

# Editorial: Situating Myself

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Everywhere I go I find a poet has been there before me.

—Freud

When Brent asked me to guest edit this special issue of the journal, I was ambivalent. I am not a philosopher and do not purport to be. My experience with addiction is a very personal and intimate one and, in my work as a therapist, “very hands on.” When taking on addictions, I guess I subscribe to Marx’s (Karl’s not Groucho’s) well known axiom: the purpose of philosophy is not to describe the world, it is to change it.

When I first met 14-year-old Miranda, she had a full head of frizzy pink hair and a sassy, cooler-than-thou persona to match. She also had the physical symptoms of full blown alcoholism usually found in adults twice her age, including stomach ulcers, a fatty liver, and early signs of nerve damage. Miranda’s parents had divorced when she was six, and she had never heard from her father again; in the meantime, she acquired a new stepfather who battered her mother and made frightening sexual remarks to Miranda whenever he got drunk. By the age of 11, Miranda had started nipping from her stepdad’s bourbon bottles. Now she was putting away a pint of hard liquor a day, usually accompanied by several joints. Often, she drank until she passed out.

The difference between Miranda and many of the other teens I was seeing for alcohol and drug problems was her attitude toward her addiction. “I *gotta* quit,” she told me fervently. Before she came to me, she had tried—and failed—to stop drinking numerous times on her own. Miranda’s feisty energy and will to survive impressed and touched me, and for the next six months, I threw myself into helping her get sober. In both individual sessions and a group I led for substance-abusing teens, I encouraged her to talk about her feelings and her troubled family life, while also urging her to try out AA. I also recommended that she try “sobriety days”—designated days on which she would forego all mood-

altering drugs as a kind of stepping stone to recovery. At another point, I encouraged her to participate in an adventure-based addiction treatment program especially designed for young people. Miranda valiantly tried all of my suggestions, but she couldn't wrest free of alcohol or pot. One afternoon, she trudged through my office door and slumped into a chair. "I'm such a loser," she whispered. It was then that I asked her to write a goodbye letter to alcohol and drugs.

I had recently begun to experiment with this approach with people who were having a particularly hard time letting go of their addiction. While I didn't fully understand its power at the time, I noticed that letter-writing sometimes helps my clients and I move beyond an all or nothing focus on quitting to a more liberating understanding of the passionate dance between clients and their chosen substance. "What I'd like you to consider," I told Miranda now, "is writing a letter in which you imagine yourself saying goodbye to alcohol and drugs. You don't have to actually give them up right now. But let's see what comes up." At our next group session, Miranda handed me her letter:<sup>1</sup>

*Miranda's Good-bye Letter to Drugs and Alcohol*

Dear Narcotics, Pot (acid, alcohol) etc.

thanks for all You've done for me. You've helped me forget my problems, You've made me feel good, You've made me see the world in a whole new perspective, You've made me fail out of my freshman year, You've made me Ruin the lining of my esophagus and stomach. You've made the Relationship with my Parents go down hill, You've given me a who gives a shit attitude — i've gotten fucked up Emotionally and Physically. (Relationship wise also) I've gotten used by abusing you: even after all those complaints I don't want to give you up Because i'll be alone.

Miranda

My reason for including Miranda's letter here is to honor the humanness and the sacredness of the therapeutic relationships we engage

in and practice our ideas upon. Brent and I have inserted other samples of this work throughout the journal as a reminder that, for most of us, the topic of addiction is one that cuts unusually close to the bone.

I find I don't have billable hours in my practice; I have billable moments, and these letters represent some of my best ones. There is at the heart of many of the letters a profound sense of loss and sadness. Clients expressed grief over time not spent with a parent—whose life was ravaged by drinking and drug use—as in Craig's and Randy's experiences, or the sense of loneliness and emptiness created by just imagining the absence of a drink or drug, as expressed by Miranda, Gwen, Shauna and Katie. Each letter expressed a deep sense of sorrow and anguish (except Gwen who captures the sense of reverie people often experience as a result of their relationships with substances). Each author experienced intense feelings of abandonment and grief when letting go of or imagining letting go of their relationships to substances. These moments in therapy and writing, when a person feels truly alone with their addiction, remind me of Audre Lorde's words, "for the embattled there is no place that cannot be home nor is" (1978, p. 55).

Needless to say, words in a letter experienced outside the context of a concerned and caring relationship ring hollow. Writing a letter does not heal the wound. It simply acknowledges it. The scar remains. My own experience and relationship to the letters and their authors are also an integral part of this process. Writing this has made me aware of how deeply mutual the shared grief-work of a patient's relinquishing their addiction—or any other part of their identity—truly is. Healing is a process of learning to live with the loss, not under it, to let it become our companion rather than our guide.

In addition to being a very soulful communication, Miranda's letter harnesses the spirit of collaboration, the construction of reality through language—i.e., the power of naming and putting our experience into words—and the intersection of personal and cultural oppressions (in the form of her addiction) that have become the cornerstones of narrative and other postmodern therapies. The exercise also creates a ritual that helps my clients and I honor the primacy of their relationship with

drugs and alcohol and explore the specific role chemicals—and other problems or habits—play in their lives. In Miranda’s case, the letter also helped us assess her ability to let go of her addiction.

Following White’s and Epston’s lead (1990), I find that letter writing seems to create some distance between clients and their dilemmas. Encouraging people to define their values and sense of self separate from problems oftentimes leads to a shift in perspective from “I am the problem” to “I am up against a problem.” I also appreciate what an important and powerful tool the act of writing itself can be for people in therapy. Writing helps clients like Miranda—recovering from abuse, addiction and abandonment—struggle to reclaim their bodies and their histories by gradually fitting images and then names to their traumatic experience.

Another dimension of therapy draws me to this work. Clients suffering from alcoholism and addiction don’t just get over “symptoms” and “problems” in a traditional or conventional sense, rather their lives appear to be transformed in the midst of incredibly desperate circumstances and overwhelming odds.

*Border Crossings: Commitments Of A Postmodern Psychotherapist*

In his groundbreaking essay, “The Cybernetics of ‘Self’: A Theory of Alcoholism,” Gregory Bateson uses the challenges addiction and recovery pose us to call for a new understanding of mind, self, human relationships, and power. Bateson (1972) describes the alcoholic as having adopted an unusually disastrous variant of “the strange dualistic epistemology characteristic of Occidental civilization” (p. 321). Bateson warns of the dangers this kind of “cause” and “effect” thinking can pose alcoholics and non-alcoholics alike. These problems or paradoxes are, according to Bateson, not unique to addiction but are more evident when dealing with it. In a dynamic captured in the oft-used expression “mind over matter,” the addict separates their “self” or “will” from their environment in an effort to control it. In other words, the alcoholic’s attempt to arrive at solutions through drinking is simply another piece

of modern drama acted out in the Cartesian theater. However, in this version of Western philosophy's longest running show, the protagonist's signature line has been changed from "I think therefore I am," to "I drink therefore I am." Counter to prevailing beliefs that alcoholics drink for all the wrong reasons, Bateson concludes that drinking offers to the alcoholic, "A short cut to a more correct state of mind." Or as a client once explained it, "Jon, the best idea I ever had in the world was to get sober. The second best idea I ever had was to pick up a drink."

Bateson reminds us that the "logic" of addiction has puzzled us no less than the "logic" of the "strenuous religious regime whereby the organization Alcoholics Anonymous is able to counteract the addiction" (1972, p. 309). While Bateson looked to cybernetics and systems theory for his new epistemology, he felt the non-alcoholic world had much to learn from the ways of Alcoholics Anonymous. He used AA's spiritual outlook to help him construct a view of the world more relevant to our current problems as well as to deconstruct what is wrong with our current way of thinking about humankind and nature. If, says Bateson, double binds<sup>2</sup> cause anguish and despair and destroy personal epistemological premises, then the serenity prayer, with its promotion of noncompetitive spiritual relations, heals wounds and frees a person from these maddening bonds.

Bateson's point is not just an academic one for me. My mother continues to suffer from alcoholism, as she has throughout most of my life. When I decided to marry my partner Dana, I became very anxious about my mother's drinking. Unsure of how to handle the presence of alcohol at our wedding and apprehensive about how she might behave, I sought advice from a colleague. After listening patiently to my dilemma, my friend asked me to entertain the following scenario:

"Imagine, Jon, if tomorrow morning you went out to your mailbox and discovered a telegram. You opened it and read: 'Dear Jonathan, I am sorry, it is not in the stars for your mother to get better. Love, God.'"

As he spoke those words, I fought back tears. As never before, I understood the well-worn words of the AA serenity prayer: "God, grant me the serenity to accept the things I can not change, the courage to

change the things I can, and the wisdom to know the difference.” I got, in that moment, that my mother and I were equally powerless over her drinking, and that I could not and never would be able to “fix” her. I often recall this moment as I work with addicted clients who struggle with letting go of their substance—it both keeps me connected to my client and restrains me from engaging in futile rescue missions. While not everyone can call upon a personal encounter with alcohol or drugs to guide them, virtually all of us can identify a painful experience of powerlessness in our lives that can help us stay present with those who feel overwhelmed by their addiction.

From the standpoint of philosophy, the lesson I received on the limits of my own knowledge or, in Wittgenstienian terms, language, isn’t one customarily associated with God. Instead, it would be considered the domain of epistemology. Epistemology is the branch of philosophy that concerns itself with the origins, nature, methods, and limits of knowledge. This term, however, has gained colloquial currency in the family therapy field as a synonym for the word “paradigm.” While Bateson showed how our culture was caught in a frenzy of biological materialism, his article, along with his other writings, generated a frenzy of paradigmatic thinking and what I call an “epistemological speak” within the mental health professions. Unfortunately, the focus of this new wave of family systems thinking was on the tools and methods Bateson employed and, for the most part, ignored the questions and mysteries that initially captured his attention.

This special issue of *Janus Head* sets out to correct this oversight. Following Bateson, our lead essay by Roget Lockard (and the elegant reflections offered by Lynn Hoffman) happens to be talking about addiction but that isn’t as important as its message. In his provocative, thought provoking piece, Roget uses his genius to invite—urge—us to reconsider the sort of thinking we bring to the problems we face in this next century.

Robin Room in his *The Cultural Framing Of Addiction*, confirms something I’ve long believed: Stories have as much to tell us about human nature as theory and that, when it comes to understanding my

own field's specific contribution, psychotherapy is more literary than scientific—although the two perspectives (science and therapy) are not mutually exclusive. Room reminds us that stories, not atoms, are the stuff that hold our lives and our world together. What I appreciate most about Room's deployment of the constructivist approach is that while he sees our understanding of addiction as a collection of the historically and culturally specific stories we tell about it, he is quick to point out that some stories are better than others.

Daniel Weimer's well written (and researched) piece documents the Nixon administration's efforts to marginalize a segment of the population—"heroin using soldiers returning from Vietnam and domestic addicts"—and their efforts to label them as "carriers of a contagious, foreign, anti-modern, dangerous disease." After reading Weimer, I find myself thinking that the issue, for me, is not so much that addiction is this epidemic pathology you find everywhere you look. Rather, it's that addiction is part of human nature. The current era or historical epoch that we are passing through with its huge explosion of technologies has simply made what's always been the case that much more apparent. We are also (as a species) addicted to fossil fuels, weapons of mass destruction, consumerism and ideologies (at least I think one could make a strong argument for this position). In other words, our efforts to control and assert the force of our will over our environment (mind vs body, self vs other, nature vs artifice, real vs substitutes, body vs machine) are, according to Bateson and AA, "The same forces which are today ripping apart the world at its seams." If you embrace this stance, the central question doesn't become, "How do we solve this global problem or 'cure' this 'disease'?" But "How do we come to terms or make peace with this aspect of our nature without destroying the whole planet in the process?"

Kerry Kidd's *Styron Leaves Las Vegas* is a rich, disturbing tour of the literary giant's personal struggles with depression and alcohol. Reading *Styron* I'm always reminded of Dylan Thomas who said an alcoholic was someone you don't like who drinks as much as you do. Kidd uses *Styron's* drinking life to flesh out our understanding of this artist's creative pro-

cess in particular and as a footbridge to Kidd's thinking about acts of meaning making, addiction, and writing in general. Reading Styron with Kidd, I've come to realize that the state I need to be in to write is one my clients pay me large sums of money to help them get rid of.

Finally, Helen Douglas' piece, *The Tao of Drunkenness and Sobriety*, more haiku than essay, is a beautiful reflection on the fulfillment of desires and longings, which I view as the heart of the addictive experience. Erich Fromm said that our deepest need as humans is to overcome our separateness, to leave the prison of our aloneness. Helen's meditations on Levinas, Taoism, Sufism, the Bible and The Beatles brought this point home for me. Reading Helen's words left me with the thought that if medical research ever develops a scientific approach to addiction, it will not be a science of genes, neurotransmitters, biochemistry, or brain waves, it will be a science of desire.

You can't write about change without having gone through one. I didn't choose the fiction or poetry for this issue—that impossible task was artfully performed by Claire Barbetti—but many of these selections explore similar themes of abandonment, loss and desire. However, you will have to look hard to find a “universal” experience of addiction within these inspired and powerfully written pieces.

Similarly, the essays in this issue were not chosen because of the narrative flow of ideas produced or their ideological congruency. Their fit is more like the jagged edges of the dramatic rock formations found along the continental divide. There are numerous inconsistencies, contradictions and disagreements (even within individual pieces). For example, some authors embrace a 12-step epistemology and, in some cases, bring their personal experiences in these rooms to their writing, while others take a more critical stance towards this movement. I see this as a strength and feel these differences make for a stronger issue.

In an interview reprinted in *Differences: Journal of Feminist Cultural Studies*,” philosopher Jacques Derrida (1993) offered the following remarks on the growing drug culture in Europe and the West:

I would rather you didn't just yet ask whether I am for or against either of these. Today here and now, in my private-public life, and in the fixed situation of "our" society, I feel rather more inclined towards an ethos of, shall we say, that, according to the dominant codes, would be understood as somewhat repressive or prohibitory, at least in the case of the classified drugs (p. 16).

Derrida is often held up as the champion of a deconstructionist and postmodern philosophy that looks for ways of disrupting relations of power and exposing the dominance of one culture over another. I share this not to advocate one way of thinking about drug policy or another (personally, I strongly favor decriminalization, and of course Derrida's position may have changed numerous times since giving this interview), but to demonstrate that when it comes to, borrowing Kidd's word, the "nonsensicality" and often confusing world of addiction, it is never easy to pin someone's thinking down or put together a cohesive argument of our own. It is a messy process that is always impacted by our own personal experience and subjectivities.

When it comes to utilizing the wisdom and scholarship of AA, my own bias is clear. However, when discussing addiction, I always try to specify whether I'm talking about the recovery movement or the recovery marketplace as each phenomenon has a different story and history to tell. Most criticism of AA from narrative and other postmodern perspectives actually targets other addictive phenomena and compulsive behavior (e.g., "co-dependency"). These perspectives hold that the proliferation of twelve-step culture has resulted in the "diseasing of America," a view in which women are seen as helpless victims and no groups or individuals are held accountable for their actions. These concerns comprise a harsh and more deserving critique of the billion dollar self-help publication and workshop industry—rather than being grounded in any serious empirical study or experience of twelve-step meetings, literature, or traditions. The self-help recovery movement is, regardless of its successes or failures, driven by people's attempts to regain the lost spirit of community, while the story of the recovery marketplace is more

closely aligned with the history of consumer capitalism and the commodification of people's intimate connections and personal relationships.

### *Deconstructing Addiction*

A common metaphor used to illustrate our confusion when trying to define alcoholism is the story of the five blind men and the elephant, each one feeling a different part and trying to describe his discovery based solely on the evidence at hand. As is well known, one, his arm wrapped around its leg, thinks it's a tree, another holding the trunk believes it to be a giant snake, and so on, each describing the part he's encountered but never grasping the whole picture. Similarly, how a clinician defines addiction depends on his or her vantage point. The physician treating damage to the person's liver and esophagus or broken bones from a drunk driving accident defines it as a physical malady. The psychiatrist might respond to the depression that many alcoholics suffer with medication or therapy, without exploring the connections between the person's drinking and their feelings (maybe forgetting that alcohol itself is a depressant that suppresses the central nervous system). The social worker may see the environmental factors—unemployment, poverty, racism, homophobia, and so forth—at play in the person's life. The family therapist may trace its origins to the dysfunctional patterns of communication that feed the cycle of shame and blame that family members so often become mired in. Meanwhile, the pastoral counselor may see it as a spiritual crisis that has compromised the drinker's values, belief system, and self-worth. What we have here, from the standpoint of the alcoholic, are five blind theories. Collectively, they're onto something, individually they have nothing.

While this analogy may be helpful when trying to explain how members of a treatment team (or any us) can get bogged down in their own perspectives, I don't think it's a useful way of describing the different views put forth in this issue of *Janus Head*. I believe this is so mostly because it assumes that while each of us is wearing his or her own nar-

row set of blinders, we are all ultimately describing different aspects of the same reality. However, that's not the case here. When it comes to describing addiction, what we're presented with in this particular body of work are multiple realities, no one less valid than the other.

The sixty four thousand dollar question is: can we make room for the myriad relationships, ideas and experiences all of us—clinicians, researchers, historians, philosophers, policy makers, scientists and poets (never mind mothers, fathers, sons, daughters, sisters and brothers)—bring to the subject. Put another way, every author whose work is showcased in this issue makes a strong argument for their position. It is the task of each individual reader to put them together with whatever integrity she can muster.

### Notes

<sup>1</sup> Although the letters presented have been typed to make them more readable, visually they have been reproduced as close to their original form—including punctuation, capitalization etc.—as possible.

<sup>2</sup> Bateson's theory of painful and competing contradictory messages and directives about the self that contribute to the onset of mental illness

### References

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