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Recovery as a Heroic Journey

William L. White¹

In his classic work, *The Hero with a Thousand Faces*, Joseph Campbell described a dominant myth pervading the world's cultures. Campbell noted that, in spite of their myriad variations, mythic stories of the heroic adventure shared a common structure: the hero's departure, the hero's transformation by great trials, and the hero's return. Campbell's portrayal of the heroic journey beautifully depicts the metamorphoses of addiction and recovery at the same time it poses provocative questions about the final stage of the recovery process.

The beginning of the hero's tale is the call to adventure. Here the yet-to-be hero, often a person of little note or a community outcast, responds to a call from beyond his or her parochial world. To answer this call requires leaving that which is familiar to enter regions of "both treasure and danger." The call to adventure marks a great separation from family and community and entry into an unknown world.

As the adventure unfolds, the hero encounters numerous trials and tribulations that test his or her character. Eventually, the hero experiences an ultimate test. It is here that the hero is "swallowed into the unknown, and would appear to have died." But the hero, often with the aid of a personal guide, finds a

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way to escape, whether from the labyrinth or the monster's belly. The death experienced by the hero turns out to be not a death of the body but a living death of the ego. It is in this transformation that the hero recognizes and embraces new sources of power and understanding and is reborn into a new consciousness and a new relationship with the world. The central part of the heroic tale involves the acquisition of new knowledge that turns out to be as much rediscovery as discovery. Campbell notes: "the powers sought and dangerously won are revealed to have been within the heart of the hero all the time."

According to Campbell, the most difficult stage of the hero's journey is the return home. This is a stage of reentry into the community that was left behind, reconciliation between the hero and the family/community, and a stage of service through which the hero delivers the gift of his/her newfound knowledge to the community. To complete the heroic journey, the hero who left the community as a seeker must return as a servant and teacher. Campbell notes that the task of fully returning is so difficult that many heroes fail to complete this final step of their journey.

There are obvious parallels between the processes of addiction and recovery and the structure of the hero's tale. There are hundreds of thousands of people whose recovery stories share striking similarities to Campbell's myth of the hero. My primary purpose for exploring this similarity is to explore one aspect of this comparison: what the hero's return to the community implies as a task of late stage recovery. Several questions arise from Campbell's discussion. Have recovering people returned to their communities to share the boon (gift of knowledge) of their adventure? How can this return be completed? What is the nature of this boon that can help the community work out its own salvation?

Returning to the community calls not just for a physical and social re-entry into the community, but also for acts of reconciliation (healing the wounds inflicted upon the community, forgiving the community for its own transgressions), and giving something of value back to the community. For the heroic journey to be completed, for the hero to reclaim his or her citizenship in the community, those debts and obligations must be paid. Left unpaid, the hero's final act of fulfillment remains unconsummated. Left unpaid, the community loses experience and knowledge that could enhance its own health and resiliency.

The boon of the heroic journey can be offered individually through acts of restitution, by carrying a message of hope to others (sharing one's "story"), and by modeling the lessons contained in the boon (practicing recovery principles in our daily lives). And yet the questions could be asked: Have recovering people as a group fully returned to their communities or are they hiding within those

communities? Are recovering people as a group reaching out or have they escaped into the comfort and security of their own sobriety?

The stigma of addiction--the price that even those in long-term recovery can pay in disclosing this aspect of their personal history--leads many recovering people to "pass" as a "normal," scrupulously hiding their recovery journey from members of the larger community. Some recovering people live a socially cloistered existence, interacting almost exclusively with others in recovery. Does such isolation constitute a failure at re-entry, a missed opportunity for reconciliation, and an abdication of the responsibility to teach and serve the community?

These questions are not easy to answer because recovering people and their styles of recovery and styles of living are extremely diverse. There are clearly recovering individuals who have achieved Campbell's stages of re-entry, reconciliation and service.

If recovering people have not fully returned to their communities, it is as much a cultural failure as a personal one. It is the cultural stigma--the very real price that can be exacted for disclosure of recovery status--that is a primary culprit here. It is time for a new recovery advocacy movement that, by removing the cultural stigma that continues to be attached to addiction/recovery, can open the doors for recovering people to return to their communities. It is time recovering people shared the boon of their recovery, not just with others seeking recovery, but with the whole community.

There is a new recovery advocacy movement afoot in America that promises greater contact between recovering people and the larger community. Recovering people around the country are again creating grassroots organizations aimed at supporting recovery through advocacy, community education, and recovery resource development. The participants in this New Recovery Advocacy Movement,² while responding to critical community needs, are finding in this

²The New Recovery Advocacy Movement is a new generation of grassroots advocacy organizations seeking to: 1) remove barriers to recovery for those still suffering from alcohol and other drug (AOD) problems, and 2) to improve the quality of life of those recovering from AOD

recovery activism a way to complete their own personal journeys. They are finding ways to return and serve their communities.

If you feel like it is time to complete your recovery journey and feel like it is time for you to fully return to the community, find out how you can be part of your local recovery advocacy organization. If there is no local recovery advocacy organization, begin talking with others in recovery about how you might start one. It is time recovering people came home—individually and collectively.

Many in recovery reach a stage in which their addiction is reframed from a curse to an experience that brought an immeasurable gift into their lives. Perhaps it is time that, in Campbell's terms, recovering people identified and communicated the exact nature of that gift to the world. Perhaps it is time the heroic journey of recovery was completed.

Coming Next: What is the nature of this gift of knowledge that recovering people possess and that their communities need?

problems. The movement focuses on recovery representation in AOD-related social policies, the rights of addicted and recovering people, the expansion of recovery resources, and the development of a recovery-focused research agenda.

The Boon of Recovery

William L. White³

In an earlier article entitled “Recovery as a Heroic Journey,” I summarized noted mythologist Joseph Campbell’s cross-cultural study of hero myths, and compared his depiction of the heroic journey to the processes of addiction and recovery. Campbell described how these myths typically unfolded in three stages: the hero’s departure from family/community, the hero’s transformation through great trials and tribulations, and the hero’s return. My focus in that article was on the final of these stages. Campbell contended that the heroic adventure remained unfulfilled until the hero accomplished the most difficult task: returning to pass on the boon (gift of knowledge) of his adventure to the community. My discussion of Campbell’s work raised the question of whether recovering people as a group had returned to their communities or whether they were hiding in those communities. The article ended with a call for recovering people to explore how they could pass on the boon of their recovery to the community and suggested that the work within the New Recovery Advocacy Movement⁴ might provide a vehicle to complete that heroic adventure. In this article, I will explore the exact nature of that boon of recovery.

The most obvious gifts of knowledge that recovering people can bestow on their communities are their stories—stories that unveil the experience of addiction, stories that communicate the reality and hope of full recovery, and stories detailing their knowledge of how such recovery can be initiated and sustained. Five ideas about recovery need to be inculcated within communities across America.

1. *Addiction recovery is a reality.*
2. *There are many paths to recovery.*

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⁴The New Recovery Movement is new and renewed grassroots advocacy organizations seeking to: 1) remove barriers to recovery for those still suffering from alcohol and other drug (AOD) problems, and 2) to improve the quality of life of those recovering from AOD problems. The movement focuses on recovery representation in AOD-related social policies, the rights of addicted and recovering people, the expansion of recovery resources, the development of a recovery-focused research agenda, and broader acts of community service.

3. *Recovery flourishes in supportive communities.*
4. *Recovery is a voluntary process.*
5. *Recovering and recovered people are part of the solution; recovery gives back what addiction has taken.*⁵

Those alone are worthy gifts, and ones that the New Recovery Advocacy Movement is calling upon recovering people to give to their communities. But there may be larger, more difficult to define gifts that could benefit communities across the world. Such gifts are not about how to recover from addiction, but rather what recovery from addiction has taught recovering people about life and how to live it. There are many gifts that recovering people could bestow on the larger society.

Many recovering people reach a stage in their recovery where addiction is reframed from a curse to a gift-bestowing blessing. Civilians (those not in recovery) who have had close contact with recovery groups have often lamented that it is too bad one has to be an addict to reap the benefits of recovery. The endless application of recovery programs to problems other than addiction surely suggests something of value here that far transcends their original intent.

For years I have been asking those in long term recovery what they most value about their recovery experience. Most surprising is the number who describe sobriety, not as their greatest achievement, but the foundation or by-product of that achievement. Their responses reveal more about how to live than how not to drink or use other drugs. Collectively, these voices say that, through their close encounters with death (of body or self), they have come to understand both the fleeting transience and preciousness of life, and, as a result, the importance of living every moment as a gift to be cherished and lived to its fullest. Those experiencing terminal illnesses have often shared a similar observation. What makes those in recovery unique is that they constitute what might be called a Lazarus Society or a Phoenix Society of men and women who, in the face of utter personal destruction, have not only survived but been reborn, often with decades of life to live, to serve, to teach. The members of this Society, in their most retrospective moments, speak of the experiences and aspirational values that became important in their lives through the experience of addiction recovery.

⁵White, W. (2000). *Toward a New Recovery Movement: Historical Reflections on Recovery, Treatment and Advocacy.* [www.http://efavor.org/ADVOCACY.HTM](http://efavor.org/ADVOCACY.HTM)

They speak of the importance of:

- Living in the present (Acceptance)
- Paying attention (Awareness)
- Listening (Empathy, Respect for Elders)
- Recognizing oneself in others (Identification; Unity of all People)
- Relating (Connectedness)
- Creating community (Participation, Belonging)
- Acknowledging limitations and imperfections of character (Self-knowledge, Humility)
- Believing (Faith, Hope)
- Staying focused (Vision, Centeredness)
- Accepting limitations of time (Patience, Perseverance)
- Paying debts (Restitution)
- Saying “I’m Sorry” (Forgiveness)
- Saying “Thank You” (Gratitude)
- Telling the truth (Honesty)
- Telling one’s story (Witness)
- Respecting privacy (Discretion)
- Keeping promises (Fidelity)
- Laughing (Humor)
- Celebrating (Joy)
- Avoiding complications and distractions (Simplicity)
- Doing one’s duty (Responsibility)
- Giving and helping (Service)
- Accepting differences (Tolerance)

The stories of recovering people also speak of what they have come to believe are the poisons of the human spirit: such things as self-deception, self-conceit, self-centeredness, jealousy, bigotry, resentments, anger, gluttony, avarice, and callousness.

This all stands as an interesting blend of surrender and assertion, reaching inward and outward, reconstruction of self and, perhaps in the future, the reconstruction of communities. The recovery message embraces the ethic of personal responsibility--the power of personal action--while simultaneously affirming the power of acceptance and surrender and acknowledging that the most important things in life cannot be achieved alone but only in the context of relationship. If that sounds contradictory, an appreciation of such paradoxes is also

part of the boon of recovery.

The New Recovery Advocacy Movement is calling for recovering people to return to their communities and deliver the boon of recovery. The first task will be that of recovery education and advocacy, but a day may come when recovering people will pass on the deeper lessons of that boon to the larger community. On that day, the community will have received a great gift. On that day, recovering people will have come home. They will, in Campbell's terms, have completed their heroic journey.