralization technique which members use to justify their continued misconduct. This will be clarified below.

The behavioral norms acting as the rules of recovery are based on NA's value system. As opposed to the drug sub-culture where behavioral norms include using certain substances to achieve the value of mood alteration ("getting high") (Johnson, 1980), in the recovery sub-culture, the primary norm is the non-use of those substances. In this sense, the recovery sub-

culture is a counter-culture of the drug sub-culture. Its justification lies within this opposition, resembling the justification that criminal and drug sub-cultures find in their belonging to a counter-culture opposing the prevailing one. Thus the symbolic meaning and process of being "against" are maintained; this is the direction of the innovation.

When no psychoactive substances are used, one can begin to achieve the value of recovery. Even newcomers, when presenting a clean day, share some of this achievement. The more they progress in the recovery process, the greater the expectations from them to follow certain rules of behavior, as well as to abstain from psychoactive substances.

For example, in her celebration of two years of sobriety (Observation 30), the member described her behavior in her first days in NA as "wild": she would shout, interrupt the meetings and once even turned over a table. Nevertheless, she remained clean and attended regularly, thus conforming to the basic norms, and was considered as recovering. After a while she calmed down, and gradually began to exhibit responsible behavior and to live by the program's suggestions. In this way, she became a model of recovery for her peers (the same observation, other members' sharings).

The symbolic meaning of her behavior as a model was recovery, and the content of this behavior represented the norms of recovery: living a law-abiding life, assuming recommended roles in her NA group, as well as in her private life (job, stable romantic relations, etc.), helping her fellows, adhering to NA's 12 traditions, following NA's 12-step program, and leading a spiritual life.

Supporting Social Mechanisms

Among the various mechanisms which NA implements to help newcomers adjust to its behavioral norms are the language and rituals of recovery. As a sub-culture, NA has its own language. It is based partially on the slang of the drug sub-culture, but also has its own unique contribution which propounds the message of recovery.

Using this language is called "speaking the program." One of its cardinal features is its use of proverbs, mottoes and popular sayings (Bassin, 1984). This unique language is a condensed form of the message of recovery, and is meaningful, easy to remember and often humorous. Use of the language is noticeable in almost all conversations between NA members. It accurately describes the right action, situation or feeling, defines a clear behavioral code, enhances cultural identification and helps reinforce group coherence. When used outside pure NA contexts, it transmits the message of recovery into everyday life-events, helping to shape members' attitudes towards them.

Similarly, NA's rituals extend beyond the group meetings and function as reminders of the recovery approach. For example, members are used to hugging each other in NA meetings. This mutual hugging is also practiced when friends meet informally in non-NA contexts, e.g., in the street. It represents the feelings of intimacy, closeness and caring which typify NA, and is considered one of the gifts of recovery (Gifford, 1988-9). Thus a simple hug reminds members of the value of recovery and the norms expected of them, but also evokes the benefits they stand to win through recovery. In this way, applying rituals outside meetings enhances one's motivation for recovery.

A further element implemented by NA as a sub-culture consists of social situations oriented towards recovery. NA provides intensive, formal social situations facilitating recovery, that is, the everyday formal group meetings. In addition, NA recommends that members avoid social situations which may endanger recovery, such as meetings with active addicts. NA provides its members with an informal social network which enables preferable social situations. This network is significantly larger than that existing in the active addiction period, which was found to be lower than the average (Hawkins & Fraser, 1989). Various researchers have outlined the social networks of self-help groups (e.g., Powell, 1990) and it is beyond our present scope. Its potential for contribution is exemplified in the account of several members who went on a trip together. Their sharing elicited that the simple act of a trip became a day that empowered their recovery via the social situation of spending time together. Similarly, members who worked together shared that work became far more meaningful; it developed into a recovery experience, with spontaneous meetinglike discussions taking place throughout the day.

The primary role definition of NA members stems from their master status of recovering addicts. As was shown in the above examples, this is considered as the most important features. Being a recovering addict means abstaining from substance-abuse and criminal acts. Recovery, though, requires not only abstention, but also actions, and the organization supplies members with deeds to be accomplished. Such behavior is dictated by the various role definitions that a member has at different periods.

The first role definition encountered by NA members is that of new-comers, which implies certain behavior, e.g., continued attendance—"90 days, 90 meetings"—finding a sponsor, and so on. Once newcomers find sponsors, they receive another role definition, that of sponsored-ones, which leads to close contacts with the sponsors, attending "Steps meetings" and beginning to work the 12-Step Program. After three months of sobriety, members are no longer newcomers. They may begin to perform

services for NA, to spread the message among active addicts, and to lead meetings. Some months later, they may become sponsors themselves, thus gaining a further role definition. Finally, at the end of the first year of sobriety, members are considered veteran members, experienced in recovery.

In all the role definitions, the basic demand made of members is that of abstinence. Members are advised to abstain from all mood-altering substances and to stay clean "just for today." Although 'staying clean' implies passivity, it requires in fact an active effort: it is an active performance, more than just abstaining from drug intake. Similarly, members should abstain from any kind of criminal act, and this also requires a conscious effort. For example, one veteran member related his sharings with those he sponsored (Interview 10):

I must be honest with them. Even if I've had a bad day, I have to share it with them. But in spite of this, I didn't use today. I didn't do anything negative. That's a successful day. You've won. And you have to share it with them. They go through the same situations. This is the power we pass on to each other.

As members progress from one role definition to another, they are expected to perform—outside NA—more actions which are considered recovery-related, such as holding a steady job, studying a profession, etc. The innovator who succeeds in such actions has almost reached the other end of the bridge; he has succeeded in conforming, once again, to the prevailing culture's norms and values.

The Limitations of the Sub-Culture

As a bridge trying to integrate two different worlds, several limitations of NA were observed:

- Those who are "on the bridge" can easily be pulled back to the drug sub-culture. Because the recovery program itself (NA) is the bridge, recovering addicts often regress, and certain motivations exploit this fact. For example, the co-founder of NA Israel admitted that after introducing his friends to NA, he had relapsed and attended meetings in order to sell drugs. As he said: "Where can you sell drugs to addicts? In NA of course! I used to go there, look for weak types, and then tempt them to come with me" (a pilot interview).
- The co-existence of contradictory values may cause an unresolved conflict, which may eventually lead to a relapse. For example, one member had to testify in his friend's case. In keeping with criminals' loyalty, he did not

want to do it, and felt that the pressure was forcing him to return to using drugs (Observation 37). Another member (Observation 6), shared that her brother wanted money from her to buy drugs for their other brother who was under arrest. The resulting pressure put her sobriety at risk. In both these cases the members adhered to NA's value of recovery as the supreme one, and thus avoided the relapse.

- Members utilize each other as recovery models. In a sub-culture with conflicting values, members often adhere to wrong role models, while behaving according to their old norms. For example, in a personal conversation, a member shared that his former sponsor had engaged in illegal business with another of his sponsored-ones. The result was that both relapsed together, taking along with them an additional sponsored-one. The sharing member himself perceived this illegal business as wrong and discharged his sponsor before the relapse took hold.
- During the struggle between different sets of values and norms, NA's voluntarism and permissiveness may serve as excuses for misconduct. As long as one is clean, one can find in the sub-culture acceptance for not following other suggestions. For example, a single woman of forty, who could not hold down a steady job, and lived off her parents, gave the following excuse (unrecorded personal conversation): "I'm a sick person. I have this addiction disease. It prevents me from finding a job. First I have to recover, at my own pace." Her peers considered this excuse as valid, and many similar sharings were noted.

DISCUSSION

NA is described here as a sub-culture of recovery. As such, it comprises all the components of a deviant sub-culture, but its trajectory is one of recovery from deviance. The recovery is based upon an innovation from the deviant drug sub-culture. The former values of short-term hedonism and mood-alteration are transformed into the values of recovery, which are in the opposite direction: avoidance of any artificial mood-alteration, and the development of morality. These new values result in the construction of supporting norms, such as abstaining from psychoactive substance intake and from situations which might lead to substance consumption, following NA's way of life, abiding by the law, and so on.

Other social mechanisms which encourage the achievement of recovery, and have been identified in NA:

• Using the language of recovery, which, though close to drug sub-culture slang, contains an inherent message of recovery;

- Performing various NA rituals outside group activities;
- Creating social situations which enable recovery;
- Defining roles and actions allied to the recovery process.

Stan Cohen (1980) proposed a three-leveled analysis of sub-cultures: structure, culture and biography. We can apply this three-leveled analysis to NA, the sub-culture of recovery:

- Structure (the problem): In NA, unlike deviant sub-cultures, the problem is not defined in social terms, but is perceived as existing in the individual sphere, e.g., the addiction disease. This is a physical, mental and spiritual disease (Narcotics Anonymous, 1988), which demands an appropriate solution. The definition of an addiction disease is a symbolic description of the problem. This metaphor enables the culture to provide meaning for certain norms of behavior that otherwise would be difficult to understand and to follow (Shaffer, 1991). The social dimension of the problem is a reinforcer of the disorder, but is also a result of the disease. It consists of interacting with active addicts, a social situation which usually hinders recovery and leads to continuing delinquency. Nevertheless, NA considers the direct transition from the drug sub-culture into the wider culture, without the support of NA, as an unsatisfactory solution. One reason is that since addiction is experienced as an isolation of the addictive self, recovery must overcome this. It is accomplished with more success in the peers' sub-culture than in society as a whole (Denzin, 1987b).
- Culture (the solution): As a sub-culture, NA offers a direct solution to the addiction disease and to its personal and social components. In the NA sub-culture, spirituality is a basic value which is considered a solution to the disease of addiction. In following the way of life proposed by their own sub-culture, recovering addicts deal with their 'cases' themselves. As a self-help group, NA rejects both substance addiction and any dependence upon human authority such as professional leadership. This underlines one of NA's basic values, that of voluntarism and autonomy of individuals and groups (Humphreys, 1993; Room, 1993). The value of independence is in opposition to the extreme dependency of substance addiction. Since addiction is considered a spiritual disease of the self, centering on the addicts, they alone can treat themselves directly (Denzin, 1987b). However, this independence is paradoxical, since the spiritual value denotes dependency on the Higher Power, who is considered the true source of recovery (Alcoholics Anonymous, 1989; Miller and Kurtz, 1994).
- Biography (phenomenology): NA's biography consists of the group-accumulated individual experiences of recovery within NA. On joining NA, the individual phenomenon of recovery becomes a collective one (Denzin,

1987a). This collective biography assists the newcomers in the affiliation process and provides necessary elements of change: information, hope and universality (Yalom, 1975). NA's accumulated biography, expressed as members' sharings, functions as raw material for the process of personal re-biography (Ronel, 1993). It gives communal meaning, direction and structure to an individual life story. Individuals can therefore fashion their life stories to conform with those of the sub-culture, and live according to them.

As a sub-culture of recovery, NA is uniquely positioned—equidistant between the prevailing culture and the drug sub-culture. On the one hand, it is a bridge connecting members of the drug sub-culture to the prevailing one. On the other hand, it also protects recovering addicts from certain influences of society as a whole. By rejecting several of the drug sub-culture's values and norms and accepting those of the prevailing culture, NA bridges the two poles. This social bridge consists of ex-members of the drug sub-culture who interact with the principles of recovery contained in the texts of AA and NA (Denzin, 1987a).

Every member of the drug sub-culture is also a potential member of the recovery sub-culture, and can thus benefit from the full attention of this sub-culture; hence the intimate relation between the drug sub-culture and NA as a bridge of recovery. Its bridging function facilitates the transition from one pole to the other.

The transition that must be experienced is a relatively simple one—from being an active addict to becoming a recovering addict. It is accomplished by accepting one's addiction disease and embarking on the recovery process (Denzin, 1987b). This relative simplicity may offer an (at least partial) explanation for NA's potential to change.

Following AA's wisdom, NA adopted the trend towards an absolute moral code, based on the supposition of God's will as the true moral code. This non-compromising code is a lighthouse guiding members into recovery and protecting them from the rocks of relative morality. However, this moral code has become far more extreme than that of the prevailing culture (Maxwell, 1984). Together with this strict morality, NA rejects several basic values that are found in society as a whole, those of hedonism, mild mood-altering, human self-control, etc. By doing so, NA is more than a bridge leading to the prevailing culture. In addition it functions as an island of recovery that protects its inhabitants from dangerous external influences.

The consistency between the results of the present study of NA in Israel, and the existing literature about AA/NA in the USA and other countries, denotes another characteristic of NA as a sub-culture of recov-

ery—it transcends political, racial, religious and geographical borders. NA stands as a universal culture of recovery which attracts members from very diverse cultures (Ronel, 1995). In order to achieve such universality, the sub-culture of NA must be based on inter-cultural value systems, beliefs and meanings. However, the exploration of these is beyond our present scope and deserves further analysis.

REFERENCES

- Abadinski, H. (1989). Drug Abuse. Chicago: Nelson-Hall.
- Alcoholics Anonymous (1957). Alcoholics Anonymous Comes of Age. New York: Alcoholics Anonymous World Services.
- Alcoholics Anonymous (1989; Hebrew Edition). Tel Aviv: Alcoholics Anonymous in Israel.
- Bassin, A. (1984). Proverbs, slogans and folk sayings in the therapeutic community: A neglected therapeutic tool. *Journal of Psychoactive Drugs*, 16(1): 51-56.
- Borkman, T., and Schubert, M. (1994). Participatory Action research as a strategy for studying self-help groups internationally. In F. Lavoie, T. Borkman, and B. Gidron (eds.), Self-Help and Mutual Aid Groups: International and Multicultural Perspectives. New York: The Haworth Press, Inc.
- Bruyn, S.T. (1966). The Human Perspective in Sociology. Englewood Cliffs, NJ: Prentice-Hall, pp. 89-102, 271-279.
- Cicourel, A.V. (1964). Method and Measurement in Sociology. London: The Free Press of Glencoe.
- Cohen, A. (1955). Delinquent boys. New York: The Free Press.
- Cohen, S. (1981). Folk Devils and Moral Panics. Oxford: M. Robertson.
- Cook, C.C.H. (1988). The Minnesota model in the management of drug and alcohol dependency: Miracle, method or myth? Part I and Part II. *British Journal of Addiction*, 83: 625-634, 735-748.
- Denzin, N.K. (1987a). The Alcoholic Self. Newbury Park, CA: Sage.
- Denzin, N.K. (1987b). Treating Alcoholism. Newbury Park, CA: Sage.
- Evered, R. and Meryl, R.L. (1981). Alternative perspective in the organizational sciences: Inquiry from the inside and inquiry from the outside. *Academy of Management Review*, 6(3): 385-395.
- Gifford, P.D. (1988-9). AA and NA for adolescents. *Journal of Chemical Dependency Treatment*, 2(1): 265-284.
- Hawkins, J.D., and Fraser, M.W. (1989). The social networks of drug abusers before and after treatment. In S., Einstein (ed.), *Drugs and Alcohol Use*. New York: Plenum Press.
- Humphreys, K. (1993). Psychotherapy and the twelve step approach for substance abusers: The limits of integration. *Psychotherapy*, 30(2): 207-213.
- Johnson, B.D. (1980). Toward a theory of drug sub-cultures. In D.J. Lettieri,

- M., Sayers, and H.W., Pearson (eds.), *Theories on Drug Abuse*. Rockville, MD: NIDA.
- Kennedy, M., and Humphreys, K. (1994). Understanding worldview transformation in members of mutual help groups. In: F. Lavoie, T. Borkman, and B. Gidron (eds.), Self-Help and Mutual Aid Groups: International and Multicultural Perspectives. New York: The Haworth Press, Inc.
- Kurtz, L.F. (1990). Twelve-step programs. In T.J. Powel (ed.), Working with Self-Help. Silver Spring, MD: NASW Press.
- Lehman, W. (1990). Alcoholism, freedom and moral responsibility. *International Journal of Law and Psychiatry*, 13: 103-121.
- Maxwell, M.A. (1984). *The Alcoholics Anonymous Experience*. New York: McGraw-Hill Book Company.
- Miller, W.R., and Kurtz, E. (1994). Models of alcoholism used in treatment: Contrasting AA and other perspectives with which it is often confused. *Journal of Studies on Alcohol*, 55: 159-166.
- Narcotics Anonymous (1988). Van Nuys, CA: World Service Office.
- Peyrot, M. (1985). Narcotics Anonymous: Its history, structure, and approach. *International Journal of the Addiction*, 20(10): 1509-1522.
- Polkinghorne, D.E. (1987). Phenomenological research methods. In R.S. Valle, and S. Halling (Eds.), *Existential-Phenomenological Perspectives in Psychology*. New York: Plenum.
- Powel, T.J. (1990). Social network and self-help organizations. In T.J. Powel (ed.), Working with Self-Help. Silver Spring, MD: NASW.
- Riessman, F., and Carroll, D. (1995). *Redefining Self-Help*. San Francisco: Jossey-Bass.
- Robinson, D., and Henry, S. (1977). Self Help and Health: Mutual Aid for Modern Problems. London: M. Robertson.
- Ronel, N. (1993). Narcotics Anonymous in Israel: Self Help Processes and Religious Faith Among Drug Addicts. Doctoral Dissertation. Jerusalem: The Hebrew University (in Hebrew, English summary).
- Ronel, N. (1995). The Universality of an American Originated Therapeutic Program: Narcotics Anonymous in Israel. Paper Presented at the First International Conference on Social Work in Health and Mental Health Care. Jerusalem: The Hebrew University of Jerusalem, Paul Baerwald School of Social Work.
- Room, R. (1993). Alcoholics Anonymous as a social movement. In B.S. McCrady, and W.R. Miller (Eds..), *Research on Alcoholics Anonymous*. New Brunswick, NJ: Center of Alcohol Studies, Rutgers University.
- Shaffer, H.J. (1991). Toward an epistemology of addictive disease. *Behavioral Sciences and the Law*, 9: 269-286.
- Shapiro, Y., and Ben-Eliezer, U. (1989). *Elements of Sociology*. Tel Aviv: Am Oved (in Hebrew).
- Terry, C. (1996). Drug addiction, criminality and Narcotics Anonymous:

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Thoughts toward a new way of thinking. Paper presented at Academy of Criminal Justice Sciences Conference, Las Vegas.

Tunnell, G.B. (1977). Three dimensions of naturalness: An expanded definition of field research. *Psychological Bulletin*, 84(3): 426-437.

Waldorf, D. (1973). Careers in Dope. Englewood-Cliffs, NJ: Prentice Hall, Inc.

Yalom, 1.D. (1975). Theory and Practice of Group Psychotherapy. New York: Basic Books.

AUTHOR'S NOTES

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