The Theology and Addiction: How do Spiritual Traditions View Addictive Disease?

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Disease: A physical and spiritual disorder

- Since ancient times, disease has been thought of in both physical and spiritual terms.

- While science has dispelled mythical beliefs about spirits “causing” disorders, many people still discern a spiritual component to disorders of behavior.

- With this in mind, it is important to examine ways in which different faiths approach an understanding of addiction and how scientific and spiritual approaches can or cannot work together.

- Science has many different views and so do spiritual traditions.

- Not surprisingly, not all faiths agree about how to approach “wrongful” behavior – which is how addiction is to be understood historically.
What is “Spiritual”?

The term, ‘spiritual’ has multiple and varied meanings.

It is, perhaps, more of a combined feeling/thought than a purely abstract idea.

It is a dimension or quality of human experience.
Usually, the term implies an awareness of, or belief in, some essence or being that transcends the everyday, observable, historical world.

It conveys the idea of belonging to something beyond self, and this may include membership beyond family, social group, or place in history.

Conversely, it may mean a special membership in a group of fellow believers.

It can be conveyed as a belief in a god, many gods, spirits in natural objects or totems (animism and shamanism), or a vague “higher power.”
The application of science to the understanding of spirituality presents numerous problems.

It is difficult to get people to talk about many of their deepest held beliefs, thus it is difficult to collect data on this.

It can be difficult to have discussion because the likelihood of disagreements in theology or beliefs is very great.

It is also difficult to differentiate spiritual beliefs from other related concepts – religious beliefs, ethical and moral principles, aesthetic preferences, etc.

Galanter suggests that spirituality can be classified as a latent construct much like personality or culture – that is, something that can be inferred but not directly observed (2006).
A review of 265 books and papers on spirituality and addiction revealed considerable diversity and lack of clarity in the understanding of spirituality.

Very significant biases were found in the literature, almost all of which was from North America.

Almost all the literature focused on 12 Step approaches and Christianity.

Only 12% of the papers even defined spirituality.
1. Relatedness: The importance of interpersonal relationships
2. Transcendence: The awareness of a transcendent dimension to life – something greater than can be seen in the physical world
3. Human distinctiveness: The belief that humans are categorically different from all other animals and everything else in creation
4. A “soul” or “inner being”
5. Ultimate meaning or purpose to creation and events
6. Authenticity or truth: That is, that there is a knowable truth that overrides other beliefs

7. Values – hierarchy of values – “this is good, that is bad” – a concept of evil
8. Non-materiality: a view that there is a spiritual dimension in distinction to the material dimension
9. Spirituality versus “religiosity”
10. Holistic quality: Wellness, wholeness
11. Self knowledge/self actualization
12. Creativity of the human
13. Consciousness and awareness

What’s missing from this list

1. Belief in the afterlife and its relation to addiction or recovery
2. Thirst for justice – i.e., that God will make things right – at least in the afterlife or at the end of time
3. Forgiveness
4. Personal relationship with a deity
5. Source of strength and support
Client attitudes about spirituality

- A study of inner-city HIV-positive methadone maintenance clients found spirituality as a source of strength (Arnold, Avants, Margolin, & Marcotte, 2002).

- Galanter (2007) suggested that addiction could be expressed in spiritual terms using these criteria:
  1. Loss of sense of purpose due to substance use;
  2. Feeling of inadequate social support because of addiction;
  3. Moral qualms about substance use in spite of persistent use, and
  4. Loss of the will to resist temptation when the substance is available.

From Discussion with Substance Abuse Project Staff (KRCC): Client statements about spirituality

- Most clients used to belong to a specific church community but no longer do.

- Many had bad experiences with present or former members of those church communities.

- There are some clients who would like to get reengaged with a religious community but they tend to be inhibited in doing so by their own guilt and the fear that others will judge them negatively.
Implications for us

- It may be important to proceed carefully and cautiously in addressing this topic with clients.

- It may be critical to be respectful of individual differences in religious and spiritual beliefs and values.

- Clinicians will need to be open and prepared to work within the value system of the individual client.
Do all religious/spiritual traditions view addictions the same way?

Nope.

In the U.S., the predominant religious perspective is informed by Judeo-Christian thinking.

The 3 revealed religions share a belief that most behaviors that we now characterize as addictions would fall under the general idea of sin and a sin against God – Allah, Adonai, Theos.

Eastern religions view sin more as a violation of moral order or as delusion and the Native American sees it as a life out of balance.
The Judaic Perspective
Sin in Judaism

Sin in Judaism has traditionally been seen as a rebellion or defiance of an commandment by Adonai.

Unlike Christianity, it is an act, not a state of being – one is not born with it and humans have the ability to make the choice to obey or not. In fact, being born a Jew is to be born in privilege as one of the chosen people.

Addiction falls perhaps most closely under the Hebrew words ‘Avon’ – a sin of uncontrollable passion or ‘cheht’ – ‘missing the target’.

Atonement can set the person back on track and the atonement may or may not satisfy Adonai, but the general tenor of the Torah and Talmud is that repenting and amending ways will bring one back into the fold.

Once the actions are again correct, one can be back in the good graces of Adonai.
Addiction in Judaism

In recent times, many Jews have come to see compatibility of the 12-Step approaches with Judaism – with some modification.

The injunction of the later prophets (Amos, Hosea) to “return, O Israel!” resonate with the urgency of the call to recovery embedded in the 12 steps.

That same sense of bringing an individual’s behavior back in line with the commandments is applicable to addictive behavior.

As with Islam, there is less focus on the state of the person (an addict needing recovery/salvation) and more on the behavior (following the commandments).

However, the Jewish view of AA/NA is more as a tool to recovery rather than the recovery itself.
The Islamic Perspective
• Sin is anything that is contrary to the will of Allah.

• Following the law of sharia, one avoids sin; violating these laws means punishment, while repentance can mean reprieve.

• Use of alcohol ("Khamr"), let alone abuse, is expressly forbidden in the Qur’an and in the Hadith. Substances “veil” the mind. They are haram.
The Islamic Perspective

- Opium and cannabis have been the most widely used drugs throughout Islamic history – not alcohol. Hashish has been widely used in Arabic/Persian Islamic culture (the word ‘assassins’ actually comes from hashish).

- However, the central moral entity in Islam is the *ummah*, the community – the individual is subsidiary to the *ummah*.

- An individual’s violation of law places the *ummah* in danger; therefore the *ummah* can sanction sin. Hence, recovery of the individual is for the primary good of the *ummah* and punishment of sinful acts may be public as it was in many Christian communities until the 19th C.
Addiction in Islam

- Treatment is possible and “Allah is merciful” to the individual who repents and brings behavior into accordance with the teachings.

- The 12-Step approach is basically compatible with an Islamic perspective.

- However, there is no focus on individual will as an independent deciding entity – more a matter of simply adhering to the will of Allah.

- In Islam, everything that happens – even negative events, are “inshallah”, according to Allah’s will. Human will is an illusion.

- If you recover by following the Qur’an, inshallah; if you die of your addiction, inshallah.
The Buddhist View

It is included here, but while it may be classified as a spiritual way, it is more of a psychology than a religion.
Buddhist view of “sin”

- Buddhism has no real clear presentation of sin. Some schools have incorporated a list of “don’t do’s” but these are loosely tied to any central moral construct.

- Whatever we mean by “sin” is, in Buddhism, delusion – avidya – the deluded attachment to illusory objects (even mental objects) in the world.

- Attachment to anything is wrongful and deluded and addiction, is by definition, the ultimate attachment. Even attachment to being pure is delusion.

- Attachment is the cause of all sorrow, anger, grief, and a host of negative outcomes.

- Harm to consciousness passes on through time as does all consciousness— one of the most powerful ideas in Buddhism. (Has close affinity with Richard Dawkins idea of memes).
Buddhism and Addiction

Recovery in Buddhist thinking is to be found in understanding the 4 noble truths and practicing the 8-fold path of right thinking, right feeling, right intentions, right actions, etc.

1. Living entails suffering.
2. The origin of suffering is attachment.
3. The cessation of suffering is attainable.
4. The path to the cessation of suffering is to follow the eight-fold path.
Not redemption from sin

Buddhism is interested in relieving the suffering of all sentient beings – not in saving them or converting them into morally better persons.

The Bodhisattva vow is:

- I will be a bridge, a boat, a ship, for all who would cross over.
- I am the nurse, the doctor, the medicine, for all who would be well.

The 12-step approach is likely seen as another attachment, not a path to liberation, though community is stressed as part of the process (the buddha, the dharma, the sangha).
Native American
Native American

- There are 562 Native American Tribes and nations with at least 8 major linguistic groups in the U.S.

- Very great diversity in beliefs – shamanism very prominent, totemism and animism as well.

- A reverence for natural harmonies, being one with the earth, with humankind, being but one among the many beings.

- The ideal state of acting in accordance with the natural balance would mean that addiction lies outside acceptable behavior and was brought to “the people” by the wasichu.

- A life of addiction means life out of balance (koyaanisqatsi) AND it means falling prey to the White man’s power over the People.

- Addiction, as opposed to drug use, is an important distinction
  - Drug induced mental states are not seen as bad, but may lead to greater perception of one’s totem and identity with earth forces.
A growing investment in recovery among Native Americans who experience very high rates of alcoholism.

The White Bison movement, a Native American variant of 12-Step approaches, is at the forefront of these efforts. Introduces the idea of “wellbriety.”

This approach also involves the Medicine Wheel of recovery – talk around a circle of recovering persons. The circle being the wholeness of being.

White Bison states that alcohol addiction is “a symbol of efforts to exploit and destroy” the people and it sees recovery as essential to the preservation of the people.

It uses traditional native cure processes to treat alcoholism including sweating ceremonies and other practices.

White Bison also has a mixed political/treatment agenda.
Confucian and Taoist views

- These two Chinese views of the world still influence Asians – particularly in the non-communist countries. Confucian values have significant impact on Asian Americans.

- Great emphasis on respectful behavior and maintenance of familial order. Addiction that disturbs the harmony of the family – particularly the elders is wrongful and should be corrected.

- The central moral entity in Confucianism is the family and social order.

- And the major ethical emphasis is on performing the rites, which refer to correct behavior that convey proper rank and respect.

- Benevolence is highly valued.
Tao = the way, the path

• Includes the yin and yang, the fundamental dualisms (light/dark, warm/cold, strong/weak) throughout all creation.

• For human conduct – emphasis on ‘wu-wei’ – non action or non-intervention. Human intervention often imposes disturbance of the natural harmony of the way.

• In application to addiction, the behavior would be seen as diverging from the way.

• To correct the behavior, a change in awareness and practice is called for. Settle for the emptiness of things, taking comfort in the natural way of things and the feelings they generate.
Christianity and Addiction
Christianity does not encompass a single world view. There are Orthodox, Protestant (and within that, countless varieties), Catholic, and many other traditions with their own interpretations of human behavior.
A central Christian tenet

With all that diversity, one of the major components of Christian thinking that relates to addiction is the concept of a sentient, morally capable self.

Arising in the context of a largely Roman cultural environment where one’s sense of self worth and meaning were derived from social connections, family status, and legal obligations,

- Christianity gave people a sense of personal identity in which one’s value completely transcended current social status or ties.

- A slave was still a slave on earth, but in the afterlife, the slave and the senator had the same status as Children of God.

Christianity pretty much gave birth to individual consciousness and self consciousness.

With that, individuals were assigned responsibility over their actions, choices, and consequences.
In addition, one was responsible for one’s mental state, since *it was known by God.*

In the Roman world view, what was in one’s head stayed there. Even the gods usually had to watch a person’s actions to figure out intentions or even ask the person what he was doing.

With a new emphasis on *internal mental states* and responsibility for sinful actions or thoughts, the ground work was laid for the Western interest in psychotherapy as part of self improvement.

Treatment and recovery developed because with individual consciousness, one could appeal to an internal locus of control for change that led to being a better person.

In Hellenistic philosophy, there was an extensive literature on how to control unconstructive thinking that led to poorly regulated behavior.

The Greco-Roman world view was that “bad” behavior was simply *any behavior done to excess.* Hence improvement was a matter of curtailment, not conforming to a moral imperative.
However,

There was a rub in all this emphasis on individual consciousness.

The Christian world view also included a very complex understanding of the nature of humankind as innately flawed – flawed in ways that went beyond any conscious choice or action by any individual.

Therefore, while it elevated the importance of individual consciousness, Christianity also did not trust individual consciousness to figure things out or to gain salvation on its own.

This fundamental flaw of sinful being was expressed in sinful actions or thoughts, but the sin itself was deeply woven into the fabric of being human.
Augustine and sin

The Augustinian view of sin has had wide influence throughout Christendom. His thinking on sin contains the following main ideas:

1. Sin cannot be alleviated by any act of will because sin is inherent in the human being – comes with birth.
2. The human will is the source of the sin.
3. Redemption and salvation can only be had by surrendering to God’s grace through faith.
4. Redemption and salvation are also to be had by becoming one in the fellowship of the faithful, the Holy Catholic Church.
5. Grace is there if one is open to it – prevenient grace. And, grace can be rejected by the individual will (cf. Arminius)
In addition....

Christianity, somewhat uniquely among religious systems also evolved a concept of a “sinner” as a state of being which goes beyond the notion of a person who commits sinful acts and which can apply especially to individuals who do not repent and repeat their wrongful acts.

This way of understanding wrongful behavior has perhaps contributed to the idea of a person being not just addicted, but of being “an addict”.

This concept is not really embedded in the other 2 revealed religions (with the partial exception of Shia Islam).
Two Christianities

Christian counselors or recovery support service providers who wish to practice compatibly with what science offers about addiction may need to consider which voice of Christianity they must speak with.

- 1. The Gospel voice, articulated through the words and actions of Jesus, consistently (with one exception) teaches by acceptance and shows appreciation for suffering. This voice is aimed at individual persons and helping them accept God’s love.

- 2. The Pauline voice was a message to groups, to congregations and had to do with regulating behavior and getting a shared belief system.

Contemporary public Christianity is almost entirely of the Pauline kind.

Effective clinical roles are almost exclusively of the gospel kind. Blurring of the two will likely interfere with any attempt at recovery assistance and will be counter to what is known from the science of recovery.
Another factor to consider....

In the U.S., there have been 4 periods that have gotten the label "Great Awakenings."

In these periods, Christianity underwent a populist phase – the most notable one for us in Kentucky occurred from 1730s -1740s among the middle colonies and the Scots-Irish (McCauley, 1995). Others were from 1800s – 1830s, 1880 – 1900s, and 1960s – 1970s. Some say we have been in one for the last decade.

The tenor of the Great Awakening was to extol a religion from among the people - a grass roots movement – not from the institutional church down to the faithful.

The emphasis was on a revivalist approach which has greatly affected Christianity in all of the U.S.

“God-instituted emotion or religious experience unmediated by direct human manipulation” (McCauley, 1995; 15).
## AA/NA and Augustine (via Arminius)

### Augustinian Christianity

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<tr>
<th>Statement</th>
<th>Explanation</th>
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<tr>
<td>Sin cannot be alleviated by any act of will because sin is inherent in the human being – comes with birth and it is a disease.</td>
<td>You are born with the disease of alcoholism and cannot will yourself to not be an alcoholic.</td>
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<td>The human will is the source of the disease of sin.</td>
<td>The will that decides <strong>against</strong> a drink is the same will that decides <strong>to</strong> drink <strong>because the will has the disease</strong>.</td>
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<tr>
<td>Salvation can only be had by surrendering to God’s grace through faith. And grace is automatic to those who seek it.</td>
<td>Recovery can only be had by surrender to a higher power. One declares one’s powerlessness in the very first step and if one is open to recovery, it will happen.</td>
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<tr>
<td>Salvation is also to be had by becoming one in the fellowship of the faithful, the Holy Catholic Church.</td>
<td>Recovery is also sustained by working the 12 steps through lifelong attendance and “belonging” to AA/NA.</td>
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<td>There is freedom of the will – but the essential freedom is to will toward good or toward evil – if toward good then grace takes effect.</td>
<td>To be in recovery one must commit to the recovery – i.e., “want to be in recovery” - if one commits, the process will work.</td>
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Celebrate Recovery: A Christian Variant of 12-Step Process

1. **Realize I’m not God;** I admit that I am powerless to control my tendency to do the wrong thing and my life is unmanageable.

2. **Earnestly believe that God exists,** that I matter to Him, and that He has the power to help me recover.

3. **Consciously choose to commit** all my life and will to Christ’s care and control.

4. **Openly examine and confess** my faults to God, to myself and to another person whom I trust.

5. **Voluntarily submit** to any and all changes God wants to make in my life.

6. **Evaluate all my relationships,** offer forgiveness to those who have hurt me and make amends for harm I’ve done to others when possible, except when doing so would harm them or others.

7. **Reserve a daily time with God** for self-examination, Bible reading, and prayer in order to know God and His work for my life and gain the power to follow His will.

8. **Yield myself to be used by God** to bring this good news to others, both by my example and by my words.
Lasting change takes more than communicating the good news of recovery.

However, it is possible for a faith-based approach to live peaceably and compatibly with a scientific understanding of addiction.
To build a bridge between the scientific and religious perspectives, it is critical to disengage from the idea of addiction as sin in the accusatory or judgmental sense.

Individuals with substance abuse do exhibit what appears to be acts of will to continue their dependence. However, one must remember that it is the will-forming parts of the brain are severely affected by substance use.

Thus, even when “dried out” addicted individuals are not restored to a truly drug-free brain. They have residues of many neurochemical and even anatomical problems to overcome.
Science and the religious views of addiction: How they differ

- A scientific understanding of addictive disease assigns very different role to individual will in causing the disorder and in recovery. In the evidence-based approaches, it is viewed as readiness for treatment or motivation for treatment.

- Religious systems have traditionally looked at addictive behaviors through a moral lens – something that has only rarely been applied to other diseases in the past 200 years. (Exceptions, AIDS/HIV, STIs).
Contemporary faith-based interests in addiction have embraced much of the scientific perspective, reserving a role for the spiritual dimension of the disorder.

The 12-Step approaches form a possible link between science and faith-based approaches.

Science has only minimally studied 12-Step approaches but some research suggests positive outcomes for those who use self-help approaches.
Another difference: Recovery and the family

- The widely used substance abuse treatment approaches are centered on the individual and may be guarded about family involvement.
- One reason for this is that many individuals with addiction have family members who also use drugs and alcohol and their continued use threatens recovery.
- Also, damaged relationships pose a threat to recovery.
- Contemporary Christian values place a very high premium on restoring the family. The emphasis on recovery within an intact family may be a risk factor for some and a protective factor for others.
- The scientific view would take each on a case-by-case basis rather than having a general principal in favor of keeping the family intact.
Recovery? Treatment? Faith? Science?

- Treatment (based in science) may be compatible with faith-based orientations.

- Recovery, with its emphasis on the spiritual dimensions, is clearly affiliated with faith-based approaches.
The claims of the effectiveness of AA and NA have been very difficult to support. The anonymity has made careful follow-ups with those entering AA or NA virtually impossible.

However, in controlled outcome studies, formal treatment seems to have more positive outcomes for those who also participate in AA or NA.

It is not clear whether the AA participation is indicative of greater motivation or if it is the actual participation in the intervention that works.
Compatibility

The scientific and faith-based approaches can work compatibly when:

– The faith-based approach takes brain and physiology differences into account when assessing the person who is addicted;

– When the faith-based approach relies more on the pastoral than the preaching mission;

– The faith-based approach listens to the individual’s stage of change and readiness for help and change; and,

– The faith-based approach can accept or accommodate other interventions along with the faith-based approach (such as using medications along with the faith-based approach).
Is it using one’s own beliefs or following the client’s?

A significant ethical issue resides in these practices.
- If we only teach clients to grow in our own spiritual or religious tradition, we may well violate professional ethics, which, for most MH and SA professionals call for respect of each client’s value system.

- Perhaps we should become conversant in multiple spiritual traditions (even within Christianity) in order to meet the spiritual needs of our clients at their level.
IF the religious perspective can embrace science on how addicted brains are different from others ….

…and use this information to moderate moral judgment about the addictive behavior,

– then there is no reason why faith-based approaches cannot be compatible with science-based approaches.

Exclusive reliance on a born again approach to recovery is unlikely to be effective and is clearly in contradiction to the science on addiction.
Most importantly, addictive disease is a very complex condition and NO ONE WAY has been found to be uniformly effective for all people.

BOTH evidence-based practices and recovery support services can become dogmas with one-size-fits-all approaches!!!!!!!

Dogmatism – even in favor of evidence-based practices – is, in the Buddhist description, avidya, an ignorance and delusion.

Keeping an open mind with every client – very important and perhaps very spiritual as well -

Recognizing that the paths of recovery are as diverse as the number of substance-dependent individuals is perhaps the key for everyone to remember.
On the other side

Science does not have all the answers about addiction either.

While much has been learned, much, much more is still in darkness.

Science must remain open to all the many unknowns and the possibilities of hope offered by the faith-based approaches.

Life is complicated,
- so, too, is addiction,
- so, too, is recovery.