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FAITH BASED PROGRAMS IN THE TREATMENT OF SUBSTANCE ABUSE

Rhonda G. Burnett

SIU, rhondab59@siu.edu

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FAITH BASED PROGRAMS IN THE TREATMENT OF SUBSTANCE ABUSE

by
Rhonda Burnett
B.S., Southern Illinois University, 2008

A Research Paper
Submitted in Partial Fulfillment of the Requirements of
Master of Science

Department of Rehabilitation
in the Graduate School
Southern Illinois University Carbondale
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RESEARCH PAPER APPROVAL

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A Research Paper Submitted in Partial Fulfillment of the Requirements for the Degree of Master of Science
Approved by: Dr. Stacia Robertson, Chair

Graduate School
Southern Illinois University Carbondale
November 20, 2014
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CHAPTER 1

Introduction

The medical community has recognized for years that addiction is more than a lack of will power or moral failing. By applying the “disease model” of addiction a working definition states that it is a “primary, chronic disease of brain reward, motivation, memory and related circuitry” (American Society of Addiction Medicine, 2014). Another current simple description, formed after several advances in neuroscience, brain imaging and behavioral research, describes it as “a complex brain disease that affects behavior” (The National Center on Addiction and Substance Abuse at Columbia University, 2014). The addict knows it as an uncontrollable craving to seek out and use a substance or a behavior that is necessary to their perceived well-being. But until science is able to create a cure in a capsule, the single most sought after treatment for alcohol addiction continues to be Alcoholics Anonymous. The Twelve Step Programs (TPS) as initiated from Alcoholics Anonymous (AA) has long been recognized as a standard of practice in the treatment of addictions. It is still the most commonly sought source of help for people with alcohol problems (Mullins, 2010). In addition, the steps have been applied to other substances such as narcotics (NA), cocaine (CA), gambling (GA), overeating (OA), and sexual behaviors (SAA) to aid in recovery from substances and behaviors that hijack the reward center of the brain.

The forerunner to Alcoholics Anonymous was the Oxford Group formed at the turn of the 20th century. The Oxford Group tried to recreate principles of first century Christianity. The basic assumptions of the group was that a) human beings are sinners; b) they can be changed; c) confession is a prerequisite to that change; d) the changed person has direct access to God; e) that the age of miracles has returned, and f) the changed are to change others. (Mullins, 2010)
While the founders of AA split with the Oxford groups over various reasons, these tenets helped forge the current Twelve Steps as they are read today. These Twelve Steps are guiding principles for recovery from addictive, compulsive, or other behavioral problems, and provide a step by step blueprint to follow for those wishing to recover from alcoholism (Miller, 2013). One of the reasons the steps were modified was to allow anyone coming in to seek help from “a seemingly hopeless state of mind and body” (Alcoholics Anonymous, 2001). Even while AA has sought to be all inclusive, welcoming into its ranks those with any, all and no religious ideations, it has nevertheless been accused of being a quasi-religious community based upon Christian ideology. One criticism of AA is that several Christian prayers have been associated within AA meetings (Thatcher, 2011), although that tends to be a cultural and or regional practice (Greenfield & Tonigan, 2013); prayers like “the Lord’s Prayer or the Our Father” prayer as recorded in the Bible in the gospel of Matthew, the Serenity Prayer (while not found in the Bible it has been attributed to a Christian source) and The Prayer of St. Francis of Assisi referred to as the Eleventh step prayer (Twelve Steps and Twelve Traditions, 1974). Participation in the prayer is not required and is usually announced as “we will close with the Lord’s prayer for those that care to join in,” yet those of a different religion or no religion at all may find these prayers offensive.

Conversely, for some people who identify as Christians, AA’s spiritual hybridity has been an issue. The idea of “God of our understanding” is not enough. Those individuals seek out treatment where the Higher Power has a name even “a name that is above every name;” the name of Jesus” (Phillipians 2:9). Pastor Rick Warren from Saddleback Church in California established “Celebrate Recovery” in 1990 because of what he felt was the “vagueness” about the Twelve Steps concept of God (Celebrate Recovery, n.d.). While under the protestant flag there are still many different denominations where doctrinal differences play a part in the schism of
the “body of Christ”, each is aware that a personal relationship with a loving God is necessary for the recovery from addiction. This paper seeks to answer the role religion plays in faith based recovery treatment programs that have been researched and reported on.

Background of the Problem

One of the unresolved issues in the research into effective treatment for substance addiction is what constitutes religion and what constitutes spirituality. Research into the area of the effect of religion on substance addiction invariably seeps over into spirituality and vice versa. Since those two concepts are similar yet different the scope of the paper has blurry edges. While it is true that one can be spiritual without identifying any form of religion, it is impossible to embrace the religious without acknowledging the spiritual. The overlap has played out into most of the research available and will be seen here. While the terms are sometimes used interchangeably, spirituality can be viewed as the individual’s connection with God or the “Transcendent” and religion is the corporate expression of that connection (Hodge, 2011).

This issue is also visible in what constitutes the term “faith-based programs”. Secular treatment programs allow religious practices but consider them voluntary and unrelated to the treatment regime. However, faith-based programs fall into one of two camps; aspects of religious practices such as prayer and meditation are considered an integral part of treatment, while others see their particular religious practices as essential and necessitate participation in the observance of those tenets (Davis, 2014).

Finally, since many Americans are seeking spiritual access for their addiction problems, it stands to reason that there would be qualified trained professionals ready to assist in this endeavor. Historically, people in recovery, who have recovered through the application of spiritual means, have received training, whether academically or on the job, to assist in the
recovery of others in treatment programs. While many treatment programs introduce clients to the importance of spiritual disciplines as well as cognitive, emotional, social, and stress-reduction skills, many clinicians are not trained to incorporate the spiritual aspect in the clinical sessions (Hodge, 2011). Research suggests potholes and pitfalls that some clients may encounter while using religion and or spirituality as a means to recovery. A trained clinician is a valuable asset to these clients.

As the governing body of the rehabilitation counselor’s certification process currently the Council on Rehabilitation Education (CORE) does not have an agenda on spirituality in treatment except in the requirement that rehabilitation counselors be knowledgeable about a client’s disability in the holistic sense (i.e., physical, spiritual, sexual, vocational, social, relational, and recreational) and “culturally competent” (Council on Rehabilitation Education, 2014). However, the other program, the Council for Accreditation of Counseling and Related Education Programs (CACREP), does require “spirituality practices as good faith outcomes” as well as “understands the role of spirituality in the addiction recovery program” (Council for Accreditation of Counseling and Related Educational Programs, 2014). In the light of the advancement of the integration of these programs it is necessary that a rehabilitation counselor become grounded into treatment options available for their clients.

Significance of the Study

Current research shows 40 million Americans over the age of 12 are affected by addiction (CASAcolumbia, 2014.) and that 77% of Americans identify as Christian, with 52% Protestant, 23% Catholic, and 2% Mormon (Gallup, 2014). Given those figures, it is reasonable to assume that a high percentage of those people would want to incorporate their beliefs into a treatment for their addictions. Indeed, 84% of clients in the counseling process for addictions wanted more
emphasis on spirituality in treatment (Hodge, 2011). Faith based organizations offer a solution to this dilemma, either as a stand-alone treatment or a supplement to traditional solution focused outpatient therapy. While addiction takes many forms for the purpose of this paper we are talking about alcohol and other drugs.

In addition to the 12-step programs of recovery, today there are more faith-based programs besides the Oxford Group that are seeing results of lives changed through the application of religious pursuits. Navigation through this waters will introduce the reader to the application of spiritual disciplines such as prayer and meditation, Bible study and the Twelve Steps as well as the specific markers of the Celebrate Recovery, Lazarus Project, Potter’s House and “Victory Ministries”. This paper is to introduce the reader to these programs, their claims, what works, and the need for further research into this aspect of treatment of addictions.

Purpose and Objectives

The purpose of this paper is to review the literature from research done on Christian based recovery programs in order to gain a perspective of how their programs work in helping to facilitate recovery in substance abuse. The subject of spirituality and religion will be addressed as presented in the review of literature. This work is to provide readers information available to the importance of incorporating spiritual aspects into treatment as well as introduce the readers to outside organizations that can complement recovery and enable clients to take their socialization skills on the road. The literature will discuss the origins of spiritual recovery as birthed through the 12 steps of Alcoholics Anonymous, the influx of faith based organizations and what worked and what didn’t in the research. It is also a call to future research in an effort to provide training for qualified clinicians in the spiritual aspect of recovery. Recovery is a journey. These are the steps some have taken on that road.
Definitions

Addiction - According to ASAM (the American Society of Addiction Medicine) the short definition of addiction states in part that it is "a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations."

Recovery – As defined by SAMHSA (Substance Abuse and Mental Health Services Administration) - A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Spirituality – openness to God, nature or the universe where one experiences harmony with truth, feelings of love, hope and compassion; feelings of inspiration or enlightenment with a sense of meaning and purpose in life (Richards, 2009).

Religion – an organized system of beliefs and practices intended to mediate one’s relationship to God and the community (Koenig, McCullough, & Larson, 2001)

Christianity - religion based primarily on the Bible as the absolute word of God, the virgin birth, death, and resurrection of Jesus Christ, who is God incarnate and the Savior of sinful humans, the Holy Spirit as the essence of God and the need for personal conversion or “being born again” (Timmons, 2012).

12-step programs – based on the 12 steps created by Bill Wilson and Dr. Bob Smith in creating Alcoholics Anonymous. A listing of the steps follows:
1. We admitted we were powerless over alcohol—that our lives had become unmanageable.

2. Came to believe that a Power greater than ourselves could restore us to sanity.

3. Made a decision to turn our will and our lives over to the care of God as we understood Him.

4. Made a searching and fearless moral inventory of ourselves.

5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.

6. Were entirely ready to have God remove all these defects of character.

7. Humbly asked Him to remove our shortcomings.

8. Made a list of all persons we had harmed, and became willing to make amends to them all.

9. Made direct amends to such people wherever possible, except when to do so would injure them or others.

10. Continued to take personal inventory and when we were wrong promptly admitted it.

11. Sought through prayer and meditation to improve our conscious contact with God, as we understood Him, praying only for knowledge of His will for us and the power to carry that out.

12. Having had a spiritual awakening as the result of these Steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs. (AA, 2001)

The Lord’s Prayer/Our Father prayer: “Our Father, who are in heaven, hallowed be thy name.

Thy kingdom come, thy will be done, on earth as it is in heaven. Give us this day our daily bread and forgive us our trespasses as we forgive those who trespass against us. And lead us not into
temptation but deliver us from evil, for thine is the kingdom, the power, and the glory forever.

Amen” (adapted from the Bible)

Serenity Prayer – God, grant me the serenity to accept the things I cannot change; courage to change the things I can and wisdom to know the difference. (Twelve Steps and Twelve Traditions, 1974)

Prayer of St. Francis of Assisi – Lord, make me a channel of thy peace; that where there is hatred, I may bring love; that where there is wrong, I may bring the spirit of forgiveness; that where there is discord, I may bring harmony; that where there is error, I may bring truth; that where there is doubt, I may bring faith; that where there is despair; I may bring hope; that where there are shadows, I may bring light; that where there is sadness; I may bring joy; Lord, grant that I may seek rather to comfort, than to be comforted; to understand, that to be understood; to love, than to be loved. For it is by self-forgetting that one finds. It is by forgiving that one is forgiven. It is by dying that one awakens to eternal life. Amen (Twelve Steps and Twelve Traditions, 1974).

Celebrate Recovery’s Acrostic outlining the Eight Step plan based upon the Beatitudes in Matthew, chapter 5 and correlating with the 12 steps of AA

**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. *Happy are those who know they are spiritually poor.*

Matthew 5:3 (Step 1)
EARNESTLY believe that God exists, that I matter to Him, and that He has the power to help me recover. "Happy are those who mourn, for they shall be comforted.” Matthew 5:4 (Step 2)

CONSCIOUSLY choose to commit all my life and will to Christ’s care and control. "Happy are the meek.” Matthew 5:5 (Step 3)

OPENLY examine and confess my faults to myself, to God, and to someone I trust. "Happy are the pure in heart." Matthew 5:8 (Step 4, 5)

VOLUNTARILY submit to every change God wants to make in my life and humbly ask Him to remove my character defects. "Happy are those whose greatest desire is to do what God requires.” Matthew 5:6 (Step 6, 7)

EVALUATE all my relationships. Offer forgiveness to those who have hurt me and make amends for harm I’ve done to others, except when to do so would harm them or others. "Happy are the merciful. Happy are the peacemakers." Matthew 5:3 (Step 8, 9)

RESERVE a daily time with God for self-examination, Bible reading, and prayer in order to know God and His will for my life and to gain the power to follow His will. (Step 10, 11)

YIELD myself to be used by God to bring this Good News to others, both by my example and by my words. "Happy are those who are persecuted because they do what God requires.” Matthew 5:10 (Step 12) (Celebrate Recovery, 2014)
CORE – Council on Rehabilitation Education - CORE is the governing body that grants accreditation to graduate programs that provide academic preparation for a variety of professional rehabilitation counseling positions.

CACREP – Council for Accreditation on Counseling & Related Educational Programs CACREP is the governing body that accredits masters and doctoral degree programs in counseling.

Grounded theory methodology – method of assigning values to qualitative research to understand and explain human behavior through inductive reasoning processes (El Hussain 2014).
CHAPTER 2
Literature Review

Substance abuse recovery can be so much more than just sustained abstinence. In the broadest sense it is best understood as a process where abstinent individuals are making progress in positive ways in all areas of their life (Borras, 2010). They can improve their health and wellness, live a self-directed life, and strive to reach their full potential (SAMHSA n.d.). It can also be defined as abstinence from substance abuse and or a reduction in dependence upon substances and re-engagement in life (Lyons, Deane & Kelly, 2010). If recovery is defined as a process, spirituality can also be understood in the same construct.

Spirituality in recovery, as we understand it today, was birthed out of the text Alcoholics Anonymous. Founded in 1935, the original pioneers of AA were part of the Oxford Group, a Christian-based organization who based the idea of a higher power on the understanding of a “transcendental Christian entity” (Lyons, Deane & Kelly, 2010). The Oxford Group was a religious sect that tried to recreate first century Christianity practices. Even though AA separated from the Oxford Group shortly after the fellowship was founded, the Group’s principles and practices were the primary focus and development of the 12 steps (Dossett, 2013). Bill Wilson, one of the founders of AA, came to an understanding for the need of a spiritual cure to his malady after a visit of a friend of his who had been involved with the Oxford Group. Wilson embraced some of the tenets of the Oxford Group while rejecting others, specifically the exclusion of other faiths, agnostics or atheists. The language of the 12 steps was written to be all inclusive of the spiritual temperament of anyone coming into AA. The final step reads “Having had a spiritual awakening as the result of these steps” implying that no one was expected to “begin at a ten” but instead would find their spirituality as they went. The “Spiritual Experience”
appendix in the back of the Big Book, member’s fond name for the text Alcoholics Anonymous (AA 2001), reinforces the idea that some people come to their spirituality as a result of the journey or “the educational variety”. The importance of the spiritual experience is found as explained by Lyons, et al, states that “Experiential research has shown that the occurrence of a spiritual awakening while participating in a 12-step-based program can increase post-treatment abstinence by four times and that up to 82% of clients who experienced a spiritual awakening were completely abstinent at a one year follow up compared to 55% of non-spiritually awakened clients” (Lyons, et al pg. 530, 2010). With an estimated world-wide membership of over 2 million in 160 countries, more people turn to AA for recovery from alcoholism than any other program (Gross, 2010). It is the spiritual aspect of the steps that facilitates the recovery of so many individuals.

Benefits of Religion in Recovery

Religion and Science don’t always play nice together. It is hard to use scientific inquiry into such a deeply personal, individual and controversial topic. Maybe that is why there is not a lot of research on it. What we do know is that religion is protective against drug and alcohol use. The more a person is involved in their religion, the less likely they are to use (Moscati & Mezuk, 2014). Faith based programs (FBS) provide a place for addicted individuals to either come to embrace a newfound spirituality through religion or to practice their religious beliefs without the fear of stigma that might be felt in traditional worship services.

Faith based programs can also be understood as social programs or services that fall under organizations with religious ties and are often referred to as ‘‘intentional religion.’’ Intentional religion is the exposure to religion for a particular purpose at a specific time to meet a specific need (Dodson, Cabage, & Klenowski, 2011). Addiction is one of those reasons. Some of
these FBS programs are strictly religious and use Bible study and scriptures exclusively. Others incorporate the Twelve Steps and offer the same or similar types of rehabilitation programs and services but with a religious component, namely Jesus as the Higher Power.

While many Christian churches have started to be more involved in providing recovery support services for addiction through their respective faith communities, they don’t necessarily meet the definitions of addiction treatment or even mutual-aid fellowship. Whether the FBP offers intervention options alone or in partnership with traditional recovery programs they fill the need for religious involvement for those who desire such help (Timmons, 2012). In addition, some of the advantages of these types of recovery support is that they provide needs not addressed through addiction treatment or self-help groups. Faith based programs tend to reach beyond the addict to include family and community in the recovery process (White, Kelly, & Roth, 2012). Another benefit identified from a study of a faith-based residential treatment program in Taiwan – Operation Dawn – (similar to the American Teen Challenge program) was the finding between religious conversion and treatment outcomes. The study found that the residents who experienced a conversion to Christianity had longer treatment stays, which in turn produced positive outcomes in treatment. In addition, converts experienced marked growth in morality, compassion and self-confidence, by increasing their identification with Jesus (Chu, 2012). Finally, faith-based programs can improve abstinence outcomes by offering religious intervention options alone or in conjunction with secular programs, providing individuals with the opportunity for religious involvement (Magura, 2007).

Considering some of these benefits of faith based programs, a review of literature was conducted to ascertain the effectiveness of specific programs using faith based measures. Two studies, Brown, Tonigan, Pavlik, Kosten, & Volk (2013), and Timmons (2012), both studied
faith based programs that incorporated traditional 12-step recovery processes used in addition to religious practices. Brown et al, found that spirituality may be an important variable in treatment outcomes based upon a faith based 12-step recovery program. They used participants in the faith based program "Celebrate Recovery" to study whether or not self-efficacy plays a part in the ability to resist substance abuse. Timmons sought to explain how apart from religion and spirituality studies, specifically how Christian based recovery aids in the effectiveness of substance abuse recovery. The study was done with participants of the "Potter's House". The findings of this study identified how identifying God as sponsor provides abstinence and recovery. Two other studies done on faith based organizations looked at religious conversion as a deciding factor in whether or not individual were able to maintain recovery based upon spiritual disciplines as evidenced by religious studies and participation. Williamson and Hood (2012), were drawn to the "the Lazarus Project" by their stated success rates of 80%. However, the main focus of the study became on the spiritual transformation that occurs during the treatment process. The last study was done by Gowan and Atmore (2012), on "Victory Ministries" as part of a study to see whether or not the government funds appropriated for faith based ministries were well spent based upon results of this program.

**Celebrate Recovery**

One of the largest faith based programs to incorporate the Twelve Steps is Celebrate Recovery® (CR). While CR identifies itself as a "Christ Centered" (Celebrate Recovery, n.d.) recovery program, they do use the same Twelve Steps outlined in Alcoholics Anonymous. CR grew out of the desire of one recovering alcoholic, John Baker, to provide a safe place to share the victories he was having in his recovery from alcohol. He states he was not able to share with his Bible study group how Christ was setting him free from his addiction to alcohol because they
didn’t want to “go that deep”. Neither could he share this at his AA meetings without being mocked because of his stance as Jesus as the only Higher Power. He wrote a letter to his pastor about his vision for others who were in recovery to have a place to practice both their recovery and their religion. That pastor was Rick Warren, nationally known speaker and author of *The Purpose Driven Life*, and Senior Pastor of Saddleback Church in Southern California. Pastor Warren did his own Biblical research and determined that Jesus’ Sermon on the Mount, as told in the Chapter 5 of the Gospel of Matthew, went along with the theme of recovery. They created an acrostic of eight principles of recovery (see definitions), and tied those to Jesus’ sermon as well as the Twelve Steps of Alcoholics Anonymous and Celebrate Recovery® was born.

The CR website identifies the program as a “biblical and balanced program that helps us overcome our hurts, hang-ups, and habits. It is based on the actual words of Jesus rather than psychological theory” (Celebrate Recovery, 2014). It is a non-denominational program and any church may start the program as long as they hold to the basic DNA of the program, namely "Jesus Christ is the one and only Higher Power.” In addition, if a church uses the Celebrate Recovery ® name then the only curriculum to be used is the official Leader’s Guide, participant guides, and the CR journal. They must use the RECOVERY acrostic and the Scriptures outlined as the key points in the lessons. It is strongly encouraged to use the CR Bible in addition to the CR eight principles of recovery, as it is the only Bible that directly corresponds with the curriculum (Celebrate Recovery, 2014).

A typical CR meeting begins with an hour-long worship service with praise music and testimonies. The second hour is set aside for groups to congregate within their chosen small group based upon their identified “hurt, hang up or habit”. CR is a “small group” program and is gender specific as well as addiction specific. What this mean is that women share with women
and men with men. They are only together during the first hour of the meeting. Also, the groups are addiction specific. Only those having a problem with drugs and alcohol are allowed in the group for that addiction. And contrary to “AA speak” where a member identifies themselves as “an alcoholic”, in CR a member identifies as “I’m a believer and I struggle with alcohol” If they have a co-occurring disorder with sex addiction or overeating they can choose which group to participate in, but an individual who identifies as a sex addict or an overeater is not allowed in a substance abuse group unless they identify as a substance abuser too.

Does it work as a treatment for substance abuse? Celebrate Recovery® boasts of helping over 17,000 people at Saddleback Church with over 70% coming from the outside community since its inception in 1990. Current statistics from their website state that it has helped over a half a million people presently is in 20,000 churches worldwide (Celebrate Recovery, 2014). That figure is somewhat misleading though as it is based upon all participants of CR and not those who identify as struggling with drug and/or alcohol abuse. Since it has a broader focus and counts behavioral problems and concerns beyond substance use it has attracted more members than if the sole focus was on substance abuse problems only (Kelly & White, 2012). However, this study by Brown et al, is the only major study done with Celebrate Recovery participants. And it was not done to research the efficacy of the program in maintaining sobriety but rather was for research in testing whether or not spirituality serves in the establishment of confidence to remain abstinent in a religious 12-step program. Brown et al (2012), used the CR groups in their research demographics, and then compared the reported spirituality between those with high and low confidence in their ability to resist substance use. Questionnaires were handed out to only those CR participants who were present at a group that dealt with addiction to alcohol and other drugs. The results were based upon 91 respondent’s answers to an 8 item questionnaire that
measured self-efficacy, as well as a questionnaire about their spiritual involvement and beliefs. The spiritual beliefs were based upon 23 Likert scale items ranging from strongly disagree to strongly agree. The spiritual involvement measured frequency of prayer, meditation and engaging in spiritual activities involving at least one other person. They also used the elements of a drug history questionnaire to measure individual’s substance use, based upon the current length of abstinence and/or the amount used in the previous 30 days.

Independent of any other variables such as age, race, gender, income, marital status, substance use or length of participation in CR, those respondents who rated highest in the mean spirituality score were also found to have the greatest sense of confidence when it came to resisting substances us. Brown, et al, postulate that more research on spirituality as a potential mechanics of behavior change is warranted. They recommend further studies to see how Celebrate Recovery is able to provide help to substance abusers.

**Potter’s House**

Another study done on the combination of the Twelve-Steps in a religious setting was done by Timmons (2012). While there are volumes of research done on religion, and more on spirituality in recovery, there is very little research upon Christian based recovery and the effectiveness that undergirds it (Timmons, 2012). This study revealed an interesting finding on how Christian based recovery in a traditional 12-step programs revealed the concept of “God as Sponsor”. This research was done on participants in a Christian faith-based recovery program, based on the recommendation of the director of the Potter’s House, a residential treatment center in a small, urban, southeastern region in the United States (Timmons, 2012). The Potter’s House (PH) is a not-for-profit organization that seeks to facilitate residents with building and nurturing a relationship with God. PH is not a treatment facility but rather a “half-way house” for
individuals to release to after being in other institutions such as private recovery centers, detox centers or, in some cases, jails and or prisons. While there are standardized components the primary attributes of the facility is grounded in an evangelical Christianity. Their operations are reflective of the philosophy of the scripture found in the book of Jeremiah 29:11 which states, “For I know the plans I have for you, says the Lord. They are plans for good and not for evil, to give you a future and a hope” (Timmons, pg. 1155, 2012).

The Potter's House requires the individuals to participate in several different religious activities such as daily devotions and Bible studies led by rotating members, weekly church attendance, twice-a-week prayer meetings let by a recovering Baptist preacher and deacon, who also share their experiences of recovery from addiction. In addition they are required to attend Christian 12-step NA meetings three-times-a-week and recite the long version of the Serenity Prayer.

God, grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference. Living one day at a time, enjoying one moment at a time, accepting hardship as a pathway to peace; taking, as Jesus did, this sinful world as it is, not as I would have it; trusting that You will make all things right if I surrender to your will; so that I may be reasonably happy in this life and supremely happy with You forever in the next. Amen (Timmons, pg. 1155,2012).

They also have a version of NA twelve steps with corresponding scriptures as evidenced in Table 1. (Timmons, 2012 pg. 1153)
| Table 1               The Twelve Steps of NA with Corresponding Scriptures |
|----------------------|-----------------------------------------------------------------------------|
| **Step**             | **Scripture**                                                               |
| 1: I admitted that I am powerless over my addiction, that my life has become unmanageable. | I know nothing good lives in me, that is in my sinful nature. For I have the desire to do what is good, but I cannot carry it out. Roman 7:18 |
| 2: I came to believe that a Power greater than me could restore me to sanity | For it is God who works in you to will and to act according to his good purpose. Philippians 2:13 |
| 3. I made a decision to turn my will and life over to the care of God as I understand Him | Therefore, I urge you, brothers, in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God—which is your spiritual worship. Romans 12:1 |
| 4. I made a searching and fearless moral inventory of myself | Let us examine our ways and test them, and let us return to the Lord. Lamentations 3:40 Therefore confess your sins to each other and pray for each other so that you may be healed. James 5:16 |
| 5: I admitted to God, to myself, and to another human beings the exact nature of my wrongs | Humble yourselves before the Lord and he will lift you up. James 4:10 If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all unrighteousness. I John 1:9 Do to others as you would have them do to you. Luke 6:31 Therefore, if you are offering your gift at the altar and there remember that your brother has something against you, leave your gift there in front of the altar. First go and be reconciled to your brother; then come and offer your gift. Matthew 5: 23–24 |
| 6: I was entirely ready to have God remove all these defects of character. | So, if you think you are standing firm, be careful that you don’t fall. I Corinthians 10:12 Let the work of Christ dwell in you richly. Colossians 3:16 |
| 7: I humbly asked Him to remove my shortcomings | Brothers, if someone is caught in a sin, you who are spiritual should restore him gently. But watch yourself, or you also may be tempted. Galatians 6:1 |
| 8: I made a list of all persons I had harmed and became willing to make amends to them all | |
| 9. I made direct amends to such people wherever possible, except when to do so would injure them or others | |
| 10: I continue to take personal inventory and when I was wrong promptly admitted it. | |
| 11: I sought through prayer and meditation to improve my conscious contact with God as I understood him, praying only for knowledge of His will for us and the power to carry that out | |
| 12: Having had a spiritual awakening as a result of these steps, I tried to carry this message to addicts and to practice these principles in all my affairs | |
This Christianized version of these twelve steps from the Potter’s House are designed to (a) help the addict recognize God; (b) acknowledge addiction; (c) experience a sense of trust, humility, forgiveness, and mindfulness; (d) become aware of subconscious feelings; (e) disclose information about self (including personal faults) and harm done to others; (f) make amends; (g) pray and meditate; and (h) share the experience of recovery.

Timmons’ (2012) study was conducted on 10 African-American individuals over the age of 18 who were recovering from illicit drug use. This pilot study used grounded theory methodology as a qualitative inductive approach to interpret the social process data. Data collection was done to comprise demographic information as well as length of sobriety. After being apprised of confidentiality and the purpose of the study, the interview proceeded with open-ended questions. Participants were asked about their feelings on recovery, their religious faith, and what advice they would give clients going into recovery. Most individuals shared their descent into addiction and the slow journey out of it. The responses were audio taped and transcribed for research.

The data was then analyzed and the thematic element that came through was “understanding God as sponsor” (Timmons, 2012 pg.1158). This theory of God as sponsor consisted of the three elements of the analysis; acknowledging God-center crises, communicating with God and planning for the future. Participants were able to reframe their substance use as a mechanism for their conversion experience. They were able to relate how asking for help and coming into relationship with others as part of the “communicating with God”. Prayer and meditation, sermons and music, and reading inspirational material all fell under this heading too. Planning for the future was identified as recovery and “My plan is God’s plan” that allows participants to reconstruct the values and line them up with Christian ideology. According to
Timmons the idea of a sponsor includes one recovering person coming into relationship with another in an effort to help guide the spiritual growth necessary for recovery to take place. When the participants were able to understand a conception of God as sponsor, someone to be in relationship with the assistance in the daily trials of abstinence and growth they were able to sustain abstinence. They were able to describe how the relationship with God was the impetus for change, the power for change and the maintenance of the lasting change in their life. Daily communication with God was where they drew their strength whether that was from prayer, medication or Bible study. Several quotes from them follows;

If I don’t pray, all kinds of things pop-up.’’ ‘‘I went to use and then I asked God to help me, then the little voice come up in my head and say just for today, don’t get high and that day I don’t get high…and so far, it’s working’’… ‘‘I prayed and asked God to take this taste out of my mouth and stay off drugs and all this stuff’’… ‘‘If you can get it calmed down, joy comes in the morning (Timmons, pg. 1158-1159, 2012).

Overall the participants credited their recovery to their connection to God as presented through the scriptures and principles of the twelve steps, as well as through the interaction with other recovering men who had used the same programs successfully. They presented a united front with a success rate of one plus years of sobriety. This program worked for them when nothing else had. (Timmons, 2012)

Lazarus Project

In contrast to the previous two studies on 12-Step inclusion into Christian based programs, spiritual transformation, specifically Christian conversion, is at the heart of the research into the Lazarus project. This Pentecostal-Charismatic 12 month treatment program
operates out of The Carpenter's House ministry. The program is highly structured and focuses on Bible study as well as counseling, job training and community service. Their main perspective though is that conversion to Christianity is the only lasting safeguard for freedom from addiction. Little else is known about the program other than the information supplied by Williamson and Hood (2012), who chose to do a study based upon a reported success rate of 80%, which is not usually seen in treatment outcomes. While it was the outcome rate that initiated the study, the main focus became the conversion factor. Today, the term “spiritual transformation” has all but replaced “conversion” except in the religious arena. For the purpose of this study either term is used to signify the change in an individual, whether sudden or gradual, that leads to increased quality in relationships both vertical (with God) and horizontal (with others). This change is what is at the heart of the study. They theorize that those individuals who have had a conversion experience will remain abstinent from drug and alcohol use.

Williamson and Hood (2012), based their study on 102 individuals. Almost half of the participants (n=46) of which were church members for the control group. The second group was comprised of “dropouts” (n=34) males who would eventually leave the program before completion. The final group of males (n=22) were those who would stay and complete the program, these were the graduates of the program.

There were numerous instruments used in the study and were categorized into three groups; psychological assessments done on all three groups, religiosity instruments used in all three groups, and general survey questions that were only used in the post-graduation assessment with both religiosity and psychological tests. The survey issued only to the graduates of the LP, was comprised of questions regarding addiction as in drug and alcohol as well as tobacco use; legal, financial and employment issues; marital status, current living arrangements and the
quality of relationships on the familial, friendship, and mentor level. There were also inquiries into the amount of devotional time, church attendance and activity. Finally a Life Transformation Scale (LTS) was adapted for use from the 8 item, 7-point Likert scale to measure the degrees of personal change in the area of the spiritual and religious areas to a final ninth item: “The Lazarus Project has played a significant role in my religious/spiritual change.” Higher scores on the LTS reflect more life change due to spiritual experiences. The LTS was given twice to the graduates – once at graduation and again at the one year post graduation follow up. The other instruments used in the survey were given at four different times: At induction into the program, six months into it, at graduation (approximately 12 months) and one year post graduation. The first three assessments were administered by LP staff and the post graduations assessment was administered by the senior researcher via the Internet.

Interestingly enough there was not a lot of difference in the graduates and the dropouts at their initial assessments. The graduates did score higher in the “openness” part and surprisingly lower on the depression scale. Also, in the matter of religious orientation the graduates were similar to the dropouts except in the area of intrinsic motivations. The graduates saw religion as a source of meaning for their lives (intrinsic motivations) and embraced it as such as opposed to something to be used for a social benefit, such as not going to jail. The graduates also scored similar to the church member control group after graduation, indicating that religious conversion had occurred as well as spiritual transformation. Of the ones who were surveyed 67% had remained completely abstinent, and of the 33% who had not, none had returned to their former state of dysfunction, and had come back into recovery fairly quickly. From data collected from the LTS and through interviews with the graduates at 1 year, most had reported changing in a number of ways – both spiritually and relationally. With some of the discrepancies in the
psychological testing it was postulated that the dropouts may not have been unable to maintain sobriety but simply unwilling to accept a religious program. The researchers hope that screening assessments may be used in the future to match clients to programs that might best meet their needs. Of those that did complete the Lazarus Project there was documentation to suggest a transformation that played out in both the spiritual and relational areas of the graduates lives (Williams and Hood, 2012).

**Victory Ministries**

The final study presented in the review of literature is in contrast to the previous three. Gowan and Atmore (2012) did an investigative study into a large Midwestern treatment center that promises it’s most successful clients a new life “redeemed by Christ”. The researchers state that the use of the pseudonym of “Victory Ministries” (VM) is entirely coincidental to any actual locales of this name therefore, the only information about the facility is what the author provides. Since permission was denied to conduct research inside of the facility interviews were conducted with former clients and attending open church services where VM provided the choir. The study postulates that by funding “conversion” or faith based ministries the government is taking sides in the war on poverty and criminalizing it and downgrading the more inclusive institutions. The authors maintain that the faith based treatment facilities are disregarding research that states addiction is a matter of neuroscience and instead imposing moralistic judgment upon the addict. They theorize that across class and religion that most Americans believe that addiction is a moral sickness. They claim this idea came from Alcoholics Anonymous and the idea of sickness and sin and even though neuroscience has shown that in the brain lies the release of addiction that faith based organizations are still castigating people under the guise of moral deficits (Gowan and Atmore, 2012)
Initially there were nine participants who were found through the researcher's own social networks. Later, they recruited another 13 participants through the use of street flyers. This qualitative study was done using interviews and ethnography. While there is not a list of questions used during the interview, the results are broken down by reports on the rules and regulations regarding Bible studies and "therapeutic" curriculum. There are direct quotes from the participants, some positive, most were not. As part of the rules and regulations there were several notations on the length of the program. One of the conclusions the researchers drew was that the program was seen as an alternative to jail, and how that 13-month sentence was sometimes abrogated to the real thing. Gowan and Atmore (2012), summarize that 50% to 75% of those seeking “help” at Victory Ministries were doing so to avoid prison sentences. One of the respondents related how a fellow classmate was taken to jail anyway because he didn’t turn a man in for smoking. No smoking was one of the rules of the program, subject to a 30-day extension of the program if you were caught.

Even though the respondents stated they may not have agreed with everything Victory Ministries did, they did not complain. To do so would be tantamount to drawing a “target on your head”. One participant stated that while he didn’t believe he would be punished for not believing, the stigma of “not belonging” was enough to keep him quiet. However, another participant stated that Victory Ministries saved his life in that he learned to keep his mouth shut and listen and learn. He was one of those people who benefited from extrinsic motivation and welcomed the discipline and academic difficulty. Another one of the positive stories came from “Andrew” who stated that about halfway through the 13-month program he finally stopped craving meth. He states had he been in a traditional 28 day rehab or even 90 days it would not
have been enough time for the craving to leave him and he would have relapsed (Gowan and Atmore, 2012).

“Brendan’, another participant, stated that Victory Ministries was hard. He likened it to going to a “Bible boot camp”. Many of the other respondents related the difficulty of the lessons and equated it to school work. Not completing homework could land one on restriction, which might mean loss of phone privileges, recreational or outdoor access. Biblical studies were not the only lessons being taught either. Standardized therapeutic messages on topics like anger were introduced the same as in secular handouts but veered from the therapeutic to take on a Biblical message about pride and obedience and surrender. Placed after Obedience to God (which talks about the relationship between love and obedience and surrendering the rebellious heart) and Obedience to Man (“obeying your leader with love”), Anger and Personal Rights draws on the ambiguous of the idea of freedom not in the sense of man’s freedom but freedom from the egotistical demands of the sinful self (Gowan and Atmore, 2012).

In the Victory Ministries respondents also stated that they were forced to sing in the choir. The Victory Ministries choir participated in various churches. Gowan and Atmore (2012), stated that some of the respondents believed that was not about how well they could sing so much as how well they could upload the image of a good upstanding Christian. The respondents also reported that services were used to solicit donations, as well as to initiate contacts in the community for when the graduates were released. Participants in Victory Ministries were expected to find a home church that they could plug into before leaving the program, as ministry activities were required as part of the conditional release.

While acknowledging that programs such as Victory do in fact precipitate change for many individuals, the article ends with a diatribe about how the mainstreaming of Christianity
within the America government has led to increased funding into spiritual programs from generous government grants that seek to tie the cheaper faith-based agenda to reforming the sinner rather than treating the addiction (Gowan and Atmore, 2012).

**Summary of Research Literature**

In conclusion, this chapter focused on four programs that are currently being researched on the Christian-based recovery methods. Believers attending Celebrate Recovery, a Christ-center program that incorporates the 12-steps of Alcoholics Anonymous, were used for a study that measured self-confidence as a factor in resisting substance abuse. Brown, Tonigan, Pavlik, Kosten, & Volk, (2013) found that increased self-confidence was a mechanism for resisting substance abuse. Similarly, Timmons (2012), used participants from the Potter’s House, a faith-based recovery program for a Grounded Theory study that showed how combining twelve step philosophy with Christianity concepts allowed participants to related to understanding God as Sponsor and by communicating with Him, they were able to maintain abstinence. The conversion factor was the focus of the study done on the Lazarus Project, a religious program that seeks to facilitate a conversion to Christianity as the primary means to recovery for substance abuse. Williamson and Brown (2012), did a longitudinal study at one year post graduation to see if the participants were still seeing results in the lives based upon their previous conversion. And the last study by Gowan and Atmore (2012) on Victory Ministries, while not done for the express purpose of treatment outcomes, did find that conversion through the intensive Christian program was successful for allowing some participates to stay sober. All of these studies point to the efficacy of faith based programs as a viable treatment option for addictions.
CHAPTER 3
Conclusion and Implications

Are faith-based organizations a valid solution for the treatment of drug and alcohol addiction? Research shows that addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry and it affects behavior of over 40 million Americans over the age of 12 (ASAM 2014; CASAcolumbia, 2014). Any treatment that can provide a sustaining cure for addiction is necessary. The research also shows that 77% of American also identified themselves as Christians (Gallup n.d.) and 84% of clients in the counseling process for addictions wanted more emphasis on spirituality in treatment (Hodge, 2011). There is a need for counselors to be trained in spiritual programs that will provide what the clients are looking for in regards to substance use treatment. Twelve Step Programs (TPS), as defined by Alcoholics Anonymous (AA), has long been recognized as a standard of practice in the treatment of addictions. It is still the most commonly sought source of help and guiding principles for people with alcohol problems and other addictive, compulsive behavior, with a world-wide membership of over 2 million in 160 countries (Gross, 2010; Miller, 2013; Mullins, 2010). It is the spirituality or spiritual awakening of the participants that attribute to a greater rate of abstinence at the one year mark of recovery (Lyons, Deane, & Kelly, 2010). Historically, people in recovery have gravitated toward the helping of others either through specialized on the job training or through college courses.

Spirituality and Religion

Spirituality is defined as an openness to God, nature or the universe where one can experience harmony with truth, feelings of love, hope and compassion, inspiration or enlightenment with a sense of meaning and purpose in life, an individual’s connection with God.
or the Transcendent (Hodge, 2011; Richards, 2009). On the other hand religion is viewed as the corporate expression of that connection, where one mediates their relationship to God and the community through an organized system of beliefs and practices (Hodge, 2011; Koenig, McCullough, & Larson, 2001). While Alcoholics Anonymous and the Twelve-Steps were founded on Christian tenets (Dossett, 2013; Mullins, 2010), they split from the religion aspect to be all inclusive to any or no religious orientation. However, there are those that criticize it for maintaining a quasi-religious community based upon Christian ideology based upon the prayers recited at the meetings (Greenfield & Tonigan, 2013; Thatcher, 2011). Still, for some Christians the Twelve Steps are “vague” about the identity of the Higher Power. They believe that it is Christ alone that has the power to heal the addictions and a spiritual transformation or conversion is necessary (Celebrate Recovery, 2014; Williamson and Hood, 2012).

**Faith Based Programs Research**

Faith based programs provide several positive factors in the recovery arena. Research proves that religion is protective against drug and alcohol use and the more a person is involved in their religion the less likely they are to use substances (Moscati and Mezuk, 2014). Whether faith based programs are used as “intentional religion” to offer exposure for a specific need such as addiction (Dodson, Cabage, & Klenowski, 2011) or used in conjunction with traditional recovery programs to fill the need for religious involvement for those who desire such help (Magura, 2007; Timmons, 2012), research shows that individuals who convert to Christianity had longer treatments stays, and increased stays are indicative of positive outcomes in treatment (Chu, 2012). An additional benefit of faith based programs is that they tend to reach beyond the addict to engage family and community in the recovery process (White, Kelly & Roth, 2012).
The literature review focused on four faith based programs and the research that came out of them. All four reported many positive results for the individuals who used the programs. Celebrate Recovery participants were queried about both their self-efficacy and spiritual involvement and beliefs. Those who scored higher in the spiritual scale were shown to have a higher sense of self-confidence to maintain abstinence from substances. Higher self-confidence is an indicator of positive treatment outcomes (Brown, Tonigan, Pavlik, Kosten, & Volk, 2012). The research involved in the Potter’s House program indicated that through Christian recovery and the Twelve-steps those participants who came to understand God as sponsor were able to maintain abstinence by engaging in a relationship with Him (Timmons, 2012). Christian conversion was at the fore-front of the remaining two studies. Both the Lazarus Project and “Victory Ministries” used the religious conversion factor to facilitate sobriety through a relationship with Jesus Christ. Both studies were positive for sober outcomes through the conversion process (Gowan & Atmore, 2012; Williamson & Hood, 2012)).

Were these faith-based programs successful in treating substance abuse? Based upon the literature it is difficult to ascertain. Starting with the last research article by Gowan & Atmore (2012), which was obviously less than favorable to the idea of Christian doctrine infused with substance abuse treatment, I don't think the authors were as much against Christ as they were the representations of His hands and feet by the people who were running the program. Maybe not even that. It seems that most of their chafe came from the idea that if the government gets involved in the religious regime and as they put it “mainstreaming of Christianity into the American government” then there is the possibility that we become a church state which does not allow for any individuality. While we are familiar with the idea that church and states should be separated (as it is often misquoted from the constitution), what the article does not address is
the specific type of funding “Victory Ministries” receives from the government or the amount of it. Those figures were not identified. Nor was the fact that few churches want to receive federal funding. If a church receives federal funding then the government has a right to tell the church what to do. That’s not going to happen in very many Bible based churches. The present mess in Houston regarding subpoenaing of sermons speaks to that!

The authors (Gowan & Atmore) were also snarky about the fact that the facility solicited donations from the church members! Substance addiction treatment is expensive. And nowhere in the article did it talk about how much the individuals had to pay for the privilege of coming clean. Recently the Affordable Care Act has qualified those people previously considered ineligible for substance abuse treatment. At this point, it is easier for the indigent to get care than those middle class workers who are struggling under the weight of increased premiums, higher deductibles and copays making it unaffordable for them to get help.

The fact that people had to study hard and obey rules seemed anathema to the authors. How much simpler it would be to take a pill and let the science fix the problem than to require something from the participants! As for the research itself, the author identified the participants but not the research questions. That point makes me wonder if the same questions were asked of each person. Neither were the answers identified as to who was responding - graduates, dropouts or kick outs. Also, it seemed more slanted to the how of the treatment rather than the results. The whole article felt more like a diatribe than a “research paper”.

The research - or lack of it - on Celebrate Recovery® was a shock to me. I figured a program that is almost 25 years old would have some kind of outcome based research presented on it. However, most of the information I got came from their website. There were also many other websites from other churches who offered their program. But no research. I widened the
search and looked back from the beginning and still could not find any more peer reviewed research on Celebrate Recovery®, other than the article that was presented. I did find a reference to CR in another research paper, but it was primarily informational. One of the points made by those authors, and one I have heard echoed around the tables of AA, is the fact that CR does not have the “singleness of purpose” found in AA. The fact that so many people seek help there for so many different “hang-ups” makes it difficult to say how many are being helped for substance abuse alone. The research presented in this paper was not very well done either. There was a lot lacking in the methodology; they handed out one survey at various locations in one city. However, since this is one of the faith-based organizations that still rely on and use the 12 steps it is unclear as to whether it is the spiritual or religious aspect that increased the self-efficacy that the researchers found correlated to the ability to resist substance use. At this point without research to back it up, little is known about whether or not the Celebrate Recovery® program helps to reduce relapse and enhances long-term recovery (Kelly & White 2012). More research is needed to understand the allure of the program and whether or not it is effective in the treatment of substance abuse.

While I really liked the idea of the Potter’s House study, I was not impressed with the methodology. Instead of research being done on those active participants who would have given a true sampling of those involved in the program, the study was based upon the recommendations of the director of the church who sponsors the program! I sincerely doubt that he provided names of people who were not successful. I think the fact that the group was hand-picked negates the study. As for the outcome being “God as Sponsor” I also took exception to that. AA literature states that “Essentially, the process of sponsorship is this: An alcoholic who has made some progress in the recovery program shares that experience on a continuous,
individual basis with another alcoholic who is attempting to attain or maintain sobriety through A.A.” (Questions and Answers on Sponsorship, 2010) Coming into relationship with God as all-powerful, always loving Being who is concerned with the wants and needs of those who call on Him is a powerful step in the journey of recovery. However, there still needs to be accountability on the human level to express that relationship. Creating the vertical link with God is important to creating the horizontal link with others and it is in those “other” relationships that an individual gets to see “God with skin on”. I think that is the purpose of the Potter’s House. Since it isn’t a “treatment facility” but rather a community outreach for those reintegrating into society after treatment or jail, they do a marvelous job of modeling Christian principles with Twelve Step help. Again, the use of the steps was important to the recovery process as outlined by the article.

Little information is given as to the means of the transformation given in the Lazarus Project. There is a log of psychological research and religiosity questions but little about the program itself. I think a good paper would have included some of it in there. The Lazarus Project seemed to be more on the line of Victory Ministries in the length of the programs and spiritual disciplines involved in the transformation. The conversion factor was a huge part of the process and reasoning for the program with little information given to program itself. The main exception I found with this study was it was strictly oriented on the results rather than the process. The do not reference any type of Twelve Step philosophy in the curriculum so I’m not sure if it is there or not. Their primary focus seemed to be making Disciples of Christ and while that is a wonderful thing to do, it is not necessarily substance abuse treatment.

Counselors
According to Dennis, Roland & Loneck (2013), counselor credibility is an important concept in the therapeutic process. The ability of a counselor to influence change in a client’s behavior is partially predicated upon that credibility. While there are many variables that influence credibility such as education and experience, in addiction counseling, the recovery status of the counselor can also contribute to perceived credibility. Personal recovery is not necessary, but a counselor who uses TSP concepts in session is expected to be knowledgeable about the steps whether they have worked them or not. This is especially applicable if the clients are required to attend community support TSP or are attending faith based programs who also use the twelve steps (Dennis, et al, 2013).

Another reason for counselors to understand spirituality in treatment when dealing with clients who are using spiritual or religious programs is to circumvent the possibility of spiritual bypass. According to Cashwell, Clark & Graves (2009), spiritual bypass happens when a client chooses to use spirituality or religiosity to avoid the psychological work required for healing developmental wounds. (Cashwell et al, 2009). Initially a client may feel better by applying their spirituality, especially if it is seen as providing a “purpose in life”. However, for a client who believes that God will deliver from an emotional issue without the client doing anything other than praying about it, spiritual bypass can short-circuit the recovery process, especially if a client refuses to acknowledge what is driving the emotion. Clark, Girodano, Cashwell & Lewis cite an example of this from scripture in the story of the woman at the well in the Gospel of John. She comes to the well at the hot part of the day assumedly to avoid interacting with others. However, as Jesus talks with her he exposes the source of her psychological pain as the fact that she has had five husbands and the man she is living with now she is not married to. Rather than attend to
this need and engage in psychological work, the woman avoids the invitation and instead asks a question about the proper place to worship thereby bypassing the psychological work and focusing on the spiritual practice of worship rather than her emotional well-being (Clark et al, 2012). A trained counselor can be an important ally for recognizing these instances where clients are relying on God to do for them what they can do and must do for themselves.

Currently, Rehabilitation Counselors receive minimal training in the “Spiritual Theory” even though it continues to be a large part of the recovery process for many individuals whether through attendance at Twelve Step meetings, in and outpatient treatment centers, or more recently faith based organizations. I propose more research be done at the graduate level of the efficacy of these programs with the purpose being in providing instruction for futures counselors. As Rehabilitation Counselors are to be culturally competent in the holistic application of recovery it is necessary for them to be grounded in the spiritual component of health as it relates to recovery from substance use, abuse and addiction. While a two year graduate program does not have adequate opportunities for required classes for the training of counselors in matters of the spirit, it would be beneficial if at least once class could be offered as an elective. Some programs do require grad students to attend a 12-step meeting to introduce them to the program. While that satisfies the curiosity quotient, it does not seem like enough to orientate them to the spiritual aspect and all it has to offer for the very real physical malady of addiction. If more classes were offered in the domain maybe more research would be activated. For the counselors who are already in practice, additional training could be offered, perhaps with continuing education credits to explore the validity of combining religion with recovery. As the arena of faith-based organizations increase so must the training of counselors who can be a knowledgeable guide through the process.
Conclusion

Obviously more research is required to determine if faith-based organizations are an effective choice in the treatment of substance abuse. Lumping it all together with the spirituality of AA muddies the waters. AA works. Alcoholic Anonymous is still the treatment of choice for those seeking recovery from addiction to alcohol whereby they can experience a change in perspective and perception. They no longer see their situation as ‘I cannot drink’ but rather the joyous reality of ‘I can not-drink’ (Medina, 2014). The proven efficacy of the spirituality found in Twelve Step programs continues to be a facilitator of change for addicts of all substances. If faith-based programs would want to be seen as something separate then it would be a sequential step to provide research on their results. The lack of it causes one to wonder if there are anyone capable of performing such research in the ranks of their programs. That may account for the paltry amount of research that has been done on up to date and the lack of evidenced-based outcomes that suggests they are a viable option to those seeking to help the addict find recovery through religious means. Whether it is because the organizations themselves are not willing to open up the programs for scrutiny, or the numbers of the participants are too few, or just a lack of interest in all things religious in academic arenas is unknown. Perhaps it is because of the difficulty in measuring the mystical, and placing a Likert scale on the depth of the divine.

Faith-based programs have been around for a long time and new ones start up frequently based upon the desire of congregations wanting to minister to those who still suffer in the area of addiction. My own international church has started a program this year. There is obviously a need for people to be able to live out their faith as they are walking out their recovery. These programs will remain an important place in the treatment of substance abuse and educators, counselors and clients should have knowledge of and access to them.
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VITA

Graduate School
Southern Illinois University

Rhonda G. Burnett

rhondab59@gmail.com

Southern Illinois University Carbondale
Bachelor of Science, University Studies May 2008

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Major Professor: Stacia Robertson