

Men  Alive

The Rings of Addiction: The Seven Stages of Recovery and the Ten Tasks of Mature Masculinity

“Try not to become a man of success,
rather become a man of value.”

– *Albert Einstein*

Jed Diamond



MenAlive

Published by:

MenAlive
34133 Shimmins Ridge Rd.
Willits, Ca. 95490
707 459-5505
jed@menalive.com
www.menalive.com

All rights reserved. No part of this White Paper, including interior design, cover design, and icons may be reproduced or transmitted in any form, by any means (electronic, photocopying, recording, or otherwise) without the prior written permission of the author, except for the inclusion of brief quotations in a review.

Cover design and interior layout by Jemal Diamond, thejeshow.com

If you find typographical errors in this book they are here for a purpose. Some people truly enjoy looking for them and we strive to please as many people as possible. Let us know what you find.

My \$28 GIFT for YOU!

Just for joining my list! I want to give you something that really is worth \$28. Why would I do this? Because I want you to allow me to keep this conversation we've started going. After more than 40 years helping people improve their lives, I have a lot I'd like to share with you.

I do like to help people and yes, it is also a bribe to let me stay in touch with you. If you're willing to give me your e-mail address I'll send you a copy of my latest White Paper that I normally sell for \$28.

It's yours with no strings attached. If you ever get tired of my sending you information (which I hope NEVER happens), all you have to do is click the UNSUBSCRIBE button that comes with every email that I send out. I know you already get tons of email and you hate most of it. This won't be true with what I send you. You'll get a series of valuable tools that will improve your personal and professional life, tools that you can use immediately.

Please claim your White Paper by sending an email to tools@menalive.com.

Note: If you have a spam blocker, please add my e-mail address to your accept list: jed@menalive.com

Jed Diamond, Director MenAlive
Author, *Male Menopause* and *The Irritable Male Syndrome*
jed@menalive.com

MenAlive

Contents

Reflections on recovery.....	page 4
The Rings of Addiction and Recovery.....	page 6
Rediscovering Your True Self	page 6
Understanding the Black Hole.....	page 6
Moving Through the Band of Shame.....	page 6
Confronting the False Self.....	page 6
Getting at the Addictive Core.....	page 7
Recognizing Our Sex and “Love Addictions”.....	page 7
Accepting Our Addictions to Alcohol, Drugs, Food, Money.....	page 8
The Ten Tasks of Mature Masculinity	page 8
Task 1. Balance our desire to “do” with our need just to “be.”	page 8
Task 2. Understand and heal our confusion about sex and love	page 8
Task 3. Transform our ambivalent feelings toward women and children	page 8
Task 4. Express the grief over the loss of our fathers and risk getting close to other men	page 9
Task 5. Change our self-hatred to self-actualization	page 9
Task 6. Acknowledge our wounds and heal our bodies and souls	page 9
Task 7. Uncover the roots of our basic insecurity	page 10
Task 8. Acknowledge and heal our hidden childhood abuse.....	page 10
Task 9. Explore the origins of our violence and change our destructive behavior	page 10
Task 10. Return to the spirit of true warriors.....	page 11
What is Addiction?	page 11
Craving for Ecstasy: Two Different Types of Addictions	page 12
Thirty-nine Years of Recovery Experience: Four Significant Truths.....	page 13
Healing Our Intimate Relationships and Healing the Planet.....	page 15
What I’ve Learned on the Recovery Path	page 15

It had been twenty years since Kevin first walked into my office. I still remembered the day. He had been referred by a mutual friend who was concerned about Kevin's drinking. When I came out to meet him, I was greeted by a sandy-haired man in his early 30s, with piercing blue eyes that darted all over the room, and a smile that seemed to hide deeper feelings. His handshake was firm, but his voice was shaky. His situation was not uncommon. "I've been drinking since I was a teenager, but I never thought much of it. Problem drinking was something that happened to someone else, not to a successful psychotherapist. I've done everything to deny what my family and friends keep telling me, but now I know I need help and I was told you were the best." The two years we worked together intensively went by quickly.

Sitting in my office, having returned for one of our twice yearly "fine tuning" sessions, Kevin looks younger than his fifty-three years and quietly happy as he reflects back on the years of torment before he came for treatment and the difficult process of recovery itself.

"You know the thing that stands out for me," he says quietly "is that people can trust me now." He stretches out his long legs and looks directly in my eyes, a complete contrast from our first meeting so long ago. "When I first came to see you, I never could understand why people would come to me for help and then leave abruptly. I thought I was covering my own problems so well. I might have a drink or two during lunch, so I could face the pressures of the afternoon, but I took great pains to brush and gargle, and I was sure no one knew." Kevin laughs and shakes his head as he recalls those earlier days, but his face gets serious as he remembers how it really was.

"I never felt clean inside and I guess people picked that up. Now there are few inconsistencies between what's going on inside and what I express on the outside. Things aren't perfect, I don't expect they ever will be, but it's wonderful to know that I don't have to hide who I am."

One of the advantages of being a therapist for more than 25 years is that I can see people's progress over a long period of time. When I was just starting out in the field, I was sure addictions could be "cured" in a year or two at the most. I was also naive enough and arrogant enough to believe that the recovery process began when the person first came in the office. Prior to that magic moment the person was "sick," after that moment they were on a steady path to health and well-being.

Everything changed for me when I recognized that I had chosen, without being aware of it, to work with addictions because I needed to work on myself. The founders of the Twelve Step Programs believed that everyone is both the helper and the one needing help. It's been a tremendous burden on "professional" helpers that our training has often taught us to deny our own needs and to believe that we help best when we keep our own problems hidden.

"I've told you," Kevin says with a smile, "that your help was absolutely crucial to my recovery, particularly your personal sharing of your own struggles. There was even a time when I didn't think I could survive without your support. But looking back on things now, I can see that there were many people who were crucial to my recovery. At the time, I was so angry and afraid all I could see were people who didn't give a damn about me."

“One of the greatest gifts I ever received was my first wife telling me that she loved me but couldn’t live with me another day. I never believed she’d do it, but the next day she left, taking my son and daughter with her. I cried for weeks and hated the friends who came by to comfort me. Remember, I even stopped coming to see you after only four sessions?”

I nodded and smiled remembering so many people, like Kevin, who had “dropped out,” only to be confronted with some new experience that resulted in a renewed commitment to their recovery.

Kevin continued. “I’ll never forget Matt, the only friend who wouldn’t put up with my sniveling after I’d drink myself into oblivion and wake up hung over the next day. His words were tough, but they were also loving and they jarred me out of the self pity I was lost in. ‘Kevin, I love you too much to watch you kill yourself. I’m going to an A.A. meeting tonight. I’ll pick you up at seven and I don’t want to hear any excuses.’”

Kevin’s eyes filled with tears as he remembered Matt. “You knew he died of cancer didn’t you? He was just fifty. He overcame his alcoholism and helped so many others, but couldn’t kick his addiction to cigarettes. I still miss him.”

When Kevin returned to therapy he had been going to A.A. meetings for six months, and though he had stopped drinking and his life was more stable, he still had not dealt with his feelings. Without recognizing it, a great deal of his addictive energy had not been healed, but had shifted to his work. Kevin recalled those years.

“I thought if I just stopped drinking everything would be O.K.,” he said with a smile and a quick shake of the head. “But putting a plug in the jug didn’t solve my problems. I felt I had lost so much time during my drinking years that I had to catch up fast.”

“Work became my new drug. I became just as obsessed with ‘building my practice’ as I had once been with drinking. But now, instead of people looking at me funny, they applauded and told me how great I was. In my spare time, I got into commercial real estate and really began to make money. My success in business seemed to make me even more attractive to women and rather than deal with the pain of losing my wife and family, I went after every woman I could find.”

In addition to attending his A.A. group and doing therapy with me once a week, Kevin joined a Workaholics Anonymous group. “I learned I didn’t have to do it all now, that there was actually plenty of time to accomplish everything I wanted to do--and besides, what’s the use of saving myself from death through alcohol if I have a heart attack in the process?”

Later, as our counseling progressed, Kevin joined SLAA (Sex and Love Addicts Anonymous) and began sorting out his addictive “love” life.

Having stabilized and healed his intimate relationships we were able to move ahead and begin working on the trauma from Kevin’s past. Issues of low self-esteem, abandonment, and shame were confronted and worked through as we began moving slowly back through Kevin’s family history.

After taking thousands of people like Kevin through the recovery process, I have evolved a system that fits my own understanding of what works and has been helpful to the people who have sought me out.

The Rings of Addiction and Recovery

This concept summarizes my experience over many years working with addiction. It helps me understand how addictions develop, how they are related to one another, what kinds of addictions often follow from the male role, and what steps are necessary for recovery. Imagine that each ring represents a stage of the recovery process. Within each stage are tasks that men must accomplish to develop and deepen mature masculinity.

Addiction is the dis-ease of lost self-hood. The image I have is of a stone being thrown into the center of a calm, clear lake. As the stone breaks the surface, it causes rings to radiate out from the center. In like manner, the serenity of an individual is disturbed by traumatic events from childhood. The resulting behavior patterns are attempts to deal with the pain of the trauma as well as attempts (though misguided) to find the self that was lost. I summarize the process as follows:

The first ring is the true self.

We are conceived as perfect beings, with all the ingredients necessary to be a loving, valuable, productive human being. Though our true self can be covered over and forgotten, it can never be lost.

The second ring is the black hole.

Though we are born perfect, most of us come into a family where our basic needs for safety and security are not well met. We come to believe that something essential is missing in us. In order to survive in our families we “forget” our true selves. In its place we feel a terrifying emptiness, a hole where our sense of substance and worth once resided.

The third ring is the band of shame.

Believing we are damaged goods, we come to despise ourselves. Unable to believe that it is our parents, our life-support system, that is faulty, we blame ourselves. If we are hurt by our parents, we assume it must be because we are so horrible.

The fourth ring is the false self.

To experience constant shame is so overwhelming we would kill ourselves if we did not do something. In order to survive, we develop an “as if” personality meant to convince others that we are O.K. We develop a pleasing mask we hope will hide the horror of who we believe ourselves to be.

The fifth ring is the addictive core.

Living within a black hole, surrounded by a band of shame, covered by a false self we become very lonely. At this stage we finally lose hope in finding healing comfort by looking within. We come to believe that the way to soothe our pain is to look for something “out there.” The hunger from this addictive core sends us on a journey away from our true selves in search of our missing parts.

In the sixth ring are the sex and “love” addictions.

Having lost trust in our ability to find love and acceptance within ourselves, we seek to fulfill these needs through others. Believing we need others attention in order to survive, we develop excessive attachments. Afraid to get hurt, we keep others at a distance. Our relationships often alternate between obsessive attachment and obsessive detachment.

The seventh ring are the inanimate objects of our desire.

Since people can, and often do, disappoint us, we try to fill the void and lessen the pain, in inanimate relationships.

We turn to drugs, alcohol, T.V., food, money, work, etc. It’s as though we said to ourselves, “People can hurt me, but “Miss Alcohol” or “Lady Cocaine” will never let me down. When one fails, we try another. Ultimately, none work and we either continue until we die or we begin to recover.

The rings of addiction and recovery give us a structure for understanding what is happening in our lives and what to do about it. They show us that addictions develop from the inside out, but must be treated from the outside in. They also remind us that everyone with an outer ring addiction, also has all the issues contained in all the inner rings.

Thus, every alcoholic also has “love” addictions of one kind or another that he must heal. He also must deal with his addictive core, false self, band of shame, black hole, and true self. Though every sex and “love” addict may not have the outer ring addictions, he still must deal with all those issues in the inner rings.

The Ten Tasks of Mature Masculinity

In the past, recovery programs rarely dealt with issues of masculinity and men’s programs rarely focused on recovery issues. I have found that both must be dealt with if men are to develop healthy and joyous lives. In working on my own issues and with thousands of men over the years, I have found the following ten tasks are crucial for men.

Task 1. Balance our desire to “do” with our need just to “be.”

For men on the recovery path, the first thing we need to learn to do is to resist the temptation to do something. We are forever trying to fix things before we’ve taken time to read the directions, always trying to remedy our family’s problems before listening to hear what they need. As John Bradshaw put it, we become “human doings,” rather than “human beings.”

In one of our first therapy sessions, Ron expressed the longing so many of us have just to “be.” “I’ve spent my whole life working; always producing, always fighting to stay ahead, forever pushing myself.” Ron’s eyes filled with tears and his face twisted with frustration. “Damn it, I’m tired of killing myself. I long for a time that I can just rest, just kick back and be me. I want to be accepted for who I am, not what I do, yet I’m afraid if I stopped I’d lose the respect of my wife and kids. Finding the balance is the first task of mature manhood.

Task 2. Understand and heal our confusion about sex and love.

“My intellect tells me that sex and love should be a normal part of life, like eating and sleeping,” says Robert in one of our therapy sessions. “Yet, for me they’re so charged with excitement, desire, fear, and longing, I’m never really comfortable. I think about sex constantly and I’m not sure I even know what love is. Women turn me on, just with a look, even women I know I shouldn’t be having these thoughts about. My cock seems to have a will of its own.”

Studies show that men think about sex an average of six times an hour; that’s seven-hundred fifty times a week, not counting dreams. By contrast, the average married couple has sex 1.5 times a week. Given such a degree of male sexual frustration, it isn’t surprising that Playboy and Penthouse are the most popular men’s magazines, with combined sales of nearly six million copies a month, and pornography is a billion dollar growth industry. Yet men often feel guilty about sex and wonder how to integrate their sexual desire with a need for love and intimacy. Our sex and love lives often feel fragmented.

Understanding, accepting, and integrating sex and love into our lives is the second task of mature masculinity.

Task 3. Transform our ambivalent feelings toward women and children.

“I was making love with Judy,” says Raol, “feeling close and warm. Then she said something that set me off and I felt like hitting her. I don’t understand where these feelings come from.”

Most of us know the perplexing feelings of loving, needing, and caring for a woman at one moment; then hating, hurting, and fearing her the next.

Some of us are also aware of the confusions we have towards our children. They are at once the most precious and valuable beings in our lives and also the focus of some of our most destructive rages.

Ron reveals his confusion and shame about the anger that comes up towards his 2 year-old boy. “Most of the time Jason is the love of my life. I cry with joy to watch him play. But at other times, a rage comes over me and I feel like I want to hurt him. The thought that I might do something to him terrifies me.”

Uncovering the roots of our ambivalence and developing a foundation for love and support is the third task of mature masculinity.

Task 4. Express the grief over the loss of our fathers and risk getting close to other men.

The absence of strong and loving fathers in our lives is so pervasive that we often take it for granted. For many of us, it just seemed natural to have a Dad who was gone or one too tired and withdrawn after a day at the office to be emotionally available to us. For others of us, the presence of father was a source of fear. When we heard “wait ‘til your father gets home,” we knew we could expect a beating not a loving embrace.

Yet the loss leaves deep wounds and our unwillingness to accept and deal with the depth of our pain insures that our losses remain unhealed. We grow up to become adult-children forever trying to please a father who was never there. Our relationships with other men remain competitive and shallow.

Expressing our grief and learning to get close to other men is the fourth task of mature masculinity.

Task 5. Change our self-hatred to self-actualization.

With all the emphasis on men as the “top-dogs” in society, the self-hatred that is so pervasive in men’s lives often goes unnoticed. We may be told we are top dogs, but we are dogs none-the-less.

From our earliest nursery rhymes where we are told that “little boys are made of snips and snails and puppy-dog’s tails,” to our adult movies where men are portrayed as mindless killers, we are given ample reasons to hate ourselves. We are rarely given healthy male models to guide our paths of growth.

Releasing our self-hatred and learning to actualize our selves is the fifth task of mature masculinity.

Task 6. Acknowledge our wounds and heal our bodies and souls.

“I always wished my body would disappear,” says Tony a tall good-looking young man. “I was taught that the body was dirty, a necessary evil for supporting the loftier aspects of the human intellect.” Tony continues with a look of pain and disgust. “My ‘body image,’ if you could call it that, was of a stone pedestal that held up my head. I needed to dust it off at times, but its only purpose was to support my brain.”

We think of women as being the ones who have problems with body image, always trying to lose weight or look prettier. But men also feel ashamed of their physical beings. Shame, in all its various forms, manifests on a physical level. For men we ignore our bodies and the feelings that go with them which is one of the reasons we die seven years earlier than women. Our spirit and soul can not develop and thrive in a body that is damaged.

Acknowledging our wounds and healing our bodies and souls is the sixth task of mature masculinity.

Task 7. Uncover the roots of our basic insecurity.

We often seem so sure of ourselves, it is difficult to imagine how deeply insecure most men are. “I don’t think I’ve ever felt secure in my life,” says Raol. He looks up towards the ceiling and sighs. “I’ve always felt a sense of impending doom, like no matter how hard I try or how fast I go, I won’t make it. I never feel I’m good enough and no one could really love me the way I am.”

The key to understanding the insecurity men feel, is to recognize that we have become separated from our physical world. We have lost connection with place, with the experience of belonging somewhere. We feel like orphans cast out into a dangerous world. Getting to the roots of our basic insecurity is the seventh task of mature masculinity.

Task 8. Acknowledge and heal our hidden childhood abuse.

“My Dad often spanked me with a board that I had to get myself,” says Robert. “If it was too small, he screamed at me, and made me get a bigger one.” Raol remembers experiences with his mother. “She used to fondle me when I was little and feed me sweets whenever I felt sad.”

As Raol recounts his experience, he shares a view that is common for children who have been abused. “You know I forgot that those things ever happened. When I did remember I didn’t see what happened as being abusive. It just seemed kind of normal, like it was done for my own good.”

Accepting and working through the ways we were abused is the eighth task of mature masculinity.

Task 9. Explore the origins of our violence and change our destructive behavior.

“There are times when I lose it,” says Joseph. “I see myself as a gentle, peaceful man, but the truth is, I’ve been pretty abusive. With one of my girlfriends, I remember pushing her so hard, she fell on the floor. I’ve come close to ‘date-raping’ two women, one I knew and the other I picked up drunk at a bar. I’ve gotten so angry at times, I’ve choked my dog, Buddy, who I love.”

The violence men keep bottled up periodically explodes outward, but more often it is directed at themselves. Joseph remembered becoming so enraged, he would break windows and furniture

and even hit his head against the wall.

Getting to the roots of our violence and changing our destructive behavior is the ninth task of mature masculinity.

Task 10. Return to the spirit of true warriors.

Human beings have been on the planet for at least two million years. For 99 1/2 percent of human history every person on the planet lived as hunter-gatherers. The true warrior spirit is not to be found in the violent images of Rambo. It is not to be found in the latest technological innovations of the modern army. Rather it will be found by looking at the philosophy and experience of the ancient hunters.

Fortunately we can also learn from those few living exemplars of the hunting societies whose cultures survived into modern times. These include the Pygmies of the African rain forest, the !Kung San of the Kalahari Desert, the Australian and Tasmanian aborigines, the Eskimo, and the many tribes of native peoples of northern and western America.

Reconnecting with the warrior spirit of our hunter-gatherer ancestors is the tenth task of mature masculinity.

What is Addiction?

When I began working in the field, addiction was pretty straightforward and simple. It was seen as compulsive desire to use a drug, most often, alcohol or heroin. In this view, there were certain drugs which were seen as “addictive.” If someone used such a drug they would soon develop a physiological craving which would cause them to use more of the drug. Now we recognize that addiction involves more than just the physiology of the body and goes far beyond the use of heroin or alcohol.

I think of addiction as the disease of lost selfhood. When someone comes in for help, I explore the ways they have lost connection with seven aspects of the Self:

1. Physiological loss--Ways in which a person is out of touch with their body and the normal way it functions.
2. Psychological loss--Ways in which the person has lost touch with their sense of self esteem.
3. Familial loss--Ways in which the family a person grew up in was dysfunctional and abusive.
4. Interpersonal loss--Ways in which the need for healthy friendships have been replaced by an addictive peer group.
5. Social loss--Ways in which social pressures such as racism, sexism, or social isolation limit a person's support from the community in which they live.

6. Cultural loss--I look for the way in which life in a dominator/domesticator culture cuts men off from their partnership roots.
7. Spiritual loss--I look for ways in which men have lost connection with the spiritual dimension of life.

Craving for Ecstasy: Two Different Types of Addictions

According to anthropologist Angeles Arrien, there are two universal life energies which she calls dynamism and magnetism. The dynamic life energy has to do with starting, initiating, setting things in motion. In shamanic cultures it is associated with sun energy, in oriental cultures with yang. Jung called it the Animus. The magnetic energy has to do with drawing in, receiving, opening, and deepening. In shamanic cultures it is associated with the energy of the moon, in oriental cultures with yin and in Jungian psychology with the anima.

In the introduction to the fascinating book *Craving for Ecstasy*, Drs. Milkman and Sunderwirth lay the foundation for a more comprehensive understanding of addiction which links perfectly with Arrien's concepts of the dynamic and magnetic.

Addictions can be understood as falling into two categories, depending upon whether the substances or activities speed up the nervous system or whether they slow it down. The first group are called "arousal" addictions, the second, "satiation" addictions. We can get an understanding of these two actions if we think of cocaine as the prototypical arousal drug and heroin as the prototypical satiation drug. Someone on cocaine moves fast, talks fast, thinks fast. When they're high they are in continual motion. By contrast, the person under the influence of heroin addict looks half asleep. He nods out. His voice is dreamy and slurred.

Those who become excessively reliant on satiation or relaxation may, in addition to using depressant drugs like heroin, tranquilizers, or sleeping pills, gorge themselves with food, get hooked on destructive relationships, or become excessive T.V. watchers. These people compulsively search for tranquility, often to maintain control over their own hostility. They are like magnets who want to pull all the energy into themselves, and like a baby, curl back up in a fetal position. They are often introverts who have trouble relating easily with large groups of people.

In contrast, the arousal or excitement addict is a compulsive thrill seeker. In Arrien's terms he has overdeveloped his "dynamic" qualities. His energy is pushing outward, confronting a world perceived as threatening. Arousal types compensate for deep-seated feelings of inferiority, by repeatedly trying to demonstrate physical prowess or intellectual ability. They are often extroverts who thrive on the intensity and excitement of large crowds.

In addition to getting hooked on such drugs as cocaine, amphetamines, and caffeine, they often get hooked on sex, gambling, excessive work, and preoccupation with making more and more money.

Alcohol is a drug that seems to be both stimulating and relaxing for different men, or for the same man at different times. It is the reason it is such a difficult drug for many in this society.

Men are traditionally trained to deal with life stresses by overemphasizing the dynamic. In our desire to get high and escape the stresses of life, we most often develop arousal addictions. Yet, as we shall see in subsequent chapters, men are increasingly developing satiation addictions that have traditionally been associated with the female role.

Thirty-nine Years of Recovery Experience: Four Significant Truths

In looking back at my own recovery and the recovery of the people I have worked with for over a quarter of a century, there are four truths that stand out for me: First, everyone is addicted to something. Second, we must intervene much sooner and work with people longer than is commonly practiced. Third, addiction is not all negative, but has a positive aspect that must be acknowledged. Fourth, healing intimate relationships and healing the planet, is just as important as healing the individual.

Let's look at these four issues in more depth since they are so important to the way I work with people.

Everyone is Addicted to Something (or Someone)

Traditionally we have assumed that addiction was a problem for a small minority of the population. Heroin addicts and alcoholics, we felt sure, were hopeless, and probably members of an ethnic minority. Cocaine addicts and workaholics, we knew, were all rich and famous, or striving to become rich and famous. Addicts were always seen as someone other than us.

With this view of addiction, it isn't surprising that studies indicate that less than 10% of the people having addictive problems sought help. And those were only for the most serious manifestations of addiction. Only about 1% sought help for less serious problems.

But, increasingly we have come to recognize that addiction is not a disease of the few, but is the disease of our modern world. It affects us all. There are now more than 250 different 12 Step recovery programs dealing with addictions from alcohol to work, sex to violence. It is no longer a question of "are you addicted," but rather "what are your addictions?" We can no longer point the finger at "them," but must look at ourselves. To paraphrase the wisdom of that well known social philosopher, Pogo, "We have met the addict and he is us."

Begin Sooner and Work Longer

The first step of all Twelve Step Programs says that we acknowledge we are powerless over our addiction--that our lives have become unmanageable. As I discuss in more depth in chapter three, this corresponds to step eight in my process. I believe that for most, recovery begins much too late. If we are convinced that addiction is a very rare phenomenon happening only to someone else--the poor and homeless or the rich and famous--it is easy for us to ignore the early

warning signs of our own unhappiness and assume it is caused by something else. An analogy of going to the dentist may be helpful. If we believed that tooth decay was a problem for a tiny minority of the population, that if you got tooth decay your life was ruined, and that help was only available when your teeth were so bad you couldn't eat, few people would go to the dentist.

If on the other hand we viewed tooth decay as a near universal problem, we would treat it very differently. There would be no stigma attached to going to a dentist, since everyone would be seen as high risk. People would be encouraged to go to a dentist for regular check-ups rather than waiting for serious problems to occur. Efforts would be directed towards preventing problems before they occur and for recognizing problems while they are still minor.

The approach I use suggests that we don't have to wait until a person is in crisis and ready to admit he is powerless over his addiction. We can help the person look at the process much earlier, before the addiction is entrenched and the denial is strong.

Much of our current treatment is organized around what insurance will pay, rather than on what people need. Thus we have twenty-eight day residential programs and one year follow-up. Many veterans of the addictions field recognize that recovery is a long term process. In my approach I talk about stages of recovery that occur over a period of seven years and longer. Acknowledging the Positive Sides of Addiction

At first, most clients think it is ludicrous when I ask them to tell me all the positive things their addiction does for them. They see their addiction like a cancer that is not part of them and needs to be removed quickly and completely. Yet after we talk more and they begin to see how tightly they have held on to their addiction, treating it like a cherished lover or friend, they begin to see that their addiction means more to them than they originally had thought.

Kevin remembered breaking down in tears when he could accept that his relationship with alcohol was not all bad. "I had turned to her in good times and in bad. She was there for me when no one else was. Even though things became destructive in the end, we had some wonderful times together. It was like thinking about an old lover. I knew we could never again be together, that we were destroying each other, but I still mourned the loss and cried for the love that never would be."

Clients almost always express a tremendous sigh of relief when I tell them they don't have to hate their addiction in order to move beyond it. In fact, hating it robs us of the ability to see it clearly and learn what need the addiction served in our lives. Rather than ripping it out, we can replace it with something better.

As men get more deeply into the recovery process, they find that confronting their addiction is a modern rite of passage. They are required to face death and the loss of their old way of life. But, as in all rites of passage, theirs is a rebirth into a new way of being. Recovery is, thus, a spiritual journey to wholeness.

In a society that has lost connection with ritual initiation, it is one of the few paths available that allows men to cut away the dead wood of their civilized prison and return to the wild path of the warrior. Addiction, thus is both a refusal to be “a good little boy,” and an attempt to find an authentic ground of being. Just as addiction is the dis-ease of lost self-hood, recovery gives us the opportunity to journey home.

Healing Our Intimate Relationships and Healing the Planet

The recovery movement, it seems to me, has evolved through three periods. Between 1935, (the year Alcoholics Anonymous was founded) and 1985, the focus was primarily on individual recovery. The question was how can I heal myself. The second stage began around 1985 as we focused on family issues and co-dependency. The question was how can I heal my one-to-one relationships. We focused attention on the father wound, our broken connections with our mothers, brothers, sisters, children, and mates. As we move into the 1990s the third stage is beginning as we focus on the addictive society. The question now becomes how can we heal our fragile planet?

Individual recovery will never be complete until we heal our interpersonal relationships. Individual and relationship recovery is useless if we continue to destroy our planetary life-support system. All three are necessary for total recovery.

We begin to see, for instance, that recovery requires us to see how our eating practices affect the planetary health as well as our personal health. We see that the same trans-national corporations that push alcohol and nicotine on young people in the U.S. are cutting down the rain forests in the Amazon. It does little good to recover from our drinking problem, only to die from skin cancer due to a depletion of the ozone layer.

Just as Martin Luther King, Jr. realized that freedom for African-Americans required that he focus beyond the individual to the forces that were sending men off to a war in Vietnam, so too must we recognize that recovery requires that we confront the social forces that feed the machine of addiction.

What I've Learned on the Recovery Path

Over the past thirty-nine years I have worked with over 10,000 people, perhaps 70% of them men. It has been a privilege to be part of these people's lives and to acknowledge that I have received from them at least as much, and likely more, than I have given. There are a few people who I have kept in touch with over the entire period and many that I've known for ten to twenty years. Being able to see the recovery process over a relatively long time-frame, I've come to a number of conclusions which I'd like to share with you:

(1) Recovery is possible for everyone.

There aren't any problems, no matter how severe, any addictions, no matter how entrenched, that can not be healed. This reality came home to me when I worked with a man who had multiple

addictions and been severely sexually abused as a child. As his story unfolded he told of the intense guilt he felt at having killed a man in a fight and the shame at having repeatedly abused his own daughter. Treatment was lengthy, but he did recover.

(2) Recovery is a life-long process.

Rather than an illness to be overcome, it is more like a spiritual journey that we have the opportunity to pursue. For men, recovery often begins as a rite of passage and continues as quest to find our lost selves.

(3) Recovery is not an event, but a journey through specific stages.

Just as there are certain developmental stages that a child goes through when moving from infancy, to toddlerhood, to adolescence to adulthood; so, too, are there stages of recovery. Completing each stage is like taking off a ring of leaves from an artichoke as we move closer and closer to the center.

(4) Manhood is not achieved simply through biological maturation. There are tasks that all males must accomplish if they are to become authentic, mature men.

In traditional cultures these tasks were taught to young men by their male elders. In contemporary society where male initiation is often lacking, men grow up feeling like adult-children rather than mature men. Identifying and completing the tasks allow men to develop a sense of mature masculinity.

(5) Developing mature masculinity and recovering from addictions are opposite sides of the same coin.

The men's movement and the recovery movement have often been treated separately. I believe they are intimately related and must be worked on together. Addictions develop as a result of the wounds we experienced as men. As we reverse the effects of our addictions we also reclaim and heal our masculine selves. As we deepen our experience of manhood we must confront and heal our addictions.

(6) Each person is unique, and personal timing must be respected in healing men's addictions.

One person may go quickly through the stages and tasks, moving, more or less, systematically from one stage to the next. Another person may take much longer. He goes from stage one to stage four, then on to three, and back to one. He may have many detours in between. There is no right or wrong way to do recovery.

(7) Everything is part of recovery. We can't really "relapse."

I used to think of recovery as being all the "good" things we do for ourselves--i.e. going to

meetings, doing therapy, learning about health, etc. If someone used drugs again, or started getting back into old patterns, I felt like they were outside the recovery process.

But I've found that we learn as much from our "slips" as we do from our successes. There is a saying that summarizes this view: "If things don't go right, they go left." There is no "good" and "bad" in recovery. All our experiences are part of the healing.

(8) There are inherent differences between men and women.

In a dominator culture like ours where "different" often means "inferior," it is not surprising that many argue that inherent gender differences do not exist.

Though we may not be able to scientifically define the difference between male and female, we feel the powerful energy of maleness and femaleness whenever we are in the presence of the other.

The real resolution to gender conflict is not to develop a unisex approach to life, but rather to recognize the mystery of male and female and to change the dominator culture to one of partnership, so we can allow the differences to enrich our relations, not stifle them.

(9) Men must honor and develop the deep masculine functions before we can integrate the feminine functions.

Many men have recognized that there are destructive aspects to the male role. Psychologist Shepherd Bliss calls this "toxic masculinity." In our desire to heal many of us have sought to find health by drawing on the feminine. If the male role is destructive, we thought, maybe the women have a better sense of what is healthy. The result has been a poisonous dependency on women where we have become locked into destructive relationships and taken on women's toxic femininity.

Rather than rejecting our masculinity in favor of the feminine, we must go deeper to reconnect with the source of our authentic manhood. This can only be done in the company of other men. Having reowned our manhood we can then enter into healthy relationships with women (who have done their own healing in the company of other women) and integrate the feminine into our lives.

(10) Men and women have much in common in their recovery and there are also important differences.

I have found that men and women go through the same stages of recovery. However, the genders differ in the issues that each must confront while moving through the stages. For example, in working through intimacy dysfunction men often become addicted to sex while women get hooked on relationships. In going through the band of shame, men often ask "am I tall enough and strong enough," while women will ask "am I thin enough and pretty enough." Each gender has different tasks to accomplish in healing our wounds and returning to our true selves.