



WORLD SERVICE CONFERENCE OF NARCOTICS ANONYMOUS

November 15, 1983

To The Fellowship of Narcotics Anonymous:

We, the WSC-Literature subcommittee, feel the Third Edition of Living Clean is ready for review by the fellowship.

The following is additional input that we feel should be addressed by your committees: Do Chapters 4, 15, and 29 violate our 10th Tradition? At this time, the World Service Board of Trustees finds no tradition violations; however, maybe these chapters could be improved. Also, we would like your input on quotations from other sources. For example, page 27, St. Francis, Page 29, William James, page 33, the bible.

Yours in loving service,

The WSC-Literature Subcommittee

Living Clean

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PRELIMINARY (THIRD) VERSION

Living Clean

**The New Member's Guide to the Fellowship
of Narcotics Anonymous**

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1. Introduction: How to use this book

This book is intended primarily for the newcomer in the fellowship of Narcotics Anonymous, although we hope that the information in it will be useful to all of our members.

Our drug using was the center of our lives. Around our drug use there developed a system of attitudes, of a way of dealing or not dealing with our environment, that take us years of staying clean to sort out. To recover, we had to change and to learn to differentiate between recovery-oriented and drug-oriented behavior. We feel it is impossible for newcomers to do this and to avoid the many pitfalls recovery holds without relying heavily on the experiences of those in the fellowship of Narcotics Anonymous who have traveled the path before them. This book is a summary of our experiences, selected from our many collective years of recovery. For instance, should a recovering addict drink alcohol or take a medically prescribed narcotic? How can the addict combat the craving for a drug? These are among the many topics discussed in this book.

However, this book is not exhaustive. Nearly any member of Narcotics Anonymous has additional good ideas. Nor is this book to be interpreted in any sense as the Narcotics Anonymous program. That consists of the meetings, the fellowship, our literature, the Twelve Steps to recovery. Rather, this book should be considered a handbook of practical suggestions that can enable the newcomer to cope more effectively with a drug-free life on a day-to-day basis and to utilize better all aspects of recovery offered by the Narcotics Anonymous program.

Narcotics Anonymous does not formally endorse all the opinions and suggestions offered in this book. However, any suggestions we make have in the past been useful to many of our members, and we hope they will be useful to you.

In consulting this book you should try to keep an open mind and to exercise your own discrimination. Any principle, no matter how valid, can be perverted. For instance, one of the suggestions we give about combating the craving for a drug by eating a nutritious snack can easily be rationalized into a scheme for compulsive eating. And sometimes a chronically unemployed member justifies his situation by deferring to the slogan, Easy does it!

Above all, try to be open minded about the spiritual matters discussed here. Although many of us entered the fellowship; violently opposed to ideas such as God and religion, our collective experience has taught us that nothing will defeat us as surely as indifference to our spiritual growth. What exactly that expression means differs from one person to the next, but it usually has little to do with any of our preconceived ideas about God or religion.

One sometimes hears that the program is like a cafeteria. One takes the food one wants and leaves the rest behind, presumably to be taken by someone else or even the same member later on in recovery. However, as no one can fare well on a diet consisting solely of starches and desserts, so we need a balance of ideas in our lives. If you object to or fail to understand something you read here, make a mental note to look at it sometime later in your recovery. You may find your appetite for it has changed.

Our discussion of the Steps here is necessarily brief, and we can give no more than an overview of how we apply these vitally important principles to our lives. After reading our discussion you will undoubtedly seek a more in-depth knowledge of the Steps. To acquire this, you should make Step meetings a regular part of your meeting schedule.

For us, recovery starts by quitting the use of mood-changing chemicals. But that is only the start. Stopping is easy. Staying stopped is hard. It requires that we be prepared to change our habits, attitudes, actions, and personalities. We discover we can no longer act or think the way we used to and expect to stay clean. We hope this booklet will help you to make the necessary changes, and we hope it will convince you that there are others who were once in your situation who have, through the program of Narcotics Anonymous, discovered fullness of life.

2. Are you an addict?

So you're new in Narcotics Anonymous? We're glad to have you here. We think you'll meet a lot of people whose experiences you'll identify with, people you'll like. In appearance our members don't differ much from people you might see on an average street in an average city. Maybe they're a little younger, but that's because the problems we have in common tend to come up; early in life. Still, you'll find the middle-aged and older citizens are among us. And we have cooks, housewives, salesmen, mechanics, secretaries, doctors, pharmacists, teachers, the unemployed. Everyone you can imagine. The whole spectrum of humanity is represented.

However, we do have things in common. At one time our lives seemed to have ground to a halt and no matter what we did nothing good seemed to happen to us. We suspected--but were not always entirely certain--that drugs and/or alcohol had something to do with it. Were drugs the cause of our problems or the result of them? We asked ourselves. Our opinions on this seemed to change, as yours undoubtedly have, from one moment to the next. When we began to attend meetings of Narcotics Anonymous we discovered the truth. You will, too.

Who comes into Narcotics Anonymous? What are our histories? Many and varied. There is the housewife recovering from a suicide attempt--not convinced the pills caused

her to try to kill herself. They were just the method she used. And professional men, doctors and pharmacists in particular, who needed an amphetamine to get started in the morning and a sleeping pill to get to bed at night and watched in horror as the habit slowly escalated. Soon they were taking an endless string of medications, each to counteract the side effects of the previous medication. We have students whose college careers are in a shambles because they've become paranoid and lost their motivation. "A pot addict? How could I be? Everyone smokes pot!" Then there are the very young--the huffers and street drug users who could never even make the pretense of getting their lives off the ground--they were high almost from the cradle. Then there are the admitted junkies, sometimes defiant, just out of a drug rehabilitation center to which a court had stipulated them, contemptuous of lowly pill users or those who drank alcohol. "Hell yes, I'm a junkie." (We've all played that game in one form or another. We call it "high but proud.")

But despite the differences in our backgrounds, we all stayed around. Narcotics Anonymous brought drastic changes in all our attitudes--toward ourselves, toward others, and above all, toward drugs. Glue. Pot. Quaaludes. Valium. Heroin. Alcohol. Speed. Cocaine. LSD. Percodan. What do they all have in common? What they have in common is us. We're drug addicts.

Drug addicts? Isn't that an awfully strong phrase? For the housewife or student who never gets closer to a needle than a stereo player it conjures up a bizarre image, maybe a dormitory with pale bodies laying around on mattresses, spikes sticking out of arms and pools of blood congealing on the floor. But that, obviously, isn't what you found when you came here. The people seem well-groomed, and are apparently happy. They're full of energy, enthusiastic about sharing their feelings and hopes, their victories and defeats with others. The fact is, when we're clean no one can tell us from the average person on the street.

What is a drug addict then? There are several good definitions, but one of our favorites is the following: **Drug addicts are people who have lost the ability to control their lives because of the use of drugs.**

We each have a favorite drug or drugs, our "drug of choice"; one sometimes hears it called at meetings. But we can switch addictions very easily. If one drug isn't available, we will make do with another. Many are the addict who has tried to control an addiction by switching drugs. The result is always predictable. Sometimes we switch to alcohol, feeling that, because it's a socially approved drug, it must certainly be preferable to heroin or Quaaludes. A disaster always follows (See the section, "Alcohol vs. addiction"). We have seen heroin addicts die from drinking alcohol. And taking a new drug will lead to using our drug of choice.

Like any other disorder, drug addiction has certain symptoms associated with it. These symptoms are remarkably predictable, despite the great variety of substances involved.

For instance, drug addiction is progressive. Look at the way you were last using. Compare it with the way you were using two years ago. With the way you were using when you began. Do you notice a progression? Undoubtedly. It's downhill. Drugs are causing you more pain now than they used to. True, there were periods in our using during which we used drugs very little or not at all. But we always found the periods--we call them "plateaus"--brief and our freedom from drugs only temporary.

Of course, there are other symptoms. We have found it effective to present some of the symptoms of drug addiction as a series of questions.

Perhaps you admit you have a problem with drugs, but seriously doubt you are an addict, or at least an addict in the same sense that we apply that word to ourselves. If you have such reservations, read the questions below and answer them carefully.

- 1) Is drug using making your life at home unhappy?
- 2) Have you ever switched from one drug to another or to multiple drugs, trying to find the perfect high?
- 3) Has your ambition decreased since using drugs?
- 4) Have you ever taken more than the prescribed dosage of a prescription drug, or resorted to lying to obtain it?
- 5) Have you ever stolen drugs or alcohol?
- 6) Have you gotten into financial difficulties as a result of using drugs?
- 7) Do you use to feel less shy or to feel you belong?
- 8) Do you feel guilty about using?
- 9) Have you ever been in a hospital, jail, or drug rehabilitation center because of your using?
- 10) Does using interfere with your sleeping or eating?
- 11) Do you become defensive when people mention your drug using to you?
- 12) Does just having drugs in your possession give you a thrill?
- 13) Have you ever tried to stop using drugs?
- 14) Do you think a lot about using drugs?
- 15) Have you noticed your pattern of drug use changing recently?
- 16) Do you jealously guard your stash of drugs?
- 17) Are you plagued with indefinable fears?
- 18) Do you sometimes think you could get your life straightened out if you moved somewhere else?

- 19) Do you find yourself jealous, aggressive, angry, or resentful in situations that wouldn't have caused you to be some time ago?
- 20) Have you even gotten high when you were alone?
- 21) Do you regularly have to have a drug before going to bed, or on arising?
- 22) Has your using affected your sexual desire or performance?
- 23) Do you ever take one drug to overcome the bad effects of another?
- 24) Do you have fewer friends now than two or three years ago?
- 25) Do you ever go on prolonged binges of drug usage?
- 26) Do you find yourself using drugs around people you think are inferior to you?
- 27) Have you ever used street chemicals of unknown composition?
- 28) Does the idea of a life without drugs terrify you?
- 29) Have you ever had the shakes?
- 30) Do you use drugs or drink to control your feelings?
- 31) Have you ever searched for a spiritual answer for your life, but couldn't seem to find it?
- 32) Do you enjoy getting high less than you used to?
- 33) Do you avoid your family when using?
- 34) Has your job performance ever suffered as a result of using drugs?
- 35) Do you ever feel you could do more with your life if you didn't use drugs?

Quite a list, isn't it? Note that some of the questions, numbers 19 and 31, for instance, don't even mention drugs. This is because addiction is an insidious problem that affects all areas of our lives--even those areas which seem at first glance to have little to do with drugs. Further, no specific drug is mentioned. Though there are lots of different drugs, they all spell one disease for us.

Well, how did you do? As a rule of thumb, we might say if you answered five or more of the above questions "yes", you definitely have a drug problem. And the more questions you answered "yes", the further along the road of addiction you are. We would probably say that those who answer under ten of the questions yes are still in the early stages of drug addiction, over ten in the middle or later stages of addiction. However, once we begin to develop symptoms of drug addiction, the disease will invariably run its course, unless we arrest it by halting our drug use. One often hears it said that being a little bit of a drug addict is like being a little bit pregnant. And it's true.

Some of us at first dismissed such tests with words like "Oh, that test's screwed up," or "I'm special." "I know I take drugs, but not because I'm an addict." "I have real (emotional, family, job) problems." Or "I'm just having a tough time getting it together right now." Or "I'll be able to stop when (I find the right person, get the right job, etc.)."

Suppose you come down with severe abdominal pains and a high fever. The doctor diagnoses acute appendicitis and schedules you for immediate surgery. Do you have it done? Of course. You'd be a fool not to. In other words, you have faith in his expertise and experience. Yet, you've probably never seen his medical diploma, or asked him what his standing was in his graduating class.

We in Narcotics Anonymous have expertise and experience, too: a direct, firsthand knowledge of drugs that's rivaled by no other group of people on the face of the earth. Furthermore, we know what to do about a drug problem. The people sitting around you at a Narcotics Anonymous meeting are clean, some for many years. The above questionnaire reflects our expertise with drugs. Why should you doubt us and not the doctor? We'll tell you why. Drug addiction is a peculiar disease. It's the only disease that tells you; you don't have it. And it's fatal, too, usually more unpleasantly so than appendicitis. Like appendicitis, though, there is a remedy--it's called recovery, or getting clean or staying straight, we use all these phrases interchangeably. It involves getting active in a program, the program of Narcotics Anonymous that will keep you free of drugs one day at a time and, furthermore, give you the new life you've been looking for. Do you want to go for it? We hope so.

3. What are your chances?

We in Narcotics Anonymous believe that drug addiction is a progressive disease which, unless arrested, will invariably lead to jails, institutions or death. We believe that it cannot be cured, in the sense that the addict can never return to some kind of nondestructive drug use--but can only be arrested. The Narcotics Anonymous program acts to arrest our addiction by helping us to abstain from drugs, that is, from any substance that causes us to get high or that is either mind changing or mood changing.

For the person who has not yet faced his or her addiction squarely, the first sentence above is a very frightening one. It was for all of us. Even more frightening was the thought of having to endure a lifetime without drugs--deprived of any means of quieting our fears or forgetting our troubles or lifting our spirits. It seemed like the cruelest possible fate. One newcomer said it sounded like being buried alive.

But this is the choice you must make. You are now standing at the great turning point in your life. You will choose to either travel the way we have traveled, or to return to the life you have come from. The decision--we call it the First Step--has to be yours. We cannot make it for you; although once you make it we can help you in your life of recovery by sharing with you our experiences. The life of using is full of fear and

loneliness. There is fear in being clean, too, but you can share that fear with others who care for you and thereby lessen it. Moreover, in recovery you will find joy and love. For the first time in your life, perhaps, you will feel you belong. You will find you can finally quit running. You will find a home.

We have said that drug addiction is incurable. How do we know? By our experience. We have not yet seen an addict who can return to non-addictive drug use. We have seen many try, and many die trying. Some are lucky. They are able to make it back to the program; but on returning, they are always worse off than before. More than likely, some of the painful using experiences they had heard other addicts speak of at meetings and which had not yet happened to them did, in fact, happen when they resumed using drugs. Certain drugs they told themselves they would never use they ended up using, or an action--a lie, a theft, a deliberate cruelty--they had considered themselves incapable of they found themselves committing. Sometimes, more tragically, an accident or a fire or an overdose had left them permanently afflicted. We know of addicts now blind who once could see, terribly scarred who once were unmarked, crippled who once could walk. Drug addiction is serious business.

In the program you may occasionally hear the words "relapse" or "slip" used. These terms refer to the actions of a member who resumes using drugs. Many of our members have never experienced a slip. However, we all have our own timetable for recovery. Some of us are not really ready when we reach Narcotics Anonymous, and we may find ourselves using again even after a prolonged period of staying clean. Those of us who have resumed drug use and have been fortunate enough to make it back to the program always bear eloquent witness to the fact that our addiction is progressive. Even if you do not find continuous abstinence immediately, it is important that you attend meetings. None of our members will condemn or judge you. There is a saying that we are all slippers, but some of us had all our slips before we found the program. Although complete and continuous abstinence always furnishes the best ground for personal growth, it is possible for you to learn by attending meetings even though you cannot accumulate any length of clean time. The experience of being around people who are clean and getting better may, one day, give you the strength and courage to close the door on drugs.

At the very least, returning to using confronts us with new dimensions of despair and hopelessness. One addict who had tried it said he was genuinely surprised at the violence of it. And, it comes as a shock to us that we just cannot seem to get very high anymore. Nothing--no new or imaginative combination of chemicals--works to get us very high. We go from being free of drugs to being helpless with almost no intervening

period of elation. Drugs, our closest, most faithful and dependable friends, have finally betrayed us. **There is no way we can use and enjoy drugs the way we once did.** Whether we know it or not, the party is over. If we can accept this fact, it will help us turn our backs on drugs and to move toward recovery. If we do not accept it, even though we stay clean, we will be stuck in a fantasyland, craving and obsessing about the chemicals that, in fact, can no longer give us much pleasure.

We believe there is a strong physical component in addiction, and that the progression of the disease reflects some as yet undiscovered change in our body chemistry. **There is no way we can change our body chemistry, change it back to what it once was.**

What are your chances? Without a program, very poor. Although we in Narcotics Anonymous don't keep statistics, it has been estimated that 97 percent of drug addicts never recover. However, statistics are misleading--they are applicable only to large samples. They cannot describe individual cases. We in Narcotics Anonymous firmly believe that **no one is any stronger or any weaker than anyone else.** If you sincerely want what we have and are willing to go to any lengths to get it, your chances of getting clean are 100 percent. In fact, we will make you a specific guarantee that, if you take certain suggested steps, you will not use. The steps you must take, and which are described in the rest of this book, are very simple. They are simple and practical. We are practical people. Coming to terms with the fatal nature of our addiction made us that way.

4. Do I need a rehabilitation center?

Occasionally the newcomer must make the decision to go into a rehabilitation center (rehab)--or-a detoxification unit. Those with a history of the abuse of downers are the more likely candidates for this kind of special treatment. Convulsions following withdrawal from sedatives are a medical crisis, and if you have a history of sedative dependency, you should talk to someone in the program about it. We are generally very willing to help you find a facility for detoxification.

There are several good reasons for going to a rehab other than to weather out the effects of drug withdrawal. It may provide the newcomer with the opportunity to escape an intolerable living or working environment, for instance, the addicted pharmacist or doctor, or a person who is living with his parents but exists in a total temperamental deadlock with them. When family gatherings are a nightmare of screaming and recriminations and yet some degree of financial dependence on the family is, for the moment, necessary, the newcomer should consider the possibility of going into a rehab.

There are a number of rehabs which are strongly program oriented, and their success rate is high. We tend to recommend these over rehabs whose orientation is more analytical, and in which the client is exposed to attack therapy or endless probing for “causes” of using. We addicts, being cunning and very perceptive about the expectations others have of us, fit into such an analytical environment beautifully. We can manufacture more crises, insights and breakthroughs in a week than ten ordinary people. But deep down we don’t really believe a word of it, and it generally only delays our confronting the true issue: our addiction.

If you are confused and don’t know whether you need a rehab or not, discuss it with program people. A good rule of thumb is: If people tell you that you need a rehab, you probably do.

5. What is Narcotics Anonymous

Narcotics Anonymous is a fellowship of men and women who are drug addicts but who no longer use. We are not composed of professional, social, health, or government workers except as such people may themselves be addicts. The only requirement for membership in Narcotics Anonymous is the desire to quit using drugs. We do not care what drugs you used or what your past activities were. Our only concern is whether or not you wish to get clean.

Narcotics Anonymous is not associated with any religious sect or governmental organization and does not oppose nor endorse any special causes. We exist solely to stay clean ourselves and help other addicts to get clean. You will be charged nothing for membership in Narcotics Anonymous; we support ourselves through our own contributions.

We believe that drug addiction is not a single disorder but rather a three-fold illness: part physical, part mental, part spiritual. The way that our addiction affects each of these aspects of our being and the way the program works to relieve our addiction--to heal these three parts of us--are the subject of this book.

Quite briefly, the healing we receive through Narcotics Anonymous comes through meetings, through the strength and support offered by the fellowship, and through the application of certain principles to our lives.

It is our firm belief, one based on an enormous amount of observation and firsthand experience, that no one, once an addict, can return to the informal use of drugs. It is for this reason that **Narcotics Anonymous is a program whose immediate goal is complete abstinence from all drugs.** We stop using, period. The program gives us the strength, one day at a time, not to pick up the first drug.

Narcotics Anonymous does not make a decision as to whether you or any other person is a drug addict. We can tell you what certain symptoms of drug addiction are and share some of our experiences with you. The diagnosis of your own condition you alone can make.

Narcotics Anonymous has no official opinion on outside issues. We do not, for instance, get involved with efforts to legalize or penalize the use of any drug. To do so would detract us from our primary purpose: to get and stay clean.

Narcotics Anonymous has worked for us. Our combined membership has accumulated many, many centuries of continuous clean time. Most of us had tried other ways to rid ourselves of the problems caused by drugs. These methods usually consisted of redefining our addiction in purely medical or psychological terms. While, as an organization, we have no direct quarrel with such therapies, for us they did not work. They held out to us hope, but the hope was soon betrayed. Perhaps we even thought we had finally found the causes for our use of drugs; nevertheless, we still used. Among us we could write a guide book to therapies. It was as a last resort many of us came into Narcotics Anonymous: bitter, cynical, without hope. And it was there that we were given new lives.

A new life can be yours for the asking, too. There is no problem that you can conceivably have that other Narcotics Anonymous members have not had. The Narcotics Anonymous program can help us to overcome or live with any problem. We all thought we were somehow special or unusual. It was one mechanism we used for keeping ourselves isolated and addicted. We were college graduates or we never finished high school or we were gay or of the wrong social class or had extraordinary physical or emotional problems. We came to see all of these as cop-outs. You will find as we did that recovering drug addicts **are all alike in the only way that matters. When you come into Narcotics Anonymous you are no longer alone.**

Narcotics Anonymous has meetings in the major American cities and abroad. If you travel, you will find you are part of a great and growing fellowship. The help is everywhere and is yours only for the asking.

6. Meetings

“Go to meetings, meetings and more meetings,” is the advice we get as newcomers, “and when you’re sick and tired of meetings go to still more meetings.” One newcomer was astonished to hear his sponsor tell him that he was so sick he needed meetings nine days a week. In fact, the most frequent advice to newcomers is, “Go to ninety meetings in ninety days.”

The fact is, meetings form the basis of Narcotics Anonymous. Without meetings, we would fail to function as an organization doing what we exist to do. For members of Narcotics Anonymous, meetings are the single most important means of getting and staying clean. Those of us who relapse into drug use have usually slowed down or stopped our meeting attendance, and it seems those of us who attend the most meetings have the most well-balanced and gratifying recovery.

Meetings are to us what tools and materials are to a carpenter. They are the materials with which we build a new life.

It is important for us to remember that the game of using occupied all our time. (See the section, "People, places and things: the Game.") Even when we weren't using drugs we were thinking about using drugs. When drugs and the Game of getting them are taken from our lives an enormous gulf opens within us. "What am I going to do with my time?" we wonder. And the question is asked more in panic than in curiosity. It seems as though the center has been yanked from our lives. We suddenly discover we don't know how to behave with others, how to carry on a casual conversation or even where to put our hands-without the reassuring roles using provided us.

It is meetings that fill up the gulf and work to change us. The effect they have on our attitudes is unimaginable to one who has not experienced them. A member, now clean many years, recalls his first year in the program. "Every day I felt suicidal. I would say to myself, 'Well, I promised them I would do ninety meetings in ninety days. I'll go to a meeting tonight and then I'll kill myself.' After I left the meeting I would wonder why I had been so upset."

In meetings our fear is replaced with faith, self-pity with concern for others, despair with hope, resentment with understanding, self-loathing with self-acceptance. We aren't alone anymore; we are loved and valued and accepted for what we are and, above all, understood for the first time in our lives by those who have been through what we have been through. No one sits in judgment of us. We experience continually the miracle that a problem shared is a problem halved. You will not find meetings to be advice bureaus however. Many of our problems, perhaps most, have no handy, neat solutions. The solution, if there is any, lies in sharing the problem. Through sharing it we grow. The problem is still there, but we have grown a little beyond it.

Go, then, to meetings. Ninety meetings in ninety days is certainly good advice. At least get to several a week. You will be given a meeting list. That, a map and determination are all you need. At first, we are stunned with the inconvenience of getting to and from all those meetings. "Several meetings a week? They're miles from where I live! I can't do that!" If you have such misgivings, we have a little mental exercise we would like you to try. Put yourself back in one of the darkest periods in your addiction.

It's 2:30 in the morning and you're out of dope. You're withdrawing, and it's a bad one: the sweats, the shakes, and the anxiety. Then you find out that, in a locker in a Greyhound bus station in a city fifty miles away, is a bundle waiting for you. Its chock full of your drug of choice, and it's all yours. Would you get there?

We ask you to travel several miles, not fifty, at 8 p.m., not 2:30 a.m. If you don't have a car or if public transportation isn't available you can usually find a member who will give you a ride. Ask around. Meetings are as essential to our staying clean as drugs were to our using. We are simply too sick to survive otherwise. Without them our recovery will be perilous and short-lived, hardly less of a nightmare than our using.

Let's talk about the format of the typical Narcotics Anonymous meeting. Our meetings generally open with the reading of a preamble which briefly describes the organization of Narcotics Anonymous and defines the purpose of its members. There are several kinds of meeting formats.

One of the most common kinds of meetings is the **speaker-discussion meeting**. During the first part of the meeting, the speaker, a Narcotics Anonymous member who has accumulated some recovery time, simply tells his story. He describes what his life was like before he came into Narcotics Anonymous and what it is like now that he is clean. The purpose of the first part of his story is to put you, and him, in touch with what using was like. The reason for such a talk is that we human beings tend to forget pain easily. It is a psychological defense mechanism we use constantly. Remembering two weeks later what it was like to burn our hand on a stove never conveys the intensity the experience had for us at the time, nor the day after. This very human trait has its advantages. What kind of life would it be if we were continually besieged with our most painful past experiences, replayed in living color? A selective memory, however, can work against our staying clean. We need to remember, if only briefly, what it was like to be in jail, to wake up in an emergency ward, to endure the looks of disappointment on the faces of our family and friends when they discovered we had lied to them and stolen from them. We do **not** wallow masochistically in our past. More often than not, the recall of our using experiences that the speaker arouses in us is accompanied by a profound gratitude. "Thank God I don't have to go through that again!"

Because of the differences in our backgrounds and the variety of substances we abused it is hardly likely that you will identify with all the facts of a speaker's story. Nor is it necessary that you do so. Try, instead, to identify with his **feelings**. What does a physician addicted to prescription drugs have in common with a street addict? Many things. They both know, for example, what it feels like to be alone and desperate at 2:30 in the morning, not clean but not really high either, out of drugs or unable to discover the combination of drugs that will work.

It may happen, particularly when the speaker has not been clean a long time that his using story swells out to fill the whole talk. The speaker got in more fights, pulled off more burglaries, dealt more dope, schemed more cleverly than anyone else. It occurs to us that what the speaker is really doing is **bragging**. We call this kind of story a “meanest bag in town story.” Such stories are unfortunate, because no one can grow by telling them. It means we’re still stuck in the Game. (See “People, places, and things: the Game.”) The speaker should really be talking about those things he’s ashamed to talk about, hustling his body, for instance or becoming sick and helpless at an event he had wanted very much to be straight for. Generally, as we continue to stay clean, our using experiences come to occupy their proper place in our talks. We get in touch with our recovery, with all the tremendous vitality and potential it opens up to us.

We can turn “meanest bag” stories to our advantage, however, when we are in the audience: We can use them to develop **patience**, a character trait that’s always been in pretty short supply throughout our lives.

During the second half of the speaker’s talk--the recovery part--we find how the speaker got clean. We hear about the tools that were used, the principles that were applied, to stay clean and to find some happiness in life. The profound message in this part of the talk is **hope**. We can identify with the speaker’s addiction so perhaps we can identify with the recovery. “If the speaker is staying clean, so can I,” the newcomer says. “There is hope for me.”

The discussion part of the meeting provides us all with the chance to share. We may talk about the experiences or feelings we have in common with the speaker. We may talk about a living problem we are struggling with or we may use this as an opportunity to express gratitude for the rewards that staying clean has brought into our lives.

What, as a newcomer, should be your role in the discussion part of a meeting? You should speak if you can, but if not, don’t use your silence to put yourself down. Someone once asked the Quaker leader William Penn about participation in Quaker meetings. The questioner didn’t know whether he should speak or keep silent and would get involved in endless debates with himself before, during and after the meeting about what he should or should not do. He had worked himself up into such a state over the issue that he was receiving no spiritual help from the meetings, his very reason for attending them. Penn’s reply was that the man should go to meetings **neither prepared to speak nor prepared to remain silent**.

There’s a message in that for us. We have tended all our lives to think in terms of what we should or should not do; what we have never done was to allow ourselves simply to be part of an experience, to give up our attempts at control. If we do this and if

we have spoken too little at meetings, we will then speak. If we have spoken too often, we can find silence. Some new members are advised to take the cotton out of their ears and put it in their mouths. One way of doing this is to get out of your own head and into the speaker's; stop processing what you are going to say when your turn comes. You may find silence, which can be an expression of your bond with other members, more meaningful to you than anything you might say.

Another kind of meeting is the **Step meeting**. In these meetings we talk about ways of applying the Twelve Steps (see the section, "Getting into the steps") to our daily lives. These meetings may or may not have a speaker. If so, the speaker will tend to concentrate on the particular step being discussed. When there is no speaker, program literature dealing with the step is often read and a discussion follows in which those attending relate their experiences with the step. Although the first couple of months of recovery are a little early for you to be concerned about the detailed mechanics of applying some of the steps to your life, you should start thinking in terms of the steps now and should include step meetings in your schedule of meetings. There are a few steps you should begin working immediately, particularly the First Step: "We admitted that we were powerless over our addiction, that our lives had become unmanageable." Step meetings will help you learn to apply the other steps in the proper sequence at the proper time.

It may happen that you find yourself unable to concentrate in a meeting. Perhaps you're preoccupied with a living problem or you're anticipating something that's going to happen next week. There's a useful little prayer you can use when this happens: "Lord, help me to be here and help me to be now."

About half-way through the meeting a basket is passed. Narcotics Anonymous has no fees or dues, as we told you, but we do have expenses we have to meet: literature, coffee supplies, rent money. The money we pay for meeting space is usually symbolic, since the institutions hosting our meetings--churches, very often--usually charge us minimal rent. It signifies that recovering addicts **can** be financially responsible, that we have learned how to use money in nondestructive ways. If you are working, you should give something. Reflect, as the basket passes you, on how much the program has given you and how little it asks in return.

Narcotics Anonymous meetings are classified as open or closed. Most meetings are closed, that is, open only to recovering addicts. Some are open, which means any concerned person who wishes to learn more about the program may attend. Doctors and other health workers and members of the family of recovering or still-using addicts often attend open meetings. It is always made clear which meetings are open meetings. You may wish to be more guarded in your comments at an open meeting.

At a closed meeting, of course, you talk about whatever you wish. It is very good self-discipline, however, to leave at a meeting what you hear at a meeting. It is better not to tell even other members of Narcotics Anonymous what you have heard. Even older members forget this important principle. We all need to remind ourselves of the privileged nature of what is revealed in a closed meeting.

Our meetings generally close with the Lord's Prayer.

We have found it is good self-discipline to open and close our meetings on time. If you're late getting there, you'll be late for the meeting. Being frequently late to meetings is not a good sign; conversing with those near us during meetings is not a good sign; refusing to put money in the basket is not a good sign. (How much did a bundle of dope cost us?) These are all ways we express our anger and our rebellion. It's much better to confront these qualities head-on, like talking about them at a meeting.

7. People, places and things: the Game

There is a saying one occasionally hears in Narcotics Anonymous, "Copping is more fun than using." Like many catchy sayings, it isn't entirely true. After all, drugs were always our payoff. Yet there's enough truth in it to cause anyone once seriously into drugs to smile in recognition.

For us drugs were part of a "set." The glassine packets or pills or joints didn't just grow on trees. Getting them required us to interact with people in specific situations. We had to perform a series of more or less predictable acts--the trip to the doctor's office, waiting for the connection and so forth--before the treasure was finally ours. For us drugs have always been part of a complex series of activities. No good fairy ever said, "Here take this. Have a ball!"

Let us call the whole business of getting and using drugs--the waiting, the copping, the dealing, even those activities necessary to finance the deal, burglary or robbery, and so forth--the **Game**, for lack of a better word. When we first started using drugs, the Game was an annoying and frightening necessity, something we had to go through in order to get the drugs we wanted. Our first experience with an imaginary medical complaint in the doctor's office or a forged prescription of a burglary was terrifying. But as we kept playing the Game, something happened. We found we were beginning to enjoy it. We liked the excitement it offered, the sense of power and getting over on people, the secretiveness, the complex paraphernalia, the thrill of being outside the law and the gratifying feeling of knowing exactly what we were doing. Toward the end, in fact, it was hard to tell whether we were more addicted to the Game or to the drug. The drug led to the Game, the Game led to the drug.

One of the most difficult tasks we face in Narcotics Anonymous is in giving up the Game as well as giving up the drug. Faced with the somewhat terrifying prospect of building a new life for ourselves, we are often confused about exactly what the rules are or how everything should fit together. So it's natural that in moments of insecurity or self-doubt our minds should return once more to the security of the Game. Naturally, we're never very objective when we're thinking this way. We tend to forget what it was like when Game and drugs blew up in our faces--the overdoses and jails and hospitals and suicide attempts. Our memories are selective. We remember what it was like five or ten years before. Then we were in charge, and everything ran as smoothly as a car engine.

Getting the Game out of our minds is more difficult than getting the drugs out of our bodies. And if we get back into the Game our chances of survival are very poor. It's just too difficult to turn down the payoff.

At times the subject of the Game surfaces in surprising ways at Narcotics Anonymous meetings. A member--clean a month or so--may admit he still occasionally deals. Another admits he copped and then threw the dope away. Someone clean a year has an inexplicable urge to visit a doctor's office and get a prescription--"just to see whether I could still do it." An ex-junkie experiences the overwhelming desire to shoot ice water into her veins. We have heard ex-junkies admit they were as addicted to the needle as to the heroin. It all shows what a hold the Game has on us. As one member put it, drugs never come at us through the front door.

If we are to survive we must push all aspects of the Game out of our lives. The necessity for doing this is sometimes summed up in the warning phrase, "people, places, things." We must push out of our lives the people we used drugs with, those relationships within which using drugs was a natural thing to do, the places we hung out when we used drugs, and the things which our mind connects with drugs.

Each of us has to define for himself or herself the meaning of "people, places, and things." We all know our own level of comfort. If we are honest and securely centered in the program we can usually, but not always, be aware of what constitutes a threat to us and act accordingly. Certainly, paraphernalia and the drugs themselves have to go. These are the first things we throw out.

The following story reveals that there may be hidden dangers. One member, clean six months, whose drug of choice was alcohol, found herself buying booze, pouring it out and lining the bottles up on her kitchen shelf. "It's just that I think the bottles are very decorative," she explained. But her sponsor wasn't convinced, and insisted she discard the bottles. Bottles, of course, are the paraphernalia of the alcoholic. We are obsessed by

paraphernalia. They are to our Game what Chance, Community chest and Property Cards are to Monopoly. Can any of us walk past a head shop without closely inspecting the contents of the window?

Yes, the Game and its trappings are cunning, baffling, and powerful. It will make every attempt to suck us back into it. It's not necessarily that we intend to be devious or underhanded; it's that we can't always spot our own Game--although we do get better at it. The program is lifesaving because other people can spot our Games, and if we are in constant and intimate personal contact with recovering addicts, we will not be ensnared. The minute we make a move toward the Game, someone will call us on it. "Hey, that's a crazy thing to do! This is where talking with a sponsor and talking at meetings can be particularly valuable.

Sometimes our bodies tell us when we are getting close to the Game even when our minds refuse to recognize it. We often experience a definite physiological reaction, for instance, when we walk into a bar or a porno shop. We find our hearts beating faster, our stomachs filling with butterflies; perhaps our heads begin to buzz. Although alcohol may not have been our drug of choice, such a reaction in a bar is invariably a response to a Game which is similar enough to our own to constitute a real threat to our staying clean. (See the section, "Other addictions.") We must act accordingly. If we found a door going in, we can find a door leading out.

Generally, we must avoid personal contact with people we used drugs with. Carrying out the resolution to separate ourselves from them may involve for us some inconvenience and personal sacrifice. It may mean moving from the old neighborhood, changing jobs, or separating for the moment from some members of one's family. But nothing is more essential to our survival. These people can kill us as surely as if they assaulted us with a lethal weapon. They were our fellow players, and they want us back in the Game.

"But," you may say, "what about personal loyalty? These people were my friends." Really? Ask yourself how many of them visited you when you were in a detox, or sent you cards or letters when you were in jail or a rehab? They do not have your best interests at heart. They want you back, all right. Because you've been clean a little while, you've got money, and you may be able to provide more than your share of drugs. You can bet they don't want a recovered addict hanging around. If you call yourself an addict, and they played the Game with you, what does that make them? In ways subtle and not so subtle, they will try to get you to use.

Imagine yourself participating in the following little scenario. You're the first speaker.

"I'm staying clean now."

“Oh that’s great. We’re really happy for you. Did you hear Jim’s back? He’s on the street, though. Says the people at the rehab really screwed his head up. That’s the same place you went to, isn’t it? I think he’s still in love with you.”

This brief interchange is typical of a thousand different possible situations whose underlying purpose is always the same: **we are being emotionally set up to use.**

“But I can help Jim,” is the usual first reaction. Jim can be helped, all right, but not by you. He recognizes you only as a player of the Game. He can get his help the same way you got yours when he decides he wants it. There is one fact we constantly emphasize to newcomers: Narcotics Anonymous is a save-your-own-ass program. The newcomers in the program are so swamped with their own problems that they simply can’t manufacture help for anyone else. You have to have it to give it away, as the saying goes. Let the old timers provide the emergency relief. The only help you can provide the still suffering addict right now is through the example of your own recovery.

We must constantly decide, often on a moment’s notice, whether a particular event or person constitutes part of people, places and things. An innocent office party may turn into a marijuana and cocaine bash. Or you find yourself at a musical event where everyone else is stoned. If we are cautious, however, such emergencies will occur only rarely. If we are on firm spiritual ground, such behavior will strike us as more boring than anything else. If you are in such a situation, remember telephones are everywhere, and you have a list of people who would like to hear from you. Moreover, if you read the section “Being assertive,” you will learn some techniques for handling the pressures which arise. Remember, you have the right to stay alive.

For the street addict, a street image is part of the role the Game calls for; the long hair, the street language, the macho stance. (See the section, “Giving up roles: The toughest kid on the block”). We may find ourselves hanging in places where the users hang, working night shift in an all-night store or a pizza parlor, for instance. When we refuse to clean up our dress, when we continue to use street language, when we insist on hanging out, what we are really saying is this: “Look. I want to give up the drugs. But I can’t give up the Game. It’s the only thing I know. If I give it up, I may disappear.” In short, we are afraid. **To us no one comes across more afraid than an addict being tough.**

Such addicts show a bullheaded resistance to the suggestion that they move from the neighborhood. Their excuses for staying come so fast and furious that it is a sure sign they are covering up. They find themselves being sucked into fights by street toughs and rationalize the fighting: “Man, no one calls me that.” What they can’t explain is why they are still living in an environment where fighting is such a natural thing to do.

We admit that such addicts do not necessarily relapse into using drugs, at least, not immediately. But they have made the decision to resist change, **and we know change is the name of the only healthy Game.** These addicts are to be seen at meetings, bitterly unhappy, battling everyone and everything, complaining ceaselessly about the very events and people they have chosen to stay among. It takes all their energy to hide the fact that they are at war with themselves and the spiritual principles of the program. They have made themselves part of people, places and things.

Not infrequently we have to admit that activities and situations which once gave us a great deal of legitimate pleasure are part of people, places and things. Music which we once genuinely loved listening to or playing has become infected with drug associations, or a relationship in which there was at one time a great deal of love has become so damaged that now the two people involved can only use the relationship to keep themselves sick.

You must take a long, hard, honest look at such holdovers from your using days. And you must be prepared to make some tough decisions. We **can** say to you that it is better perhaps not to think of giving something up. You should rather think of letting something go, of letting it be outside your life, at least for a while. Narcotics Anonymous is a day-at-a-time program. Meanwhile, you are getting involved with the program, meeting new friends, exploring yourself, applying the steps to your life. All these activities will ease the pain of separation.

All things change. Because music or a relationship is part of people, places and things today does not mean it will be a year from now. You may come to terms with the factors in yourself which cause you to use the music in a self-punishing way, or the partner in the relationship may decide to opt for a little change, too. In Narcotics Anonymous we have witnessed some very miraculous rejoining.

8. Giving up roles: the toughest-kid on the block

Naturally, to play a Game requires a role. We liked a role because it gave us some kind of power over people or events. We addicts; who seem to be manipulative by nature and frightened those others may see us for what we are; are experts in adopting convincing roles. Sometimes we hear members admit at a meeting the delight they felt on realizing they were hooked on heroin. "I realized I was a junkie. Great. At last I knew what I was."

Our addiction provided us with a readymade role in a readymade Game. How convenient! No growing pains, no problems in coming to terms with ourselves or others,

no need to establish priorities for our lives. We were the roles we played, and the only priorities were the drugs we used. The woman could be a suffering and well-protected housewife, another a hooker whose problem was never drugs, only the fact that all the men in the world were so lousy. A man could be a dealer (actually, we all liked to imagine we were dealers--maybe with extended runs of bad luck) and another rough, gruff biker, shaking his fist at the world. **All these roles provided instant self-justification: We were right and suffered heroically the fate of all visionaries; it was the world that was screwed up.** But we were really like the Wizard of Oz, frantically hoping that people would be so impressed by the thunder we were making that they wouldn't notice the lonely, frightened person working the controls inside.

At last, coming into the Narcotics Anonymous program, we have the chance to leave the roles outside the door. What a relief, taking all that armor off. But scary, too! "If I'm not that, I'm not anything," is our first reaction. But we are something, always have been, even on our worst moments. We just haven't discovered it yet. Most of us firmly agree with the psychologist Carl Rogers who believes that the person we bury under all our roles is the good person, the worthwhile person, the person we want to get to know. Often we have paid the heavy toll that role-playing demands: we've surrendered all our positive feelings. "When I came into the program," one member recalls, "I could feel only the savage emotions: anger and fear." But the person inside has those feelings in safekeeping, ready to make a gift of them to us.

The tough image is one of the deadliest roles--streetwise, cool, mean; cynical, too. Negativity is so much easier to hide behind than being positive: "Man, this world is screwed up." People were to be used, hurt, conned, manipulated, and got over on. Strange that all the persons we damaged seem to have survived, flourished in fact. It's us whose lives are in tatters. Who actually gets hurt? Look in the mirror sometime and ask the person there.

Of course, being tough isn't the only role an addict can play. Some of us played the role of doormat ("watch me suffer!"), or the role of party-person, or sophisticate. But whatever role we played, it was designed to keep people away, to keep them and us from discovering what we were really like.

Of course any role is difficult to give up. But you can do it. Ask yourself: Did you really like yourself when you were playing a role? Did it get you what you really wanted?

9. Taking care of yourself

All of our lives it seems we have been looking for some kind of magic--some complicated but easy way of getting our lives straightened out. But just when we thought we had our situation figured out, analyzed to perfection, we found ourselves once again sick, desperate, and lonely. Figuring out what screwed us up never seemed to keep us from getting screwed up. Imagine our surprise when we came into Narcotics Anonymous and found a program for living that wasn't complicated and wasn't easy. It was simple and hard. But, it worked, where all of our beautiful and ingenious analyses had failed. And we discovered an amazing fact: Getting straight doesn't involve accomplishing major things; it just involves doing lots of little things on a daily basis.

Many of these things can be summed up in the phrase, "We learned to take care of ourselves." This meant doing something we had never done before: establishing a daily routine of activities which would increase our regard for ourselves as persons: making our beds, shaving, showering, brushing our teeth, eating three reasonably balanced meals a day, learning to budget our money, learning to cook, wearing neat clothes, getting the laundry done, tidying up our environment, keeping appointments. Obviously; we never had time for these things when we were using. We were too busy hustling. Who can eat on a meth run, or brush one's teeth the morning after a drunken binge? Many are the times we bought new underwear (or didn't wear any) because we couldn't get it together to do the laundry. Frankly, we didn't like ourselves enough to take care of ourselves.

The above mentioned daily activities are more than just frills--they constitute the very basis of our recovery because they form an organized structure within which the program can work. We become dependable. Moreover, these activities establish who we are as people. **We become persons who are worth taking care of.** The morning mirrors becomes a friend rather than an enemy, because the person in it is straight and, let's face it, loveable. We can honestly say to the mirror, "You're not all I want you to be. You're not all you can be, at least yet. But you look pretty good to me today!"

Sometimes a day comes along when we can't seem to manage even the smallest responsibilities. We don't shave; we skip meals, show up for a meeting half-an-hour late, and miss an appointment. What we're really saying is "Today I don't like myself very much. I don't even want to be this person." On days like this you can do something else you've probably never learned to do. Be gentle with yourself. You don't have a failed life. You're clean. You're a member of a loving fellowship. The development of self-regard is always a painful, uncertain process of taking three steps forward and two steps back. But the time will come when nearly every day of the week is one when you can say "Hey! I'm O.K. I'm me!"

10. One day at a time

Most of us have tried, in the past, to quit using drugs. Whenever a crisis occurred which was obviously created by our using, we would swear off, either for some fixed period of time or, more ambitiously, forever. However, giving up drugs forever is exactly what the addict cannot face doing; in fact, both quitting using (who but an addict would ever need to quit using a particular drug?) and not being able to face a life without drugs are **symptoms** of drug addiction. (See the questionnaire in the section, “Are you an addict?”)

What solution does Narcotics Anonymous offer the recovering addict trapped in this dilemma? A very simple and effective one. **We do not try to quit using drugs forever.** We simply try to quit using **today.** This is one of the healing paradoxes one encounters so often in the program. (“You have to surrender to win,” and “You can have something only if you let go of it,” are others.) If we manage to get through today without using drugs, tomorrow will take care of itself. There is a saying that the world’s longest journey begins with one step. We view the path of recovery as being made up of small, easily-handled individual steps. If you have not used a drug today, you are as surely on the road to recovery as someone who, in length of clean time, is far ahead of you. And furthermore, anyone can quit using drugs for one day.

It is not only the addict who can benefit from applying this principle to life. No one likes to think of a commitment that lasts forever, even the most ordinary ones. The thought of having to make one’s bed every morning or to eat three meals a day, come rain or come shine, for the rest of one’s life is unpleasant for anyone. All healthy people have learned to view their lives as centered in one day, today, the only day we can do anything about. One of our members recalls seeing on a signboard outside a church in Dayton, Ohio the following prayer, “Lord, help me not to look back in anguish or forward in fear, but around in awareness.” The idea behind this prayer is one all Narcotics Anonymous members should adopt as a supreme principle of living. It is the one great source of all that is constructive in our lives. Almost always, when we are in the emotional doldrums, depressed, anxious or afraid, it is because we have forgotten this vital principle. (It is interesting that “a day at a time” is a basic rule for living found in all the major religions: “Let this day be sufficient to the needs thereof.”)

One member recalls talking at a meeting about his fear of getting old. A woman replied, “I would be afraid of getting old, too. But there’s no way I can seem to squeeze it into my day at a time program.”

The “one day at a time” tool is particularly helpful in handling the craving for drugs or the symptoms of withdrawal from drugs that the newcomer faces. We need only handle the craving or discomfort for one day, today. We may need to break the day down into smaller units of time, depending on our level of distress: One hour, one-half an hour, ten minutes, and five minutes.

For addicts, who have great difficulty being in the moment, living in small time intervals can be an unfamiliar and baffling experience. But we can learn to do it. The following story, told by a member whose drug of choice was marijuana, is typical. “I got up in the morning craving a joint worse than I ever had before. I told myself, I will not smoke a joint for two hours. At the end of the two hours I told myself the same thing again. I went about the day as usual, taking it in two hour intervals. The next thing I knew it was time to go to bed. I hadn’t smoked that day.”

Many other problems will yield to the same approach: trying to overcome other types of compulsive behavior, eating or gambling, for instance; working through a collapsing romance; enduring ongoing physical pain. Much in our lives and in our personalities that is wrong will benefit from the “one day at a time” rule.

Sometimes the following prayer can be seen on the wall of a meeting room: “Lord, help me to believe that there is nothing that will happen to me today that you and I together can’t handle.” Thus, even the important matter of faith, faith in ourselves, faith in the program, faith in God, can be handled on a daily basis.

Just as important, living a day at a time gives us a heightened appreciation of the many good things that come to us in recovery. To surrender ourselves to the pleasures and rewards of life’s good moments was something we never learned to do. We were always dwelling on the doom and gloom ahead. The next time you are doing something you really enjoy, whether it’s going to a movie or camping or dancing or spending an evening with friends, try to keep yourself in the here and now. At such times you may find your mind wandering off into obscure worries about the future. But when this happens, you must pull yourself back into the present. With practice, living in the now gets easier. And it brings with it a profound awareness of the benefits of staying clean.

11. What to do about the craving

When some of us come into Narcotics Anonymous we immediately lose the desire to take drugs. For others, early days in the program are an on-going battle with the craving to use. Most of us take a place between these two extremes. Normally we don’t think of using, but when our thinking gets confused, when we become angry, resentful, or self-

pitying, or when we wander too close to our Game, the desire to use drugs may hit us. In intensity the desire may vary all the way from a mild curiosity to a heart-pounding hunger. We usually crave our drugs of choice, but occasionally we have a craving for a drug we have never used. We may become momentarily fascinated by the rituals associated with a strange drug and see them as an escape from our situation. The pill addict, for example, may think of shooting heroin. Trying to handle a broken romance usually presents us with the severest trials of all, since we tend to use the romantic involvements themselves as a sort of drug.

Often we regard the craving for drugs as something foreign to us and unwelcome, somewhat like possession by demons. However, when you think about it, what could be more natural than a drug addict craving drugs? The fact that we react in such a frightening way to the craving means that once again we have become threatened by our feelings and are frantically looking for a way to control them. It's a good rule of thumb, though, that **we feel the way we're supposed to feel**, given our situation. In this, as in other predicaments, you should try to trust your basic functions.

Obviously, we members of Narcotics Anonymous have survived many such cravings; we are clean today, and, perhaps we are stronger and more self-reliant because of them. We may value our recovery more, since we generally don't put too much store in things that come easily.

However, we have found a number of techniques that are useful for handling the craving for drugs. Not all these suggestions apply to every situation; you should familiarize yourself with them so you can use them in those situations in which they are appropriate.

#1: If you are in a situation where your recovery is threatened, get out! You should not be around drugs, or around fellow players of your Game: **They don't have your best interest in mind.** Why you got into such a situation isn't important now. You can discuss that later with your sponsor. What is important is to leave.

#2: Call your sponsor. You need another human to talk to, one who loves you, who does have your best interest in mind. That's what your sponsor's there for. (See "Sponsorship.")

#3: Eat something, preferably a nutritious snack, for instance, a high protein food. We often crave drugs at moments when our blood sugar is low, usually in the late afternoon. In our addiction we conditioned ourselves to take drugs to provide that kick the energy of food would have given us. To most of us, the idea of using drugs after eating is less appealing. If you have a weight problem, you should exercise discretion, of course. Talk with your sponsor about it.

#4: Use the day-at-a-time idea, or break it down even further. (See the section, “One day at a time.”)

#5: Say the Serenity Prayer. (See the section, “Prayer, the spiritual part.”) Also use any other prayers you can think of. “Lord, relieve me of this obsession.” Since the mind can accommodate only a single thought, if you’re praying, you won’t be thinking about getting high.

#6: Try to accept the way you feel. Given your situation, your feelings are inevitable. As we continue in our recovery, our cravings for drugs get further apart and weaker in intensity. Most of our members seldom crave drugs. We have a saying, “Leave drugs alone and they’ll leave you alone.”

#7: Talk about it at a meeting. The discussion part of meetings often opens with the chairman asking, “Did anyone think of a drink or drug today?” Jump right in there: No one is going to judge you. If your story is particularly hair-raising, it may make for a good meeting. And few people end up using who go to a meeting and talk about it.

#8: As in everything else that happens to you, remember that you are a worthwhile person and that you are no longer alone.

If you find yourself craving drugs regularly; then you are doing something wrong or failing to do something right. You may be staying too close to your Game, or persistently doing something to keep yourself screwed up mentally, physically or spiritually. Make an appointment with your sponsor, sit down and review your lifestyle openly and freely. Your sponsor may be able to spot your Game when you can’t, or determine that you are engaged in some ongoing self-willed behavior, a personal vendetta or a holy cause, for instance. A few of us found our craving for drugs went away when we decided to stop stealing. Narcotics Anonymous isn’t particularly interested in taking a rigid moral stand on stealing. We are convinced, however, that stealing is very bad for addicts. We may tell ourselves we steal because we need the money. Of course, it’s a lie. Stealing is a way we get over on people. It’s secretive, it gives us a sense of power, it’s exciting, and it gives us the thrill of being outside the law. In short, it is playing the Game. Stealing is as close to the Game as we can get without using. For the addict who wants to get comfortable with himself, any kind of systematic dishonesty has to go.

Some of the other ways we can provoke our craving for drugs on an ongoing basis is summed up in the expression, HALT, which stands for the phrase: “Never get too

Hungry

Angry

Lonely, or

Tired.”

We may skip meals (for the recovering addict, these amounts to self-destruction). (See the section, “Diet and exercise.”) We may harbor an ongoing resentment. We may have become isolated from others, particularly people in the program. We may not be getting sufficient sleep. All of these things endanger our recovery.

12. Sponsorship

When talking to a newcomer, most people in the program emphasize three things: “Don’t use. Go to meetings. Get a sponsor.” The first two are self-explanatory. But what is a sponsor? What does he do?

A sponsor is an experienced member of the program who will act as a guide in your new life and whose counsel will help you to avoid some of the pitfalls reality holds for the recovering addict. Experience is essential in a sponsor. If he is to help you to avoid traps, he should have traveled the path before you. However, no rule can be laid down about the amount of clean time your sponsor should have. Some members of the program cannot function as sponsors no matter how long they have been clean. Others can build a good working relationship with the sponsee (sometimes, in program slang, called a **pigeon**) after less than a year’s recovery time. Whether a member can be a good sponsor is not entirely dependent on the quality of recovery, but rather on the person’s talent for sponsorship. All of us know of instances of sponsors whose lives are in disarray, and yet whose advice to those they sponsor is solid, comprehensive, and capable of being easily understood and acted on. We all have feet of clay.

If we find ourselves unwilling to get a sponsor, it is a warning we are on dangerous ground. It is often a sign that we have some destructive behavior we want to protect, stealing on the job, for example, or compulsive sexual activity. A sponsor will force us to examine our behavior, which is exactly what we want to avoid. Moreover, failing to get a sponsor is a way of staying uncommitted to the program, of staying on the fence. Most of us harbor a great deal of ambivalence about our recoveries--we want all the pain to go away but not all the highs, please! We imagine that by masterminding our own recovery and doing things our own way we can choose what we want from both worlds--from staying clean or from using. It doesn’t work. We come only to experience the

terrible pain of not belonging anywhere. Our using friends feel uncomfortable around us and the people in the program can't reach us through our protective shield. But there's one way out of this painful dilemma. Climb down off the fence! Remember, if your way was so good, what are you doing in Narcotics Anonymous?

Strangely, you alone must be the judge of the quality of your prospective sponsor's recovery. It is one of the continuing miracles of the program that the right sponsor usually finds the right pigeon. But we can give you some practical advice.

First, if you are a man, get a male sponsor. If you are a woman, find a female. The opportunities for manipulation, role playing, destructive romance, and sexual adventuring are too great in mixed sponsorships. We have almost never seen them work out. If a sponsor is chosen partly because of physical qualities the result is always a disaster. Most of us are horny most of the time. How can you get the possible life-saving guidance you need if you are looking down your sponsor's blouse or into his crotch? It's somewhat like walking down the street; picking out the most attractive person you meet and saying "Will you do my appendectomy for me?" Getting laid is only getting laid. Staying clean is life itself.

For those of our members who are gay or lesbian, we believe it is best to choose a gay or lesbian sponsor. It's not that any other Narcotics Anonymous member would lack the necessary understanding, but we have found that problems of gay guilt can be most carefully worked out with a gay sponsor.

Secondly, don't be too hasty in choosing a sponsor. Attend meetings and pay particular attention to the members who seem to be speaking to your condition, the ones who, from what they say before or in conversations after meetings, seem to understand what you are going through. Charm, robust humor, and a talent for telling clever using stories may be false virtues. Do you pick a doctor because he tells good jokes? Above all, the sponsor should be deadly serious when he talks about the program. He should make it clear to you that he believes working the program on a pick and choose basis is not acceptable--a step here, a meeting there. When you ask him to be your sponsor, you may well hear something like "O.K. But I expect you to do certain things. Go to ninety meetings in ninety days. Call me every day. Then we'll start looking at the steps--the third and the fourth in particular." About this time you may feel your stomach sinking. "What have I gotten myself into?" Relax. If you have such a sponsor, you're on your way to getting better.

Thirdly, once you have a sponsor, use him! He will probably give you telephone numbers where he can be reached both day and night, and he will expect you to contact him on a regular basis. It is highly unlikely that you can over-use your sponsor in your

first year of recovery. Don't worry about whether you are pestering him. We stay clean by helping the newcomer.

A member of the program recently described the difference between the way a newly recovering addict and an ordinary person deal with the crisis of a flat tire. The Narcotics Anonymous member stops, walks around the car three times, and hikes five miles to a phone to call his sponsor. The ordinary person fixes the tire.

A sponsor is there not only to advise you but also to listen. For many of the growing pains we experience in staying clean, the only solution is a willing listener. The idea that every human problem has a clear cut solution is a false idea that is prevalent in a society like ours that tends to see human problems from a technological point of view. (Methadone is such a technological solution.) An old saying is, a problem shared is a problem halved. The point of the anecdote about the flat tire is that although you will eventually have to repair your tire and you certainly can't expect your sponsor to do it, what you need now is human contact, someone to say "Hey! That's too bad."

On the other hand, your sponsor may give you specific advice, particularly about program matters. Try to be open to his advice. Try, in fact, to act against the negativity that has infected your whole life, the feeling we always get that "This isn't going to do any good." It certainly won't do any good if you don't do it! Most of the "solutions" we so eagerly embraced in the past turned out to be problems instead. Remember, feelings are **not** facts, and it is not necessary for you to believe something is going to work for it to work. Prayer is a good example.

The person you ask to sponsor you may turn you down. Don't be discouraged. It in no way reflects your qualities as a person or your suitability for the program. Program members who end up sponsoring too many newcomers find that their own needs are not being met. If someone tells you this, he has done you a favor. Keep looking. You will find the sponsor intended for you.

Should you have more than one sponsor? Generally not. If we find ourselves going to two or more people for advice we are probably looking--for the advice that will agree with what we already want to do. Being responsible to one person is a way of safeguarding ourselves from our manipulative natures.

At the end of two months or so you should probably have chosen a sponsor. If you allow it, your sponsor can be invaluable to your growth in the program. In many of the sections of this book, a recurring piece of advice is, "Talk with your sponsor about this." A sponsor is the way we keep our feet on the ground and avoid becoming the victim of our own schemes and hasty actions.

Though you will find your sponsor's help invaluable, you should be aware of the

limitations of sponsorship. Your sponsor is not Superman. He or she is not a counselor or psychologist, a social caseworker, a lending agency, a doctor or lawyer. Your sponsor is a recovering addict, just as you are, who is a little further down the road than you. The word “mentor” describes, perhaps, the role better than any other. The word derives from the same Greek word. Mentor was Odysseus’ trusted and faithful friend. The operative word is “trusted.” Trust is an essential ingredient in your relationship with your sponsor. You must be able to confide in your sponsor. Thoughts, feelings, past actions you have always hesitated to tell anyone else about; you must be able to share with your sponsor who will understand the privileged nature of what you say. Members of Narcotics Anonymous view sponsor communication somewhat as the church does the confessional. Whatever you tell your sponsor is classified in program language as Fifth Step material. (See the section, “Getting into the steps.”) It is for this reason that your relationship with your sponsor promotes your sponsor’s growth. It is a sign of our maturity when we can keep confidences and forego the attention and the cheap thrills that indulging in gossip give us.

There is, generally, a trial period in which you and your sponsor feel each other out, just as a new swimmer tests out the water. During your first meetings you will be embarrassed, nervous, and eager for your sponsor to like you. However, you will quickly find yourself working into a routine in which your conversations are more spontaneous and relaxed.

As your relationship grows, your sponsor will develop a sixth sense about you as a person, knowing when you need a listener and when you need advice. He or she can sense when you’re unhappy or when you’re in difficulty. Soon you will probably spend an evening with your sponsor without dwelling on your problems. When this happens, your sponsor is becoming more than a sponsor--becoming, in fact, a friend.

At times you may find yourself critical of the things your sponsor does or says. You may occasionally detect an apparent insensitivity to your problems or impatience with your progress. You’re discovering your sponsor is a human being, a struggling addict trying, like you, to get well. If you are like most of us, you will find a deep friendship emerging out of your relationship with your sponsor; but it will be a real friendship, something you have perhaps never experienced before, one hewn out of the rough imperfect material that we humans bring to friendships, not one of the ideal relationships that existed only in our drug fantasies. It is something worth fighting and struggling for. You may find yourself sulking, vowing to get a sponsor who **really** understands you, even throwing a temper tantrum and we hope, ultimately, apologizing. And you will find your apology accepted. For the program offers us a priceless gift: the ability to amend

relationships, something quite foreign to our using experience, where anger with a friend was a sufficient reason for us to write the friendship off forever. If we are determined to become human, an argument with a friend--even your sponsor--can be a blessing in disguise. Friendships, like everything else, are not perfect.

That is a great lesson you can learn from sponsorship, the lesson that you are both human beings and that being human is good enough. The miraculous thing is that, in the mass of shortcomings and imperfections that make up the Narcotics Anonymous fellowship, we can find all the love, healing, and strength we need.

Although it is very unlikely, something may happen to destroy the feeling of trust you have for your sponsor. Your sponsor relationship should not have been an exclusive one--you will have established other deep relationships in the program which can support you if this happens. It may be necessary for you to choose another sponsor. It is important not to judge or fix blame. You will grow if you can resist doing so. Remember the Prayer of St. Francis, "Lord help me to seek to understand rather than be understood."

All your major decisions and activities should be discussed with your sponsor: quitting smoking, taking a new job, making substantial expenditures, changing your schedule of meetings, getting involved in new social activities, emotional involvements. It is wise to always remember that a part of us is working **against** our recovery. How often have we seen the newcomer inform the sponsor a week or so after committing him or herself to an expensive anti-smoking program or buying a motorbike or car or dropping certain meetings? When we act impulsively and secretively, our worst nature is winning out. Whenever we act first and discuss it with our sponsors later we are keeping an important part of ourselves unavailable to the program.

13. Prayer: It's a spiritual program

The newcomer has read the words "God" and "prayer" a number of times in this book, and has undoubtedly heard them mentioned at meetings. Often the expression "my higher power," or simply, more slangily, "my H.P." is used. (The expression comes from our Second Step, "Came to believe that a power greater than ourselves could restore us to sanity.")

The newcomer may have greeted these words with silent distaste and contempt, or even with fear ("Please don't let this be a religious trip!"). Was Narcotics Anonymous, despite the evidence of sobriety all around us, going to be just another blind alley? Would we end up disillusioned and defeated once again, saying I was into Narcotics

Anonymous for two years,” the same way we had said “I was into meditation for two years,” or “I was into group for two years?”

That we were often hostile to religion and to God is an understatement. The only persons we knew during our addictions who claimed to be in touch with any sort of higher power were obviously crazy--acid freaks, for instance, or dust heads. Unkempt, skeletal, wild-eyed, the objects of our and our fellow users’ contempt, they were usually shuttled off to the locked wards of mental hospitals, never to be seen again. The other prominent God-fearing men we were familiar with were the starched and blue-faced fundamentalist preachers shouting from the Sunday TV screens. Occasionally we turned their programs on for laughs. Did Narcotics Anonymous want us to become like any of these people?

The more historically minded of us could build an impressive case against organized religion, too. Look at the Catholic Church, for instance, and the Spanish Inquisition, the torture and murder of hundreds of thousands of people, or the Protestant persecutions of witches in Salem. We delighted in pointing out the hypocrisy of the godly, the fundamentalist preacher in Texas accused of sexually molesting young members of his flock, or the chaplains of opposing armies who piously assured their soldiers that God was on their side. Actually, behind our attitudes about religion and God there was a fear, a fear we would later recognize to be a central fear in the addictive personality, the fear of loss of control. If we allowed God, even for a moment, to enter our lives, we would find ourselves a month later wearing a funny cloak and beating a tambourine in front of City Hall, as a scraggly and unkempt as any of the Jesus freaks we had always looked down on. We would lose control.

To begin with, let us assure you that Narcotics Anonymous does not want you to be any person other than the person you can most respect. In fact, it is not possible for us to be a person who is driven or possessed or for whom we have contempt and still stay clean. No reasonable program for living will make you into someone you cannot live with; it’s our addiction that did that.

Concerning organized religion and the evils thereof, we can only point out that, through human history, religion and spirituality have often had little to do with each other. Religion is too frequently spirituality perverted. As steel can be used to make guns and switchblade knives and bombs, it can also be used to make scalpels and plows and iron lungs. It is our decision what to do with the raw substance of spirituality that will make it good or bad for us. Narcotics Anonymous only wants you to be open minded about applying a universal set of principles (they didn’t originate with us; they are very old), sometimes called spiritual principles, to your daily life. What these

principles are we will explore in the chapter, “Getting into the steps.” Right now we expect you to do very little, no more than you can reasonably do.

Why the emphasis on spirituality in the Narcotics Anonymous program? Wouldn’t it be better off without it, more “scientific?” Some therapists think so--and the accusation of “religiosity” is a way some people put Narcotics Anonymous down--particularly disgruntled addicts who have returned to using. “Oh, Narcotics Anonymous; I couldn’t go for all that God stuff.” However, very thoughtful persons other than addicts have seen the connection between felt spiritual needs and addiction. William James, the great psychologist, said that the alcoholic was trying to find God in a bottle. If he had lived in our times, he would have said that the drug addict was trying to find God in a bottle or syringe. Some scientists have pointed out that, as our addiction progresses, many of us begin to feel vague religious desires. We wish there was something out there with which we could unite ourselves, something that could make us whole.

At the start of our using we may have told ourselves boastfully “What idiot could believe in God?” The point is, and then we already had a god: the packet, the pill, the joint, the bottle. But as our addiction progressed and we came to find less getting high in getting high, our god seemed to have left us hanging. At this point something in us wants a God that will work for us, rather than against us. These desires, if they occur, are healthy: They mean there is a part of us that wants to get well.

We think it is the lack of attention to the addict’s spiritual needs that has spelled the downfall of other therapies, either psychoanalysis, or the purely medical therapies such as methadone maintenance or the once current (and apparently sometimes fatal) carbon dioxide therapy. Such approaches can’t satisfy the spiritual hunger we feel. It’s unfortunate, too, because many psychiatrists and counselors have spoken of the addict’s need for a spiritual basis for living.

One new member recalls a wise piece of advice from his sponsor: “If you want to grow spiritually you should forget all you’ve heard about God and religion.” Perhaps Narcotics Anonymous can be thought of as a do-it-yourself God kit: we discover as we stay clean a loving God who provides us with the strength to continue to stay clean. That a God exists which can give us direction and stability rather than the curses of guilt and emotional pain is one of the greatest rewards of the program. It has been our experience that Narcotics Anonymous members need God and they need people. We can only find one through the other.

What do we expect you to do? At the start very little. We would like you to begin by using three small prayers. It isn’t necessary for you to define the word “God” to use them--that may take the rest of your life to do--nor is it necessary for you to believe they

will work, although we will give you some reasons why we think they work that have no obvious connection with God or spiritual matters. After all, it isn't necessary for you to believe the lights will go on when you flip the switch for it to happen.

1) Start each day with the prayer, "God, help me to stay clean today."

This prayer centers us for the day; it reminds us of who we are (recovering addicts) and what our priorities are (staying clean). It reminds us that we are not alone in a hostile universe, that there are sources of help outside us. **Our recovery does not have to be our own project.**

2) During the day, if you are confronted with a difficult living problem, the craving for a drug, or any painful emotion, you will find the following prayer helpful (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.

3) At night, before going to bed, say "God, thank you for keeping me clean today." This reminds us to be grateful. It reminds us that no matter what else happened, for us the day was a success; we stayed clean. That was all we had to do, and we did it. The day may have been a good one, full of successes and accomplishments, or a rotten one-- we were angry and afraid and hassled by one failure after another. These things are simply not important. This day was a **success**: We stayed clean.

As much as the help these prayers will give us we need the self-discipline of uttering them. We need to be reminded that we **can** do simple things, that we can act on our own needs and take direction. We no longer have to be our own worst enemies.

14. Doing everything overnight.

Addicts are impatient people: impatient to make the connection, impatient to take the dope, impatient with the quality of the high. It has often been remarked that one can pick addicts out from among ordinary people just by noticing how rapidly they consume even harmless beverages like sodas and coffee. This impatience, which, of course, carries over into our recovery, is one of the greatest enemies of our growth and our stability.

Sometimes this impatience shows itself in the way we establish unrealistic goals. Once we get our feet on the ground we find dozens of things consuming as much of our energy as building our recovery and working on ourselves. Suddenly it is desperately important that we repair a long damaged relationship, return to school, get a better car or

job, quit smoking. Even our recovery is the object of our impatience: We want five years of being clean overnight, or at the least, we spend a great deal of time fantasizing about the profound wisdom we will spread among an admiring fellowship with our first anniversary talk.

As a recovering addict your first commitment should be to the program. You should avoid making major decisions and changes too early in your recovery. The new member, during his or her first year or so, should not try to do too much more than stay clean. Most important changes must take place within us, and the fact is that unless we put our recovery first in any and every situation, we will never be able to get or hold onto those things we would put before it. Engaging in causes and ill-advised grandiose projects has spelled tragedy for too many of us. At this point we must leave great schemes and the management of the world to those better equipped to handle them. Remember where you came from--the accidents, hospitals, jails, overdoses, the nightmares and terrors--and compare that with where you are today. This mental exercise can always help us to relax any unrealistic demands we have on life.

One common mistake the newcomer who is not already a fulltime student makes is returning to school too soon. We may fall into the unfortunate habit of comparing ourselves with those we went to high school or college with but who didn't become addicts. They graduated, we didn't. Their lives are orderly and, apparently, successful; ours are chaotic and screwed up. Suddenly we find it terribly important to get that lost high school diploma or college degree and to do it as quickly as possible. We want to make up for lost time. We may run to the nearest community college, register for a full load of courses in night school, purchase large quantities of books and supplies, and study frantically for two or three weeks. Meetings and program contacts take the back seat in this rush program for self-improvement. What we find is that we simply cannot cut it. We have not developed the habits of patience, perseverance and self-discipline that a successful program of study while working fulltime requires. Hurt and disillusioned, we end up dropping out of school once again. If we are lucky, we escape with our recovery intact.

Actually, program members tend to make excellent students--when they take up a judiciously chosen program of study at the proper time in their recovery. They are often articulate, insightful about human problems and conditions, and energetic. Their experiences in the program have given them a maturity, compassion and view of the world that the ordinary student may well lack. But the readiness must be waited for, it can't be forced. This is another instance of where merely staying clean and working the Narcotics Anonymous program will prepare us to accomplish seemingly unrelated

activities in the future. Remember that not many things of lasting value can be done quickly.

If you work fulltime, we suggest, as a rule of thumb, that you wait until you have accumulated two or more years of clean time before you return to school. You should discuss your plans thoroughly with your sponsor to avoid making impulsive decisions and committing yourself to a program of study you may not be able to carry out. You should start out small, taking, say, a single course in night school. If you find you don't like the school or the material or aren't yet ready for it, the damage done is slight. You can try again later. Above all, you will not have severed your lifeline with the program. Contact with those in the program who have returned to school successfully is important, too; why repeat the mistakes of others, and, more significantly, why not learn from their successes?

Inability to find a job or to get the right job is another source of dissatisfaction to many new members. The point is that a clean addict without a job is better off than the using addict with a job. (In our view, it is on this issue that those in charge of methadone maintenance programs are so wrong; see that section.) What work you are doing, as long as it pays the bills and is such that the working environment doesn't threaten your recovery, is not important. We don't recommend that the pharmacist continue to dispense pills, the bartender to bartend, or the rock musician to take gigs with using musicians. Any sponsor worth his salt will advise such a newcomer to quit the job and take his chances on the next welfare check rather than that the next pill or needle may have his name on it. But you can work a boring job even among those you resent and stay clean; you may even be the better for it. An unsatisfactory working environment offers us many opportunities to come to terms with ourselves and with others. Tolerance, compassion, and putting oneself in the other person's shoes aren't qualities that can be learned in a vacuum. And the workplace is one of the best proving grounds for program principles. Many of us discovered that our coworkers and boss improved, unaccountably, the longer we stayed clean.

When is the right time to seek a better job? Most of us have discovered the right job comes along when we are ready for it. In our recovery we meet many people inside and outside the program. Often the people we meet notice the personal qualities the program has brought into our lives. They may be impressed by our even-temperedness, our maturity, our insight. Very often these personal contacts result in job offers. No area of our recovery is as full of strange coincidences and little miracles as this. In our working lives, as well as in so many other areas of our recovery, it is good to bear in mind the

maxim: “When the patient is ready, the doctor will arrive.”

The pursuit of things--whether car, house, clothing, or motorcycle--is another way we can sabotage our recovery. There is nothing inherently wrong with having nice things: Buying something for ourselves can be one of the rewards of the program and even an act of self-respect, a way of saying, “I deserve this.” Like so many other issues the true solution here lies in moderation--the golden mean. Nothing makes us feel quite as much like using as acquiring a possession for which we aren’t yet ready. There is the feeling of stimulation that ownership gives followed by the sense of being cheated after we tire of the toy--in other words, we’re saddled with exactly the same set of feelings that caused us to search for a more lasting and powerful high. Often, in a panic, we buy yet something else and see, in horror, a whole new pattern of compulsive behavior begin to emerge in us. We find ourselves spending to change our moods.

One newcomer impatiently asked his sponsor, “When will I be ready for a new car?” His sponsor replied, “When you no longer want it so much.”

There is much to be said for that answer. Addicts don’t make very good materialists. We need God and we need people, and material possessions don’t have much to do with either. Our real problems don’t stem from the things we lack, but from what we are or aren’t as human beings. Our true talents are for working with and helping other people, for developing our potential and seeking growth. That’s why a sense of betrayal always accompanies compulsive spending.

The program will give us what we need when we need it. Any member, Christian or not, will find the biblical passage, “Consider the lilies of the field...” very meaningful. That Power whose immense concern and love gave us the miraculous gift of sobriety will not deny us food when we are hungry, a bed to sleep in, or the comfort of human contact. An overabundant concern with material possessions cuts us off from this source of help, and is the cause of much of our unhappiness.

15. Methadone maintenance

Because Narcotics Anonymous is a program whose goal is abstinence from drugs and because Narcotics Anonymous works, our members view methadone treatment programs negatively. Despite the good intentions and compassion often to be found in the persons administering the programs, we think that the existence of methadone treatment centers reflects the cynical view society often has of addicts. The programs are, in fact, a way of warehousing addicts. “You can do what you want to with them as long as they don’t steal our TV sets” seems to be the message.

A major criterion for success in these programs is that the addict can keep a job. We wonder about a more important issue: the quality of the addict's life. Does he have any real hope? Does he grow emotionally and spiritually? Does he ever acquire the ability to give of himself to others? For the addict on methadone the answer is "no" to all these questions. Like it or not, methadone is an addictive drug and we know any addict taking such a drug will make the drug the center of his life. Will they give him as much as he wants? Will he get to the clinic on time? Will his urine sample reveal the presence of a pill he took two hours earlier? "I was obsessed with the idea that I would catch the wrong bus," one ex-methadone user says. "I knew I would get sick as hell if I ended up in Atlantic City."

Anyone who has been in a methadone treatment program knows that the centers are the most active coping places in town. The personnel running such centers--whether they are trying to control drug trading, administer to the addict no more than he needs, or eliminating illicit drug use--are really in a losing position. They are trying to beat the addict at his own game.

Ultimately, however, it is the addict who loses. He is trapped in a dependent role in one of the toughest games of all.

Many of us were in methadone treatment at one time. We are now free of methadone and all other drugs. We think the word "free" has a beautiful sound to it. If you are now on methadone maintenance, keep coming to our meetings. Talk to us and listen to what we have to say. What we have done, you can do.

16. Being assertive

How often have you found yourself saying yes when you wanted to say no? Or suffering a bad meal in a restaurant or sloppy service in a store and saying nothing?

Addicts, perhaps more than others, find it difficult to communicate their feelings and define their space to other people. Addicts have spent their lives mastering the fine art of people pleasing. Occasionally we tried to please others in order to get something we wanted, but that wasn't usually the reason. We didn't really like ourselves very much, and that's why it was so important that others liked us. Isolated and always feeling on the outside of any group, we wouldn't feel so lonely; then we would feel we belonged.

If we are to stay clean this life-long habit of people pleasing must come to a halt. There are times when our very survival depends on our ability to say no: "No, I don't use," or "No, I don't want a drink." It's something none of us are very good at to start with, but it gets easier with practice, like anything else.

Defining your own space--letting others know what your wants, needs and feelings are--is called being assertive. It's not being aggressive; that means violating the rights of others. Being assertive means asserting your own rights. It is an essential part of our recovery--we are no longer anyone else's doormat.

What are some of your rights? Among others:

1) You have the right to ask a question. (How many times have you accepted an explanation from someone else when you didn't really understand it?)

2) You have the right to say "your behavior (or this situation) makes me uncomfortable."

3) You have the right to change your mind.

4) You have the right to say, "I don't know."

5) On the positive side, you have the right to say, "You're important to me," or "I love you."

Being assertive does not mean that you get into the other person's behavior or take his inventory. It means you talk about how you feel. "My steak was overdone. I wanted it medium rare." Flying into a fit of rage--which often caused us to get drunk or use at someone--doesn't count as assertive behavior, although at one time it was the only way we knew to express dissatisfaction. Assertiveness is done without temper. Why should we get angry when we are talking only about **our feelings and needs**?

Being assertive can be a great help in handling problems which arise around socially accepted drugs like alcohol, or increasingly, marijuana. Situations where drugs are being used we must, in general, avoid like the plague. Alcohol, however, because of the fact that it is socially accepted and can be consumed non-addictively by many people, presents special problems. We will usually avoid heavy drinking parties and, for the first year or so, bars. (See "People, places and things.") However, events like dinner parties where the host serves wine, weddings or business parties are part of life. Our recovery is on shaky ground if we cannot function comfortably in such situations. The Narcotics Anonymous program guarantees us fullness of life.

Here's how you can be assertive. Stop the drink before it's put in your hand. "I don't care for wine, thank you," or "yes, I will have something. How about a ginger ale?" In a restaurant, when the waiter is taking orders for cocktails, many program members order coffee. Sometimes we're asked why we don't drink. (But not so often as you may imagine. After we get clean we discover a lot of people neither use nor drink.) Remember, you have the right not to explain yourself. A simple "It doesn't agree with me," satisfies nearly everyone. Those clean a long time in the program are quite assertive, even business-like, about their refusal. "I don't drink. It caused me problems

at one time.” At any rate you don’t have to explain any further, and you certainly don’t have to take a drink to soothe someone’s ruffled feelings. Anyone who seems to be pleading a special cause by getting you to take a drink has a problem. You may see that person at a meeting soon.

You might ask yourself how you would handle the two following situations:

1) You are looking forward eagerly to your first date with a person to whom you’re very attracted. You very much want everything to go right. On getting in the car the person lights up a joint.

2) A person from your using past calls you, knowing you have a spare room. He or she wants to stay with you “until I can get on my feet.”

Of course, handling such situations is not easy. However, learning to be assertive in little situations--in restaurants, stores, and with strangers--makes it easier to be assertive in important situations. There are many useful popular books available. We recommend them. Above all, in situations such as the above which may constitute a threat to your recovery; get in touch as soon as possible with someone in the program. Their clear-sightedness and objectivity may give you the courage to say, “Look, it bothers me when someone smokes around me,” or “It’s not convenient for me to let you stay here.”

17. Alcohol vs. addiction

Sometimes a new member in the program holds onto the idea that he can drink alcoholic beverages safely. To experienced members of Narcotics Anonymous, that is not living clean. Alcohol is a drug, a depressant, chemically similar; in fact, to the solvents used in glue-substances any of us will admit have the potential for grave addiction. To the new member who says, “But I’m not an alcoholic!” we reply, “You’d better get used to the sound of the word. You just haven’t drunk enough yet.” Just as we abused pills or other drugs, we will abuse alcohol.

The tragic spectacle of the drug addict who discovers the new drug alcohol is very familiar to us. Why should the new member of Narcotics Anonymous expose himself to such suffering? One way or another alcohol will be taken from our lives, and the best time to get alcohol out of our lives is now.

Those of us unwilling to give up alcohol do so--we think--for two reasons. First, alcohol is a unique drug, a drug whose use is socially reinforced and rewarded. The fact that it forms the basis of comforting social rituals--weddings, cocktail hours, parties--makes us think of alcohol as necessary for normal living. The recovering addict--with his

damaged sense of self and his tendency to define himself by the way others see him--may think of alcoholic beverages as something that will restore him to normalcy, or make him part of the crowd. Secondly, using alcohol is a way the addict can express his rebellion toward the program and his own recovery: "This I will not give up!" Each of us holds onto certain things, and will give them up only when it becomes overwhelmingly clear that they are damaging our lives as much as our addiction did. The new member will find alcohol an evil ally; as long as he uses it he will not grow, change, and improve in his ability to make human contact, or be of such use to others. In fact, he is outside the program.

Occasionally a new member may find himself in the hands of a therapist who wants to make a social drinker of him. "I want to make you free!" the therapist may say. The therapist, who would recoil at the idea of the addict using heroin socially, is promoting the social use of a drug which is an even graver national health problem. Indeed, we may have believed we were free agents during our addiction--but our freedom consisted mostly of visiting destruction on ourselves and those around us. In recovery we find that responsibility is not opposed to freedom, but is an essential part of it. If you hear such a message from a therapist or anyone else use it as an opportunity to be assertive. Point out that you think it is total nonsense. The quality of our lives is determined by our love for ourselves and others, not by the chemical substances we use.

18. I'll never sleep again

Let's say you've been clean a week. It's 3:30 in the morning. You've been tossing and turning, unable to sleep, vague fears and feelings of eeriness plague you. The once familiar and comfortable room now seems strange. You sit up on the edge of the bed, your heart pounding. What can you do? Call your sponsor? That seems silly and besides you wouldn't want to wake him. "I'll never get to sleep," you may be thinking. "I'll go crazy."

Difficulty in sleeping is something almost everyone in the program has experienced. Yet, talk to anyone who has been clean any length of time and the member will usually single out the ability to get a good night's sleep as one of the greatest rewards of the program. What's happening here? Just how does the program help us to overcome insomnia?

Our many years experience have made clear some important and unusual facts about sleep and insomnia. One of these is that what your feelings are telling you when you think you can't get to sleep--either about how much sleep you are actually getting or

about the danger of going without sleep--are lies. In fact, there are two very helpful sayings in the program that illustrate this. One is, "No one ever died from lack--of sleep." The other is, "You will get as much sleep as you need and more than you think you do." We can add one more thing: "For the newly recovering addict, not sleeping is pretty normal."

For years we have flooded our nervous systems with downers, uppers and all sorts of mood changers. Our nervous systems are not yet comfortable in a drug free environment; as they adjust to being clean our ability to get a good night's sleep will increase. Sleeplessness is one of those problems for which staying clean alone are usually the answer.

Concerning the second saying, we point out that we are usually poor judges of how much sleep we get. Sometimes we think we have been able to sleep--but then are able to spot specific dreams. One morning a member complained of spending a sleepless night, and his wife played for him a cassette recording of his snoring. "You got enough sleep to keep me awake," she said. Usually our bodies are wiser than our minds, and we do get the sleep we need, not as much as we want, perhaps, but what we need.

All this may be little consolation to you at 3:30 in the morning. What, then, can you do when you're actually experiencing insomnia? (For us, insomnia usually consists of the fearful anticipation of not sleeping.)

There is a saying, attributed to the Buddha: "Don't just do something. Stand there." Much of what we have to say about sleep is this sort of advice.

First, **don't take a pill**. If you have such pills around, it doesn't speak well for your recovery. Not only would their effect on your recovery be very questionable, but recent medical studies show sleeping pills are a cheat. They probably don't give you the kind of sleep--physicians call it REM (rapid eye movement) sleep--you need. Better two hours of the right kind of sleep than eight hours of the wrong kind.

Second, don't try to sleep. Sleeping is one of the items on that long list of things that the addict cannot change by willpower alone. The more you fight sleeplessness, the bigger it gets. Try to lie still. A lot of frantic muscular activity--jumping around, slugging down quantities of warm milk, playing solitaire--are ways of processing your sleeplessness and attaching danger to it. Try doing a little deep breathing. Try simply to relax, to get a little rest. You may tell yourself you don't want to sleep, only to rest. Relaxation tapes and exercises are commonly available. The newcomer may find these useful.

The following two stories are fairly typical of our experiences.

Linda M. was in a detox unit for withdrawal from barbiturates. She had been taking

them addictively for several years. She was not given sleeping medication, nor did she ask for any. “I knew I was going to have to fight this out sooner or later,” she says. “The first night I didn’t sleep. The second night I didn’t sleep. I didn’t sleep the third, or the fourth, or the fifth night. The sixth night I slept.”

Carl C. was pharmacist with a long history of addiction to medical narcotics. The first week of recovery he called his sponsor at 4 a.m. on one of his most difficult nights of sleeplessness. The sponsor advised him to turn the radio on to a soothing FM station and to lie still and try to relax but to try not to sleep. Carl took his sponsor’s suggestions seriously. He lay down, tried to relax and found himself awakening three hours later. He tried it again and awakened three hours after that.

19. Drugs, doctors, and pain

Physical sickness, being part of life, will inevitably be part of our recovery. In fact addicts, who generally find it important to control events and people, may well experience physical sickness as more threatening than non-addicts. Unwelcome as sickness is, particularly serious sickness, we assure you that the addict can stay clean, and even relatively calm, through this or any other ordeal with which life confronts us. It would be a weak program for living which kept us clean during good times but was incapable of offering us help when the going got tough.

First of all let us admit that medications hold special hazards for all addicts, not merely those with a history of abuse of prescription drugs. To the addict, medication or a pill represents a means of control--in this case the control of a physical set. Like any other tool of control its use can become compulsive. Occasionally someone in the program will find himself taking the most harmless medications compulsively, twenty or thirty aspirin or Tylenol tablets a day, for instance, or mega doses of vitamins. Is taking so much aspirin that one’s stomach bleeds any less destructive than taking a drug which makes one high? Just as importantly, being compulsive about any medication is a sign that we have gone adrift, become distrustful of the healing powers of the fellowship and our program. When we take pills this way we’re saying to ourselves that God won’t work. And it’s not entirely the content of the pill that creates the problem; it’s the content of the head.

First, let’s first talk about pills that are **not** obviously mood altering, blood pressure medication, for instance, or antibiotics. About such pills, the addict should ask himself two questions:

- 1) If the pill is a prescription medication, do I take it as prescribed?

2) Do I make a point of telling my sponsor and others close to me in the program that I am taking the pill?

The latter point is particularly important since secretiveness is an essential component of substance abuse. If we are secretive about taking aspirin or antihistamines, it is certain that sooner or later the substance is going to create a problem. On the other hand when we are open with those in the program about any pill we use, compulsive behavior has little to feed or grow on.

Concerning the use of a medication for a specific physical complaint, we should always remember that illness served as an ideal tool in our former addictive lifestyle. We used it either to get attention or to get drugs. We were skilled at convincing doctors and even ourselves of the intensity of a headache or the disabling quality of our anxiety attacks. Such ways of using physical sickness will, of course, tend to carry over into our recovery, and we must learn to spot when we are either exaggerating complaints or using them for an ulterior purpose. One sure sign is when fascination with the pill outweighs our concern with the symptom the pill is taken for. Some of us will sheepishly admit that our headaches or muscle spasms were left behind in the dust of our excitement over a new medication as we raced from the doctor's office, script in hand. Whenever the prospect of taking any medication makes our hearts beat faster, we are on treacherous ground. It is especially then that we need the objective guidance and experience of others in the program.

Over-the-counter medications present special problems to the addict. Some cold pills and anti-histamines are mood altering. Any cough suppressant containing alcohol is dangerous for us, and those containing such compounds as chlorpheniramine can cause us difficulties. Recovering addicts should read labels on non-prescription drugs. It is not that such substances will necessarily produce relapse into our addiction or cause us to get high, but any medication which changes our mood or thinking tends to push the program out of our lives in subtle ways. Many of us have noticed that while taking cold medication, we pray less. The drug creates its own space in our lives. It is interesting that recent scientific evidence establishes that taking such medications interferes with the body's ability to fight the cold virus. The cold lasts longer. For these reasons a growing number of program people have come to think that cold medications do us more harm than good. Many people in the program refuse to take any non-prescribed medication. It is a good idea that, before you take any pill--even vitamins--you discuss it with your sponsor. A certain danger warning is when you look forward to taking the pill, and find yourself thinking a lot about it.

We believe that the recovering addict suddenly taken high because of a strange drug prescribed by an incompetent physician is pretty much a myth. We generally know what we can safely take; we have a lifetime of experience--the hard way--with drugs. Some of us know as much about drugs as some pharmacists, and more about certain drugs than most doctors.

Many of us owned well-thumbed copies of the **Physician's Desk Reference**, had an eagle eye for pill size and color, and knew how much of a given product could be counted on to produce what kind of high. One of our members recalls operating in his addiction an informal pharmaceutical consulting service, often getting calls from his using friends at 2 or 3 in the morning. Still, each new day brings a new drug, and the longer we are clean, the more unfamiliar drugs will be. Faced with the prospect of taking an unfamiliar drug, you have the right to know what is in it and how it will affect you. You should discuss with your doctor your past addiction, what your recovery means to you and what drugs have been particularly dangerous for you. This is a good opportunity for you to be assertive about your recovery. Some of us feel more secure in choosing physicians who are themselves in the program or who treat large numbers of program members. Being assertive with doctors is made difficult for us because of the role social tradition has cast them in (often unwillingly)--a sort of scientific priesthood doling out health and wisdom. They are in fact authority figures, and resentment and fear of authority seems to be a basic part of our addictive personalities. Nevertheless, you must learn to level with your doctor--remember, it's your body, your mind, your spirit, not his. If he can't seem to understand or handle the information you give him, it's best to find it out as quickly as possible and choose another physician.

When should you consult a physician? We do not advocate that you diagnose and treat your own physical complaints, in other words, neither you nor we should act as physicians. However, we point out that it is **always** the patient who decides when a specific complaint requires a physician's attention. This has always been so. In fact, who else can make the decision for him? The longer you live with a clean body and the more information you acquire, the more likely you will be to know when to call the doctor. An enormous number of complaints--ulcers, headaches, sinus trouble, back pains being often among them--are sometimes cured simply by staying clean. Some seem to come early in recovery and then disappear--leg cramps, for instance. Some are remedied by proper diet, rest and exercise. Others may need a physician's attention.

The knottiest problem of all is the one of addictive pain killers. If you are experiencing great physical pain should you allow yourself to take a prescribed narcotic--codeine, morphine, Percodan, or some similar drug? We admit that on this issue opinion

in the program are somewhat divided, although it is a tribute to the spirit of tolerance and love that the program fosters that people are generally unwilling to tell anyone else what to do. After all, it's your pain. Each of us has probably made a private decision--based on as much information as he has available--about what he would do in such a situation, but sometimes the rude facts change our minds. "I vowed never to take a narcotic for pain," one longtime clean member recalls. "That was before I took my first crap after a hemorrhoid operation."

It is important that you realize such events are very rare. Fretting about what you should do in such a situation is a little like worrying about your escape route in an earthquake. Further, we remind you that the program, the fellowship and God as you understand Him will keep you straight under any and all conditions. We repeat our guarantee that if you stay in fit spiritual condition you will not slip.

The following three stories, chosen from our many experiences, will illustrate how Narcotics Anonymous members have handled this problem. All three program members stayed clean.

June M. had root canal work done. The work was done under Novocain. The dentist warned her that the pain might be considerable when the anesthetic wore off and gave her a prescription for Impirin Compound #3 (with codeine). On leaving the dentist's office she immediately telephoned her sponsor who suggested she at least wait till the anesthetic wore off before she had the prescription filled and asked her to keep in close touch. By this time, however, June felt more threatened by the idea of taking codeine than by the pain. At times throughout the day the pain was severe, but June managed to keep herself distracted, taking it sometimes thirty minutes at a time. That evening she made a meeting and had a fairly comfortable night. The next morning, feeling pretty good, she tore the prescription up. "That", she said, "was the hardest thing of all."

Joe J. was scheduled for a urinary tract operation. For a week prior to his hospitalization, he spoke about the operation at every meeting he attended. Despite three years recovery he found himself very frightened: afraid of getting high on the one hand and afraid on the other of that part of him that looked forward in pleasure to the prospect of a "free" run. He had told his doctor about his addiction and the doctor, at Joe's request, dispensed with the hospital's routine nightly prescription for sleeping pills. (Joe's drugs of choice were barbiturates.) Joe received small doses of Demeral the first two days after the operation, but the fact that his room was constantly full of visiting friends in the program improved his confidence so much that he asked the doctor to stop the medication on the third day. Joe is still clean and active in the program (six years later).

Rich S. is a recovering heroin addict, six months in the program. He was taken by ambulance to the hospital in excruciating pain from a kidney stone. (Doctors classify a kidney stone as one of the two or three most painful physical ailments.) He was shot full of Demerol and maintained on a heavy dosage. Though groggy and at time semi-conscious, he maintained constant telephone contact with program people. Four days later the attack abated and Rich was released from the hospital. He continues to make a meeting a day, and says he feels an enormous amount of gratitude to the program.

20. Telephone therapy

“You’re no longer alone,” the newcomer is told. “Use the fellowship; get telephone numbers.” Often we stuffed the slips of paper covered with telephone numbers into our pockets but never used them. What was the reason? The reason was, **we didn’t know how.**

That seems like a strange thing to say. Everyone knows how to use the telephone--it’s one of our earliest learning experiences. You just pick up the phone, you dial the number, and then. . . . Then **what?**

Well, in this case we’re asking for **help**. We’re screwed up, maybe feeling suicidal, depressed, craving a drug, suffering an anxiety attack, whatever. And we’ve been told to telephone someone in the program whenever we get upset. But that’s our whole problem: We’ve never learned how to ask for help. Doing so goes against our entire using image--we were self-sufficient, tough, cool, the masters of our Game. Now here we are shaking, frightened, having to ask for **help**; and maybe even having to ask for help on a daily basis.

It is useful here to quote a program paradox. “You have to surrender to win.” We think about the people still into their addiction--winners, by their own account--and ask ourselves what their lives are like. They’re winning all the way to the emergency wards, the jails, the funeral parlors. Well, we admit, maybe we **do** need to learn to ask for help.

Another thing we have to remember is that we not only ask for help--by the process of asking we **give** help. We all need to be needed and we have made the other person feel needed. He may have had his own bad day and will welcome the contact. Also what you are doing is what he himself had to do to get and stay clean.

How do we open the conversation? There are lots of ways.

“Hello. I don’t know whether you remember me or not. I’m Mary, from the Wednesday night meeting,” for example.

Then comes the tricky part--letting the other person know you want help. Some lines we've found effective are:

"I feel I need to talk to someone."

"I liked what you had to say at the meeting last night."

"I'm sort of screwed up right now."

As we continue to use telephone therapy, we learn how to share our joy, too: a new job, a raise, a great meeting we attended we want to talk about. Our telephone contacts become our network of new friends, program friends. Until we build friendships in the program it will be very difficult for us to let go of our using acquaintances.

We are often told that the recovering addict needs **intimate daily contact with another recovering addict**. The telephone is one of the most effective ways of doing this. It's a tool that's available any time of the day or night. We must learn to use it.

21. Getting active

Newcomers often find themselves in a baffling situation. They have been told to attend meetings regularly and to choose a sponsor, and perhaps have done so. Yet they may feel on the outside of Narcotics Anonymous, cursed with the same feelings they had during their addiction, still alone and isolated, never quite able to discover the secret that would allow them to join the group, to really feel they belonged. They may even project their feelings onto Narcotics Anonymous as a whole, bitterly accusing it of being cliquish, snobbish, and disinterested in the newcomer's welfare.

First, let us assure any newcomer feeling this way that he is partly right. We are at times cliquish, we are at times snobbish, and we are not always sufficiently friendly in welcoming the newcomer. In short, we are addicts trying, just as you are, to get well. Much of our behavior, individually or as a group, is imperfect. We all have a lot of changing to do.

Having admitted that, let's get back to your feelings. What are you going to do? It may come as a surprise to you to realize that there is a way you **can** change Narcotics Anonymous; because you are a part of it, by changing yourself. We won't dwell on the folly of your trying to whip Narcotics Anonymous into shape **without** working first on yourself. What do you imagine would be the fate of any group of ex-addicts all of whom assembled for the sole purpose of changing the others, never themselves? If the results weren't so fatal, they might even be amusing. There is only one life you can take charge of and make changes in, and that is your own.

You may feel the program's not treating you justly, but life is not just, and there is no way we can make it that way. Birds eat worms, which is terribly unfair to the worms. Hunters eat the birds, which is terribly unfair to the birds. It is our belief that those of us who continually complain about the injustices of life and about our mistreatment by others are stalling. **It is a way of avoiding taking charge of our lives.**

You **must** take charge of your program life. There is a simple technique for doing this: **get involved!** Members sometimes refer to getting involved as the **service** part of the program.

Here are some simple suggestions for getting involved.

#1: Do little things. Clean ashtrays, offer to make coffee, and help set the room up. Such minor chores won't quite live up to our drug-induced fantasies about our noble fate; but then neither will anything else that is good for us. Don't do big things (not that there are such things in Narcotics Anonymous). Be an Indian, not a chief. It's amazing how often the Indians stay clean and the chiefs get high.

#2: You extend your hand to the newcomer. A member of Narcotics Anonymous with a very healthy marriage was asked how he and his wife managed to do it. "It's easy," he replied. "We each give in 90 percent of the time." Being self-centered people, we always imagine we are doing more than our share. We seldom are. If you see a newcomer, go up to him, introduce yourself. He needs to talk to someone who is staying clean, and you are. The worst thing he can do is talk to his fellow newcomers, who are still partly stuck in their Games.

#3: Go to business meetings. The affairs of Narcotics Anonymous are neither complex nor wearying. When you are at a business meeting, voting and otherwise expressing your contribution to our group conscience, you will feel you belong. The newcomer has a valid opinion.

#4: Stay around after meetings. That's when much of the best in the fellowship expresses itself. Each of us faces the real danger of becoming a White Rabbit in the program--you remember, the little character in "Alice in Wonderland" with the vest and the pocket watch: "I'm late; I'm late, for a very important date." The White Rabbit was always running somewhere and was never anywhere. Our isolation is the hardest part of our Game to give up. We find ourselves saying things like, "We've got to get together, sometime," or "Let's go to a movie, sometime," but it never happens. Translate for the work "sometime" the phrase, "At least I want to. But I can't, because I'm really afraid of people and what they think of me." Sticking around after meetings is a relatively painless way of allowing yourself to be drawn into the warmth of the fellowship. Usually someone is going out for coffee--you can ask around. Or you can invite others to go out.

Those trivial--but for newcomers often difficult and painful--coffee outings after the meetings have a big pay-off. They signify that we are willing to join the human race.

There is one simple phrase which we all should keep in mind: This is it. There is no future event that will be more important than this one. There is no magic moment in our psychological futures when everything will begin to click and we will really start living. This is it. Today, this meeting, the little coffee session or bull session afterwards, is all you have. Make yourself part of it. Unless we make ourselves ready for the present this way, we will never be ready for the future.

After you have been in the program a little while, there are some other things you can do.

#5: Speak when you are asked to. That means, be the featured speaker at a speaker-discussion meeting. Do you have enough time? A good way of telling is: If the person who asked you believes you do, you do. You may find giving your first talk is a scary affair, but it is a certain way to grow. Wanting to back out once you've agreed to talk is very average, and being totally pre-occupied with what you're going to say to the extent of getting no sleep the night before is common. It's a good idea to approach giving your first talk this way: Don't think of yourself as having to manage everything you say. Let God give your talk: Let your experiences and your words be the vehicle for His message. If you look at it that way, then it's obvious that nothing you can say will be wrong. You do not have to be "well" for anybody.

No matter how you psych yourself up, you may find yourself sweating and nervous. Fine. Your audience will love you for it.

#6: Take commitments. This means speaking at rehabs, prisons, hospitals, and institutional Narcotics Anonymous groups. The good effect on our recovery is electrifying. We are vividly reminded of where we came from, and where we are headed if we use again. We see very sick people still into their addiction giving the same crazy excuses for their behavior we once gave. "My God!" we think, "I once said that!"

#7: Do Twelfth Step work. A portion of the famous Prayer of St. Francis goes, "Lord, help me to comfort rather than seek comfort." You do not have to be clean long to go on a Twelfth Step call, which means, carrying the message to the still-suffering addict as someone carried the message to you. (See the section, "Getting into the Steps".) You should of course, always have a more experienced member with you. Twelfth Step contacts are often made via a Narcotics Anonymous hotline. Various members of the groups volunteer to take hotline calls for a fixed period of time. Tell your group General Services Representative you want to get involved in this kind of work.

Having so little clean time, you may wonder what you have to offer a new person. What you have to offer is hope. Often still suffering addicts cannot identify with a member who has been clean five years: It seems like an impossible accomplishment. They can, however, identify with someone who's been clean six months.

You do not need to be wise or to have answers on a Twelfth Step call. Remember the preamble: "We share our experience, strength and hope." It says nothing about sharing our wisdom.

It is a good general policy to remember that men Twelfth Step men, women Twelfth Step women.

The above suggestions are some of the ways you can get involved. They're all ways of committing yourself to a clean life. The group won't run after you. You must run toward it.

22. Loneliness

It has often been said that drug addiction is a lonely disease. As we continue to use, more and more isolation and loneliness seep into our lives. This is one of the results of the progression of our addiction. When we began using drugs, it was usually for social purposes; we wanted to enjoy being with people, to be less inhibited and insecure, more spontaneous. Many of us imagined that using drugs made us feel the way normal people felt all the time. We could joke, sing, dance, and have a good time. What a marvelous medicine for our shyness and isolation. Eventually we found we were using drugs more and yet enjoying being around people less. Toward the end of our using we found ourselves secretive, paranoid, and less and less able to stand the pressure of being with others. Our addiction had built a glass wall between us and the rest of the human race. One member, whose drugs of choice were uppers, tells the following story:

"I knew I was pulling away from everyone else. It really bothered me that others could go out and socialize and have a good time and I couldn't. I sweet-talked a retired doctor out of a prescription for 500 Ritalin. (He didn't even know what they were!) These would help me be sociable, I thought. I would take them and for a while I managed to get myself to go to a few parties and chatter endlessly with the people there. But all that talk didn't help me to feel any more comfortable with people--it made things worse. Eventually I quit going out to social events; I would just go into bars and talk to strangers or go home and take electrical appliances apart and put them back together. One night, for no reason, I took the dashboard out of my new car. I spent eight hours on it but I could never get it back in. I realized then that the drug had caused me to totally desert people."

Another member, whose drug of choice was alcohol, has the following story. “Did you ever have the feeling that you wanted to go someplace and do something, but didn’t know what it was? That was the story of my drinking. I would go into one bar after another, looking for the party. I would go to ten or twenty different bars, looking for it. Maybe another city is where it’s really happening,” I would tell myself. “Sometime I’m going to San Francisco or Mexico City.” But, of course, I would just give up and go home. The party wasn’t there either, just an empty, spooky looking apartment.”

We have all had the experience of being lonely in a crowd. If only there was someone who understood us, who loved us! It may come as a surprise to us that having someone who understands and loves us is no cure for loneliness, either. In fact, it can make the pain of loneliness worse.

A young man clean six months in the program tells the following story.

“After supper I sit at home with my wife and my little girl. We have a really good marriage. She goes to Naranon so she understands me and my problems pretty well. I love her, and I love my little girl. But as I sit there talking to them or looking at them, I realize I feel totally and completely alone. And I had told myself that having these people to love would take my loneliness away.”

Yes, often we’re lonely in a crowd and we’re certainly lonely alone. The idea of spending time by ourselves throws us into a panic. We may try to make sure that every hour of our day is socially accounted for--that we are by ourselves as little as possible.

What a dilemma! And what’s the solution? Because we were lonely in our addiction, does it mean we will inevitably be lonely in our recovery?

It may help us to recognize at this point that many people besides addicts get lonely. It’s just that we specialized in it. The guilt about our using, our desire to control events and people, our feelings of being unique and unlovable, all these magnified an already existing loneliness. Not being able to be with themselves, not being able to be with others are problems all humans have to come to terms with. The French philosopher Pascal said that all of mankind’s problems stem from the fact that we haven’t learned to sit by ourselves in a room. Although we recovering addicts may have to work extra hard on our loneliness, we are joined in the struggle by the rest of the human race.

One member of the program was handing out buttons at a meeting on which was depicted a sad-eyed dog and the caption “I’m lonely.” When he handed one to a newcomer, the newcomer said, a little defensively, “Why did you give this button to me?” The member replied, “It’s a good bet. Everyone’s lonely.”

Most of us in Narcotics Anonymous, because of stories like the ones told in the beginning of this chapter, have come to realize that loneliness is not a social problem or

even a psychological problem. While it is certain that coming to terms with it has to be an inside job, we believe that **loneliness is a spiritual condition.**

To the newcomer, this may be a very surprising statement. However, our experiences have born it out. We have discovered that applying to our lives systematically the spiritual principles of the Narcotics Anonymous program; particularly the Third and Eleventh Steps (See the section, "Getting into the steps.") is the most effective way to overcome loneliness. What these steps require of us briefly is that we merge our wills with God's, and become sensitive to his presence around us and in us. In this way the walls around us we have built up through our addiction can be broken down and, as one often hears it put at meetings, "We rejoin the human race," because we have rejoined God, who is everywhere. The ideas of a God within us and the comfortable feeling of being at one with the rest of the world are very old ideas. They can be found in all the religions of the world. Evidently, these principles are ones that people for thousands of years have recognized as being essential to emotional health.

Although being around people isn't a cure as such for loneliness, it's pretty clear that God can't be discovered in a vacuum. We find Him through people. This brings us to the first suggestion for combating loneliness:

#1: Commit yourself to being around program people. Loneliness tends to breed on itself. If we haven't made plans to be around others in advance, we find we don't have the energy to seek out people when we are lonely. It's a good idea to carry around a little engagement calendar. It's useful to make a date to have supper with a program person before you go to a meeting. It takes up the slack between getting out of work and meeting time. Most newcomers find themselves sliding into self-pity when they eat alone. How do you approach someone to make a dinner date? Simple; call the person up and read this to him or her. "This is -- -- from the -- -- night meeting. I wondered whether you might like to have supper and then go to the meeting tonight." We assume you have lots of telephone numbers.

#2: Try to remember the last time you were lonely when you spoke at a meeting, went on a Twelfth Step call, or took an institutional meeting with a bunch of Narcotics Anonymous members.

#3: Talk about your loneliness at a meeting. People who confess their loneliness to each other often find themselves not lonely.

#4: Don't expect to find a cure for loneliness in casual or compulsive sex. Many, many of us try it, of course. But we always end up feeling cheated and lonelier than before. Why? Because when we express our sexuality this way, we are denying to ourselves that the other person is a real human being. Our partner becomes just a

collection of physical traits that we use to get off on sexually. The word “get off” was chosen carefully; sex used this way is a game very close to the using Game. (See the section, “Sex and relationships.”) We don’t take a moral stand against casual sex. We just advise you not to expect too much from it, in particular, not to expect it to furnish a solution to your human problems. (We suspect, by the way, that this is the reason that prostitutes are in such demand at business conventions. The men may not be so interested in sex as much as they are in dealing with their loneliness.)

#5: If you’re beginning to have persistent problems with loneliness, it’s a sign you should be getting into the spiritual part of the program. This is accomplished by the **daily** use of the Third and Eleventh Steps, by praying, by reading related spiritual material. (All religions have available good, sensible, non-promotional pamphlets containing advice on how one can develop spiritual tools for life’s problems.) If you like to read, you have a choice of a number of nonsectarian, nonreligious books that discuss our need for God and how He works through us, for instance, “The Varieties of Religious Experience,” by William James.

#6: Use your sponsor. Your sponsor can provide valuable guidance for dealing with loneliness.

The Narcotics Anonymous program works to rid us of loneliness if we work it. We find that we can come to enjoy a richness and intensity of human companionship we’ve never experienced before, and can even enjoy being alone--something we never before believed possible. We become our own best friend, a source of love, self-esteem, and comfort. When we go from being our own enemy to being our own friend, it means we’re finally growing up.

“I just wanted to get away from everyone and all the confusion of the city, so I went fishing by myself yesterday. I really enjoyed it.” This, such a typical statement made at a meeting, proves we **can** come to terms with ourselves. It is one of the great rewards of the program.

23. Dry highs and using dreams

A dry high may be defined as a period of emotional instability lasting from one day to six or so weeks. Although a dry high takes place when we are clean in the program--hence the word “dry”--the emotions we experience on the binge recall those we underwent while using. Some of the symptoms are anger, being at odds with everyone, including ourselves, acute feelings of impatience and rebelliousness, more than our usual quota of resentments and self-pity, and occasionally, the desire to use or to get back into

our Game. Our anger may even be directed at people in the program because of their inability to give us what we feel we need.

Addicts have always had problems with authority--we have always hated it and feared it. While practicing the Narcotics Anonymous program will help us come to terms with this part of our personalities, we may find that during a dry high we backslide considerably. We may mouth off at a boss, drive recklessly, almost daring a policeman to stop us, or break furniture or dishes. One member slammed an expensive FM radio to smithereens against a wall because he objected to a disk jockey's analysis of a popular record.

If it seems to you that such behavior is both childish and self-indulgent, you are right. A dry high is really a prolonged temper tantrum--a reversion to the child state with all its demands on the rest of the human race. Unfortunately, the rest of the human race goes on, ignoring our tantrum or politely but firmly closing the door on us.

A dry high need not pose a threat to our recovery. It depends on how quickly we decide to deal with it. Once we spot our behavior for what it is, a tantrum, rather than rationalizing it the way we used to rationalize all of our destructive behavior, the dry high is near its end.

A sure cure for a dry high is gratitude. How can we persist in our childish demands on life if we are made aware of the awful hell we have just come from? Of course, that part of us that doesn't want to get well, the same part that wants to prolong our bad moods and play them for maximum dramatic effect, doesn't want to feel grateful. We would rather be right than be well.

If we have been active in the program, we are pretty well insulated from the worst consequences of a dry high. Soon someone newer than we are will be placed in our path, someone still confused and really suffering, who needs our help.

Dreams of using are something almost all of us have experienced. The dreams take many forms. One common one is where the dreamer uses just a small amount of a drug, and then spends the rest of the dream worrying about the effect on his recovery, whether he will lose control, or how he can hide his using or explain his using to members in the program. Program members remark on the intensity and realistic quality of the dreams. We may awake bathed in sweat, confused and panicky. It may take us several minutes to realize it was only a dream. One member recalls searching his apartment frantically for a syringe after a using dream.

The newcomer may be surprised and relieved to know that we in Narcotics Anonymous think using dreams can be a healthy sign. We have consciously accepted the fact that we are powerless over drugs. It is likely that using dreams reflect the attempt of

our subconscious to come to terms with our conscious decision. It is a way of working the First Step. Nevertheless, it is a good idea to talk about such dreams at a meeting, if only for the reason that they are upsetting. In fact, you have probably heard others discuss them. While the dreams seem to become rarer and less intense, even members with ten or more years of solid recovery time occasionally have them. Like most of the other experiences you will have in staying clean, they are normal.

24. Sex and relationships

“Don’t take a drug, don’t get involved,” is some advice the newcomer is likely to hear. He can understand the first part of the advice--after all the devastation of drug use is what brought him to Narcotics Anonymous in the first place. But what’s this about not getting involved? Involved in or with what?

The word “involved” means romantically involved. “What is this?” may be the newcomer’s reaction. “Is Narcotics Anonymous telling me not to fall in love? Isn’t love what life’s about?”

We can understand the newcomer’s confusion and dismay. We have, all of our lives, been given a hard sell on the idea of romance. Turn on a TV set and sooner or later you will see a boy and girl sauntering on a beach in a sunset, windblown hair, holding hands, smiling adoringly at each other. Multiply this brief sequence by a million or so and you will get the number of times we have each been exposed to the same message: Romantic love is what life is all about. The goal of every normal person is to discover that one special someone who is going to give meaning to life and then settle down with that person in never ending bliss.

In the addict, who has always sought for something outside himself to solve his problems, the product of romantic love has an eager consumer. The message is clear: Life with romance is everything; life without romance is no life at all, something bleak, merely to be waited out, until romance comes along.

Perhaps the search for romance can work as a priority for some people, although no group of people can make more of a mess of their lives than addicts by running after romance. We don’t say this because Narcotics Anonymous is against love; we do believe that love has to be a foundation for life. But there is a big difference between love and romantic love. Often they have little to do with each other.

To clarify what we are really looking for in romance, let’s examine our state of mind when we came into Narcotics Anonymous. We are adrift in confusion, our moods roller-coasting between depression and euphoria. It’s understandable why: We recovering

addicts are on the beginning of the most profound change we will ever make in our lives. After several months of recovery, we often feel like screaming, "Please! No more changes! Just let me tread water for a little while." At such times it's explained to us that no one in the Narcotics Anonymous program can tread water. We are condemned to either go forward or we drift backward. We are, truly, the slaves of change. (See the section, "Making changes.") We long for something to give us calmness, some big hand to steady the ship. We long for the solidity and assurance of romance.

In fact, we have always looked for something outside of ourselves to make us well, some kind of magic. Either it was the right therapist, generally some kind of a kindly father figure who would place his hands on our shoulders and pronounce the word, "Heal!," or some religion, or the right drug, or the right boy or girl. What we have to learn and to accept when we come into Narcotics Anonymous is that there is no magic. There are no soft, easy ways to recovery. Staying clean always involves a lot of work.

As you may have guessed by now, looking for romance is just our old pursuit of magic. It is a softer, easier way of staying clean that, in the end, turns out not to be softer or easier at all. We always find that romantic involvements have their own kind of torture for us, and that the pain caused by a messy love affair exceeds the pain of whatever we were using the affair to avoid--mainly, growing up.

The newly recovered addict is rarely mature enough to manage an emotional involvement. Those early years in life when most normal people are learning to deal with their emotions we have spent using. For us, there was never a need to grow up. Gaining maturity, that ultimate defense against life's misfortunes, always took a back seat to getting high.

When we recovering addicts take a hard look at what we are like--as we must in our Fourth Step inventory--we are genuinely surprised to find how much of our behavior is affected by our immaturity. We discover, for instance, that we have always had an all or nothing attitude about life, with little appreciation of moderation, the "Golden mean." We have tended to idealize people and events, rather than accepting them as they are. Our total self-involvement led us to believe that others exist solely to fulfill our wants. We have a low frustration tolerance. Our self-concept has alternated between feelings of power and self-hatred, and, in fact, we have a very limited idea of what we are really like. Our immaturity is so noticeable to the people around us that one doctor who specialized in treating addicts, alcoholics in particular, labeled the addict, "his majesty, the infant." Since we are trying to stay clean and are trying to feel better about ourselves that label hurts. But there is simply too much truth in the doctor's observation for us to ignore it.

We do get better, of course; one of the main goals of the Narcotics Anonymous program is to rescue us from our perpetual state of childishness. But growth, though inevitable if we work the program, is slow. The sad fact is that a healthy relationship requires of us qualities we have in very limited supply when we are new in the program. Even non-addicts tell us that loving is usually the most difficult thing they've ever had to learn to do.

What qualities must we be able to bring to a relationship? First of all, we need to know how to be a friend. Most of us who are new in the program have little idea of how to socialize or how to be a friend. We are often uptight and preoccupied around people and have little feeling for how to handle another person's moods, particularly, another person's silence. One wise therapist, counseling a Narcotics Anonymous member who was recovering from a very painful involvement, made the following suggestion: "Why don't you quit trying to fall in love, at least for a little while, and begin learning how to make friends?" She hit the nail on the head, the member later admitted. Friendship requires tolerance, trust, forgiveness, acceptance of the good along with the bad, and the ability not to put conditions on the other person. Can any of us honestly say that we had such qualities when we came into the program? Like all other living skills, these things have to be learned. Which of us, coming out of a Game which required us to defend our stash and always keep ourselves covered, can claim the ability to trust others, for example?

Secondly, a relationship requires of us an ability to give that we've never learned. We are by nature takers, not givers. Someone once said that love is allowing, not demanding, giving, and not taking. In fact, allowing and giving are twin personality traits. Allowing someone to be whoever they are in any and all situations is giving that person his or her freedom. It is our nature to put demands on the other person, to lay down rules for behavior. Our insecurity about who we are and our deep-seated fear that we will lose the other person make us possessive, demanding, jealous. We have seen many of our members who were fully aware that their possessiveness and continual childish demands were destroying a relationship but who were unable to act otherwise. This is always the plight of newcomers in relationships: They may see what they are doing wrong, but are powerless to do anything else. The truth is that our possessiveness and jealousy don't result from lack of insight into our behavior. They come about because of our immaturity. When we grow up, we will no longer be jealous people, but that is hardly a help to us in our first year or so of staying clean. In the meantime, we usually find we simply cannot allow the other person in the relationship to be who he or she is. We feel we have too much to lose.

When such character defects come into play in a relationship, it often signifies the beginning of the end. The partner feels suffocated by our nagging and deprived of the opportunity for personal growth. Eventually, the other person wants out.

Of course it's a disappointment to us to realize that we can't have something we want so much. "How," we ask ourselves, "can something that makes us feel so good be bad for us?" We might have said the same thing about meth or junk. And the similarity goes further; it's not just that we can't handle the interpersonal mechanics of a relationship. The feelings that romance give us are dangerously close to those of being high: the same sense of elation, even rapture, the constant obsession--in one case with dope, in the other with our romantic object. Music sounds more beautiful, the world looks more exciting. It came as no surprise to us to learn that some scientists believe romance triggers big chemical changes in the brain, and that what the victim of romance is experiencing is a sort of self-induced chemical high.

It's obvious that love used in this way is an addiction. The danger these feelings pose to our recovery is great. We have seen many of our members, unable to deal with a destructive romance, resume using in a desperate last-ditch effort to bring their feelings under control. Or they may use in an effort to punish the other person or to punish themselves. Too often the Game of romance is the Game of life or death.

Not surprisingly, when romance moves into the recovering addict's life, the program is forced out. We find ourselves going to fewer meetings, and those meetings we do begrudgingly go to; we spend in thinking obsessively about our lover. The tools of the program are put aside; God is placed on permanent retirement. We may find ourselves slightly distrustful of God--He may not, after all, give us what we so badly want. Besides, why do we need the program when we have the one person who is going to make our lives right? If we allow our commitment to the program to be undermined this way, we will not be able to stay clean.

For the women in the program, emotional involvement poses special dangers. It is through no inherent defect in a woman's character that this happens but rather it has to do with the way society educates women. Women are taught to believe they are incomplete unless they have a man. Men are from early childhood made aware of the fact that they have many options in life; women are raised to believe they have only one--being a mate. A woman coming into the program feels her helplessness even more acutely--than a man. The temptation is all the greater for her to seek out an emotional involvement. Narcotics Anonymous realizes that it can't change this unfair self-concept society teaches women but we can help our women members to recognize it and overcome it.

Too frequently, the new woman member searches for a man--who has the outward trappings of masculinity and strength, and discovers the man beneath is unstable and immature. Soon the woman is involved in a relationship where she is emotionally, and sometimes physically, abused. Women in the program often admit they seek out men who will mistreat them. It plays into the masochism and the desire for punishment which was so much a part of our using lives, whether we were male or female. Even though such women may claim they are looking for a man with qualities of gentleness, understanding and compassion, when they encounter such a man they find him boring and scathingly dismiss him as a creep or a nerd. Somehow they always end up with a man who will mete out to them the punishment they secretly want.

Women who seek these kinds of romantic involvements are still stuck in their Game. The Narcotics Anonymous program demands that we learn self-respect and self-love. Obviously, self-respect can never be ours if we allow ourselves to be trapped in an abusive relationship whose whole message is that we are worthless.

For such women we have a word of hope. You can change yourself. You can change the object of your sexual and love interest. As you continue to stay clean and apply the principles of Narcotics Anonymous to your life--particularly the Fourth, Fifth, Sixth, and Seventh Steps--your self-regard will grow; you will become a better friend to yourself and will be less compelled to seek out men who are punishing. By developing inner strength and self-reliance, you will find it less important to try to get these qualities from someone else. If you are patient, the program will change your view of men. You will be interested in meeting and getting to know men who can give, not those who can only take.

In the meantime, however, such women can hardly do other than act out the emotional roles their Game and society has taught them. The process of reeducation is slow. It is particularly important that such women avoid getting involved their first year or so in the program.

Of course, men in the program must make changes in their emotional natures, too. Men need to learn to be sensitive and to develop good, honest communication with others. They need to learn that it is all right for them to feel.

We have indicated how we all encounter difficulties in forming and sustaining friendships. Perhaps for women this is doubly difficult, since they have usually been raised to view other women as rivals, competitors for the affection of men. The young girl discovers it is important to dress attractively, use make-up, flirt, all for the purpose of gaining an edge over other women. Again, the motivating fear behind all of this is the thought, "If I don't have a man, I'm nothing." An unattached man in his forties is seen as

a distinguished and eligible bachelor; an unattached woman in her forties is seen as an also-ran in the most important race in life. She's somehow, or so society thinks, basically defective. (A woman can change this view of herself, though. In the program all of us, male and female, whatever our age, come to recognize our own special worth and the worth of all others. We learn to stop evaluating each other in terms of physical traits such as age.)

The Narcotics Anonymous program makes it possible for women to enjoy what is for many an unfamiliar experience: the friendship of other women. Often at a meeting one hears a woman talk in gratitude about such a friendship. Women in the program come to realize that other women can offer them a unique kind of closeness and emotional support, since women often are less into their heads than men and more in touch with their feelings. The growing self-love that the program gives all of us is what opens them up to such friendships.

Absolutely the worst romantic involvement a newcomer can fall into is one where the partner is a newcomer, too. Two sickies don't make a well relationship. Such relationships usually run a brief and disastrous course. About the only thing two newcomers can share are their Games. Such a relationship tends to isolate both partners from those in the program with wisdom and experience, and the loss of this life-giving contact often spells the end of recovery. Also the relationship undermines any kind of reasonable meeting schedule. If the partners attend the same meetings they are usually obsessed in the contemplation of each other, or each is trying to say something especially wise for the other's benefit. On the other hand, attending meetings where the partner is absent may not allow the member to keep a healthy meeting schedule because of the limited number of meetings in the area. There are exceptions, of course. And we all know of solid relationships which began under the most adverse conditions. But we have seen many, many more program members get high from entering a relationship too soon, particularly, a relationship with another newcomer. It is like playing Russian roulette with five chambers loaded.

It may take considerably more than one year of recovery for us to be able to build a healthy relationship. We must get to know ourselves before we can offer anything to anyone else. A member entering a relationship should stay in very close contact with the sponsor and the program. We have seen even program members with strong programs derailed by unfortunate relationships. One of our most difficult tasks is to unlearn all the unrealistic expectations concerning love that society has saturated us with. We have to accept the fact that there will be times when we are pretty much out of touch with our love for our partner. There will inevitably be arguments and sometimes long-standing

clashes of temperament. Almost any two people living together find they have to agree to disagree about certain things, and there are always certain topics which must by mutual consent be placed off-limits. To continually bring up a subject which embarrasses or pains the partner is not honesty, it is aggressiveness.

We all want the good qualities a loving relationship can bring into our lives, but fighting through the bad that exists in any relationships can call for every ounce of our new-found maturity. Most program members who are involved in a successful relationship have learned it is more work than anything else. Above all, we can't expect any romantic feelings to last very long or to offer the relationship much stability or direction when they are present. All in all, we have to give a firm NO to society's attempt to sell us the commodity of romantic love.

One program member, clean now six years, survived several nearly disastrous romantic involvements in his recovery and eventually met a woman, not a program member, whom he began dating on a casual basis, almost as a friend. The friendship deepened into love--not romantic love--and two years later they decided to marry. The relationship shows every sign of being a healthy one. Looking back on his earlier experiences, the member says with relief, "Thank God I didn't have to fall in love for it to happen."

If the newcomers aren't to become romantically involved, how are they to take care of their sexual needs? Is the program against sex, too? We have already explained that the program is not against love. Neither is it against sex. Most sponsors will tell those they are sponsoring that it is better to have sex with those one is not romantically involved with, rather than to seek sex within a romance. We in Narcotics Anonymous are realists. We have seen many newcomers get high because they stumbled into disastrous romances, but usually, aside from a little guilt, a casual sexual affair poses a limited danger. After all, it is going to take us the rest of our lives to master the constructive use of our sexual energies. We do not delude ourselves that many virgins find their way into Narcotics Anonymous. After all, sex was one of the most dynamic components of our Game.

In choosing a workable approach to the sex vs. no sex dilemma, the newcomer should once again strive for moderation. The pursuit of sex for the sake of sex can create difficulties for us.

We often use sex, particularly masturbation, as a way of controlling our violently changing moods or as a solution to other problems, such as insomnia--"the non-addictive sleeping pill," one member called it. However, as someone once said, "ninety percent of

the population masturbates and the other ten percent lie about it.” We are more concerned with compulsive sexual behavior, behavior which consumes hours out of the day and becomes a new Game for us. Sex itself becomes an addiction. (See the section, “Other addictions: work, gambling, compulsive sex.”)

Since we all tend to carry around so much guilt about our past sexual behavior, let’s discuss for a moment what some of our typical experiences have been. Most of us have used sex extensively in several ways: as a power tool, as an adjunct to getting high, as a means of obtaining drugs or money, as a way of controlling our emotions.

Young males, particularly those into street drugs, often undergo a series of brief homosexual liaisons while in their addiction, even though they may not be gay. Such incidents have a definite pay-off for the addict, sometimes money or drugs but often rewards that are more complex. The addict may be looking for excitement, or a stabilizing father figure, or attention, or just plain affection. Our unwillingness to face up-to the fact that we enjoyed these experiences often causes us to come into the program with an unnecessary burden of guilt. Are we gay? Many of us wonder. Some of us are, of course, but more often than not these homosexual contacts of the past don’t mean very much. Most males in our culture have had early homosexual experiences. The point is that whatever our sexual identity is, the program will offer us a way of dealing with it. You no longer have to be afraid of who you are. If you are gay, you should be aware that Narcotics Anonymous has many gay members with long and successful recovery.

The women among us often used their sexuality as a commodity, sometimes as a way of controlling the males in their lives, sometimes in return for drugs, stability, or protection. Since, unlike the male, the female can experience sex without enjoying it, women addicts have the opportunity to make sex a much more functional part of their Game than male addicts. It thus may be more difficult for the recovering woman addict to enter into a sexual relationship without returning to her Game.

Handling sex responsibly is an important goal of our recovery. The sharing of your experiences with other program members or, when it is appropriate, in closed meetings will prove to be a vital tool in helping you to function in healthy ways sexually as well as to come to terms with your sexual guilt. We often think our sexual experiences make us unique, but it’s usually not the case. The chances of your having a sexual event in your past not shared by other recovering addicts are very small. As we grow in the program we come to look upon our past sexual misbehavior with good-natured humor, rather than grim embarrassment and shame. As badly as it sometimes served us, it was often the only way we knew to reach out for the love and the meaning we so desperately wanted out of life.

After all these dire warnings, we want to end this chapter on a note of optimism. We assure you that yes; you can find love through the Narcotics Anonymous program. Yes, you can (perhaps for the first time), experience deep and meaningful friendships. The tools of the program will prepare us to be loved and be loving people, if we use them diligently and patiently. Love **is** what life is all about. By staying clean in the Narcotics Anonymous program, we can bring it into our lives.

25. **HOW**

Anyone who wants a capsule summary of those attitudes which will work to assure our success in the program of Narcotics Anonymous should remember the letters of the word HOW--“H” for honesty, “O” for open mindedness, “W” for willingness.

It is often said that staying clean calls for “rigorous honesty.” **Rigorous** does not mean the same thing as **complete**; who is completely honest, after all? Even those of us clean a long time may occasionally lie, deceive, perhaps cheat. Honesty is not a static quality--instead it is **dynamic**, a growing quality of our recovery. Behavior we can live with today we may not be able to tolerate in ourselves tomorrow. As we come to think more of ourselves, our standards increase. What has to be **rigorous** about our honesty is our willingness to submit it to constant examination, by ourselves in our Tenth Step activities, and to others through our speaking at meetings. We can no longer afford to ignore our own behavior. When we view our own behavior as though it does not belong to us, or as if it were unimportant, we are not thinking clean. Viewing our actions this way means we still have a lot of self-hate left in us. We do not think we are worthwhile enough to clean up our act.

And self-respect is the real issue involved here. It’s nice to be honest, but that’s not the reason the Narcotics Anonymous program calls for honesty. One of our major problems as addicts is our isolation from others. Dishonesty serves to maintain our isolation because it is a way of getting over on others, a way of living a secret life. We in Narcotics Anonymous need God and people, and deliberate and systematic dishonesty separates us from both.

As we have said, we grow in our ability to be honest. One sometimes hears at a meeting a confession of stealing. True, the speaker may still be stealing but, nevertheless, has given up the option of keeping the stealing a secret. When this happens, it is a major victory. Behavior we do not like in ourselves is, when we own up to it, on its way to being past behavior. Talking about our dishonesty at meetings is a commitment to deal with it on the program’s terms.

Dishonesty, particularly stealing, is often very difficult to give up. We used it for so many purposes. Sometimes we stole to punish people. This it served as a substitute for being assertive, for dealing in a straight-forward manner with our feelings about someone else. Our boss didn't pay us enough, so we stole. Someone had a nicer car, so we stole the hubcaps. Stealing was a power trip. In fact, fantasies and day dreams about power constituted a major part of our mental life. But if we wish to stay clean, we cannot afford to have any kind of power over other people.

We may work at a job where our employer insists on a certain amount of dishonesty. We may be salespeople asked to misrepresent a service or product, for example. As we grow we find ourselves angrily resenting the fact that we are asked to do such a thing. We are then plagued with the twin demons of resentment and dishonesty. If you are in such a situation, talk at meetings and talk to your sponsor. You will get the courage you need to make the decision you must make.

Let's talk about open mindedness. For us it's not an easy trait to come by. We have developed the habit of being cynical, always putting everything down. It was a way of protecting ourselves, and also a cheap way of getting attention. Whatever happened, we could proudly say NO to it.

In staying clean, we have to learn to say YES to other people's ideas and opinions, to replace negativity with positivity. Of course it's hard--negativity was a life-long habit. It's often said that the Narcotics Anonymous program is like a cafeteria line--you take what you want, and reject what you don't. But unless you take **something**, you'll find yourself getting thinner and thinner. Keep an open mind, in other words, but don't let everything blow through it. If you find someone talking at a meeting who annoys you, ask yourself, "How can I use what this person is saying for my own benefit?" When we find that we can learn from those we dislike, it is a certain sign we are growing. Remember that others, and you, too, have the right to be wrong.

At first we hear many things that make no sense to us. Things such as, "You have to surrender to win," for instance. Some of us may be totally turned off--angry and frightened--by the spiritual part of the program. Just when we thought this program was going to save our ass, they hit us with God! Another religious trip! It is particularly in this area that open mindedness pays off. The God we speak of has very little to do with all the bad associations that word holds for you. Be open minded enough to reserve judgment until you find out what we are talking about.

We may not want to hear that we have to quit stealing, that we can't go back to school, that we can't have a romantic involvement. But as you hear this unwelcome advice, remember that those who give it have had an enormous amount of hard, practical

experience, and have seen people die who wouldn't listen. Try to be open minded to the fact that what is being suggested can work for you.

Finally, let's look at willingness. Most of us were distinctly unwilling when we come into Narcotics Anonymous. We were all pretty much of two minds about our recovery. There's a saying that no one comes into Narcotics Anonymous of his or her own free will. We are all forced in, either by a condition of employment or by family pressure or a court stipulation of the force of circumstances. In a certain sense, none of us wants to be here and our behavior usually reflects our ambivalence about our recovery. We may intentionally distract ourselves at meetings, or descend to sulking and silent scorn in social situations. The willingness to recover does not always come easy.

However, as more of the rewards of being clean accumulate, we find our enthusiasm about recovery increasing. We begin to really like the people we meet in Narcotics Anonymous, and to hear speakers with whom we deeply identify. Talking to others about important things in our lives is a new and exciting experience. We discover life can actually be good, better than we had ever imagined. We find ourselves laughing, enjoying being with people, awakening each day with more enthusiasm and energy. If we give it a chance, being clean will sell itself. As they say, bring the body around and the mind will follow. The willingness to stay clean comes with staying clean.

26. Anger and resentments

Anger plays a central role in the life of every addict. Unless we make every attempt to deal constructively with our anger, we stand a chance of using again. People in the Narcotics Anonymous program who have slipped often admit that it was a bout of intense anger, or an ongoing resentment, which led them to use again.

The emotion of anger was an intimate part of our using game. Often we got high so that we could act out an already existing anger ("I'll get even with him!") or, paradoxically, we got high to control an anger that seemed to be consuming us. One form our anger took was to use at people ("I'll show them! I'll get high!"). It was a way we expressed our rebellion at parents and all other authority figures.

Anger we experience in early recovery will trigger these same reactions, and we will find ourselves tempted once again to use to get even at someone or to control our resulting thoughts or feelings.

Of course, anger is a natural emotion--one, perhaps, which is responsible for our survival as a species. All humans experience it in one or more of its many forms, and we can't simply wish it away. However, for the addict, anger has a special significance:

We, more than anyone else, were the victims of our own anger. When we used at someone, who got hurt?

Those of us who used drugs to control our anger are genuinely surprised and frightened at the rage which surfaces in us when we quit using. We have often heard a newcomer say, in all innocence, and sincerity, “I really don’t hate anyone,” and, several weeks later, heard him venting his fury against a boss or family member at a meeting. If we don’t feel anger, it is a sure sign we are covering it up in some other way. Fear and depression are two very common masks for anger.

Anger takes many forms: rage, resentment (which can be defined as anger on the installment plan), sarcasm, envy, jealousy, cynicism, suspicion, rigidity. When we experience these emotions, we should be aware that we are skating on thin ice. Even when these feelings aren’t specifically connected in our minds with drugs, we have an obligation to use the techniques of the program to deal with them. It is very common for program members to delude themselves into thinking that as long as the anger doesn’t specifically cause them to crave drugs, they are in no danger. This is no more than the old “All I have to do is stay clean” fallacy. (See the section, “Changes.”) We have all seen those who seemed to be doing everything wrong in their recovery—including indulging in self-pity, resentments, and holy wars--and who doesn’t crave a drug up to the moment they found needles in their arms or pills in their mouths.

What about **justifiable** anger? What about all the crooked politicians, the thugs who mug old ladies, the hypocritical religionists? What about the obvious wrongs all around us? Shouldn’t we properly express anger at these things? Such **justifiable** anger is a very tricky subject for the recovering addict. We have never been very careful about distinguishing between this kind of anger and unjustifiable anger. As we saw it, our anger was **always** justified. Did any of us ever say, “Yes, I’m feeling pretty mad right now? But I really have no reason to. It’s actually my fault.” Of course not! We always rationalized our anger, and will continue to do so in our recovery. Not only can we usually not make the distinction between justifiable and unjustifiable anger, but even if we could, it is very unlikely that we could then act on the anger in a way that would be healthy for us.

Becoming involved in causes, or holy wars, has been the downfall of many recovering addicts. The motives of these addicts were usually pure and the targets of their causes were often well-chosen: a cruel and unfair employer, a scheming ex-wife, a larcenous lawyer, an insensitive government bureaucracy. The purity of their motives and the justice of their cause did not keep these addicts from getting high for the simple reason that for the addict, anger is part of the using Game. When we indulge in it, even

for the very best reasons, we are setting ourselves up because we are getting back into our Game. As difficult as it is to learn to do, we must leave justifiable anger to those who are better qualified to handle it.

How **do** we handle anger?

Let's talk first about **impulsive** anger, anger we experience on the spur of the moment. It is a mistake at such moments to tell ourselves that we shouldn't be angry or that the anger is unreasonable or bad for us. Giving ourselves such advice only increases our anger: We then become angry at our anger. We have found it's more effective to look at the actual situation that provoked the anger. More than likely it's one of the ordinary incidents that make up our daily pattern of living: a discourteous remark from someone, a rude or impatient driver, as examples. It is good for us to spot the specific situation for what it really is: a triviality. If we keep saying to ourselves, over and over, "It's a triviality," our brain will eventually get the message, and our anger will defuse. It really works.

In the program one sometimes hears the expression "How important is it?" When we feel rage rising in us and are overwhelmed with the desire to teach someone a lesson, we should ask ourselves that very question. Certainly, no situation we can encounter in everyday living is as important to us as staying clean.

Many members find the serenity prayer and the Third Step useful for handling anger. These, and all other such program tools, can keep us from **acting** on our anger, either verbally or physically. If we allow ourselves to fight physically or argue heatedly, we are the losers. It will take us days to bring our emotions back under control. Giving in to anger this way produces a hangover very similar to the hangovers drug use gave us. One member said the feelings he experienced after getting in a fight were like a meth crash.

A second kind of anger is resentment, an ongoing anger often directed at a person or a situation--a job, an employer or fellow employee, a family member. You should recognize resentments for what they are: a threat to your recovery. You should discuss resentments with your sponsor and talk about them at meetings, which are two legitimate ways we have of venting our feelings. You will be in good company. Much meeting talk is taken up with airing the day's resentments.

We are often told that the best way to handle resentment against a person is to pray for that person. Our first reaction to such advice is disbelief. How can we pray for someone when what we actually want to do is kill? If you act on this advice, however, you will be equally surprised to find it works! It acts to get the resentment off **your** shoulders and to allow you to breathe easily, to function once again. All program

members who have honestly tried praying for those they resent attest to the fact that it works. It seems the human brain can't harbor two sets of emotions at the same time. We can't simultaneously nurse a grudge and also ask God to safeguard that person's welfare. It's not necessary for you to come up with a long, elaborate, and, probably, dishonest prayer. Try something simple, like, "Lord, your will be done for _____ not mine."

When you talk to your sponsor about your resentments, he may make some observations that you will find unwelcome. He may want you to discuss **your** role in the situation that provoked your resentment. This may give rise to **another** resentment; you've gone to your sponsor for sympathy and support, and now it's **your** mistakes that are being pointed out. If this happens, try to be open minded, to recall that you have not always been above-board with yourself in this respect. We seldom owned our own mistakes, usually preferring to blame someone or something else. We **must** become responsible for our behavior. Your sponsor isn't there to please you; he's there to help you.

If your resentments continue to be an impediment to your growth and happiness, it probably means you have to face up to some hard decisions. You may have to quit a job, get out of a marriage, and move to another part of town. But it's far more preferable for you to make such a decision than face the consequences of not doing so. Your life is at stake.

It's undoubtedly true that anger is the enemy of growth, but also growth is the enemy of anger. As you stay clean, you will notice that your fuse gets longer. Situations which would have sent you into a rage in your first month of recovery are felt only as an annoyance in your sixth month of recovery. A lot of your anger, particularly your spontaneous anger, is a symptom of the tension produced by drug withdrawal. This cures itself. Another kind of anger is caused by your feelings of vulnerability, helplessness, and self-dislike. As you acquire more self-confidence and get to know yourself better; the source for this kind of anger will dry up.

Proper exercise is a good technique for discharging the muscular and nervous tension that produces much spontaneous anger. (See the section, "Exercise and diet.")

27. Self-pity

Self-pity is something that we hardly ever want to admit we are feeling. We have in our addiction mastered the art of hiding self-pity even from ourselves and that habit we carry over into recovery. We may, for instance, tell ourselves that we are just trying to

take a realistic survey of our situation and have honestly come to the conclusion that life hasn't given us a fair shake. Our reasons are various: We had a bad childhood, or didn't get a high school education, or an important love affair didn't work out, or our parents died when we were young, or we were born into the wrong neighborhood or social class or family. As many factors as there are that make up the human situation we can pick out to feel sorry for ourselves about.

Like other traits of immaturity, self-pity provides us with a way to be self-involved, to keep ourselves apart from the rest of the human race, and to deny responsibility for our recovery. After all, how can we expect any determination to get well from a person whom life has treated so unfairly? Some therapists call this the wooden leg game. We see this in some addicts who insist on being "sick" or being "handicapped." They program themselves for failures. In other words, as one therapist put it, **what can you expect from a person with a wooden leg?**

More than anything else, self-pity is a sort of willful spiritual blindness, where we stubbornly refuse to see that God distributes good and bad to all alike. No one gets the whole loaf. Most of us can think of instances such as the newspaper vendor who has no legs but who is incessantly happy and cheerful on the one hand, and on the other the young scion of a wealthy family who has everything but commits suicide. Clearly, it is not the situation we are placed in but our response to it that indicates how happy we are going to be.

Like most of our other negative emotions, we indulge in self-pity for ulterior purposes. First, it takes the pressure off us to start making all these scary changes people in the program are trying to get us to make, and secondly, it keeps us tantalizingly close to our Game. The belief that the world sucks or that we got all the bad breaks was usually quite necessary for our coping and using drugs. How else could we excuse an act so clearly self-destructive?

One subtle form self-pity takes is when we endlessly attempt to uncover the "real causes" of our addiction. We are sometimes aided in this effort by misguided counselors of the analytical persuasion. Since each new decade ushers in a new psychoanalytic theory about addiction, we in the Narcotics Anonymous program think it is premature to pin our hopes for recovery on any one of them, in particular, on a therapy which promises to ferret out the true reasons for our addiction. Besides, which of us really believed the explanations any of the analysts gave us, and, more importantly, how long did all those theories keep us clean?

We are happy to say that counselors are becoming increasingly realistic about the problem of addiction. The truly effective counselor wants the client above all to commit

himself to recovery; only then will the counselor discuss other problems. One counselor told a client who is a program member, “Suppose I told you that you became a drug addict because your mother took your teddy bear away from you when you were six years old. Wouldn’t you look pretty silly carrying a teddy bear around with you today?”

Another form of self-pity occurs when we exaggerate the importance of a trivial situation. A large and unexpected bill means we will be **forever** in debt. A date goes against our expectations and we feel we will **never** be able to function normally in social situations or get the sexual closeness we want. How often have we heard the young male in the program moan, “I’ll **never** get laid.” If we act this way we are once again expressing distrust in God’s timetable for our recovery.

Naturally, we don’t like to have our self-pity pointed out to us. Like the child in a sulk, we may reject all comforting. One newcomer, accused of feeling sorry for himself, angrily replied, “I have to. None of **you** would feel sorry for me!”

Traveling down memory lane is a sure way to end up on the pity pot. At this point in our recovery, none of us has learned to handle the past objectively. We will end up pulling out from our old duffle bag and lovingly caressing all the hurts of the past, the **childhood** embarrassments, the broken romances, the quarrels we could have won had we only said such-and-such. These excursions into the past are often accompanied by our favorite dry music played on the stereo.

What happens eventually is that we get sick from wandering in the bag of self-pity, fed up with being so much into our own problems. It’s a little bit like living inside a garment bag. If we really take our recovery seriously, we will soon reach out to others and admit that our binge of emotion was self-pity. Perhaps we’ll enjoy a good laugh at ourselves as we recount the episode at a meeting.

The best cure for self-pity is gratitude. If we develop the daily habit of gratitude and make a business of gratitude, rather than just an occasional effort at it, our problems with self-pity will take care of themselves. This will come about if we make the practice of working the Tenth Step at a particular time every day. We will learn to look at life’s ledger a little more realistically. We always feel a little embarrassed at our self-pitying behavior when an objective self-inventory brings home to us how unbelievably lucky we are. Gratitude is one of the most therapeutic side-effects of Twelfth Step work, too.

As we continue to stay clean, we will come to have faith in the timetable of our recovery. We will quit lamenting what we don’t have and realize that, though we may not always get what we want, we always get what we need.

28. Other addictions: work, gambling, compulsive sex

We have already pointed out how easily the addict can transfer his addiction from one drug to another. Our experience has shown us that addicts can also easily fall into certain patterns of behavior almost addictively. The effect of these activities is to separate us from the program and its spiritual resources, and ultimately to jeopardize our staying clean.

The new member who maintains a healthy system of daily self-inventory via the Tenth Step (see, “Getting into the Steps”) will discover that much of his behavior has overtones of addiction in it. For instance, consider carrying out a personal vendetta. If we plot to take revenge on a person or institution, we will encounter a familiar complex of feelings and thoughts. First of all, our thinking will tend to become obsession--all of our waking moments will be filled with the details of the plan. We will notice our hearts beating faster at the thought that justice will finally be ours. Then there is the ultimate crash when some aspect of the plan goes wrong or we lose interest in it. What are these other than the symptoms of thought and feeling that coping gave us? We must learn to recognize such patterns whenever they occur for what they are: We are playing the old Game again, perhaps with different pieces.

So many are the ways that we can behave addictively that one member said, “Every week I find a new addiction I have to deal with.” However, we shouldn’t be discouraged that so much of the using person is still with us. The program offers us a very effective way to keep our addictive natures at bay.

Although there are other such problems, particularly food addiction, in this section we want to discuss three particular forms of addictive behavior: work, gambling, and sex. These have spelled great trouble for many of our members.

It’s easy for us to convince ourselves that total absorption in our work is healthy. For so many years we were irresponsible and half-hearted employers or employees, or perhaps couldn’t even hold down a job. Now, with the gift of recovery, we have the chance to do things right. We may find ourselves working until nine or ten p.m., taking work home with us and working over the weekend. The ex-addict who has become a workaholic (that’s what we call it) is often devastated when the time for vacation comes around, and may even resist going on a vacation. What is he going to do with his time? Without the structure that his addiction to work gave him, he finds himself becoming depressed.

The workaholic lifestyle violates a fundamental principle of recovery, namely, the golden mean moderation. We seek to attain moderation, never excess, in all the important areas of our recovery. We must devote time to friendships, to learning how to play, to the development of our talents, as well as to our work. We neglect any of these areas of our lives at great danger to our emotional stability.

We think it is extremely important for the recovering addict to learn how to play. Not only human beings, but apparently all mammals, find play enjoyable. Play in humans takes many forms, from parlor games to organized team sports, but they all fulfill the same purposes: In play we lose our obsessional concern with ourselves and come in contact with our vitality. To thoroughly enjoy play, we must think well of ourselves, because part of the fun of play is to be able to laugh at our own mistakes. One member said that one of the most exciting experiences of her recovery was playing volleyball with other program people at a conference. Through the humor and vitality of the game, the players seemed to be re-affirming their bond as recovering addicts.

The workaholic rejects such pleasures. Everything for the workaholic is deadly serious, and spontaneity, the true essence of play, finds no place in life. Work has become a coffin, because, like all true addicts, the workaholic has deadened feelings. In addition, overwork undermines any reasonable meeting schedule and pushes the program out of the workaholic's life. Unfortunately, the workaholic usually won't listen to the warning advice of sponsor or program friends. As was the case with drugs, the workaholic justifies an addictive lifestyle by an endless series of excuses. "I just have this one more project to get out of the way and then I'll get back to meetings." There is, of course, always another project up ahead. What the workaholic is really telling us is that he or she has discovered something more important than staying clean. If the workaholic persists in this idea, the result is predictable.

Gambling is another pitfall for the recovering addict. More than almost any other nondrug oriented obsessional activity, gambling can spell instant ruin for us. We believe that the following warning accurately summarizes our group experience: **The recovering addict should not gamble.** To us the risks outweigh any conceivable benefits. The experience of compulsive gamblers, particularly members of the fellowship of Gamblers Anonymous, tells us that gambling is a way of satisfying certain deeply felt masochistic needs. The drug addict has such needs in abundance. It often seemed that in our addiction we were intentionally seeking pain. Thus, we ex-addicts are a set-up for a gambling problem. Some of us have indulged in such innocent-seeming activities as purchasing lottery tickets, found that these activities opened up emotions which seemed to be the same feelings coping gave us, recognized the danger, and stopped. However,

as is the case with any other compulsive activity, it is easier not to start gambling than it is to stop.

Sex can become another way of avoiding reality. We can easily make cruising and the search for sex a new and all-consuming Game. When we add the element of romance, we have a truly potent and addictive mixture. We use the sex/romance mixture to change our moods and to provide excitement, just as we did with drugs.

Because our gay members find sex so readily available, casual sex for them may become a major problem. It poses special hazards for gay members because they may not yet have come to terms with their sexuality. Thus casual sex and the often sordid settings in which it is engaged in will be used by the member as a way of putting himself down.

Another point for us to keep in mind is that most of us feel some measure of guilt about casual sex, and thus will keep our behavior a secret from others. For the recovering addict, however, secretive behavior is always dangerous.

Narcotics Anonymous is not anti-sex. On the contrary, we see the job of developing the healthy use of our sexual appetites as one of the most important and pleasurable challenges of recovery. Again, the goal we strive for is moderation. Sex should occupy its proper place in our lives; it shouldn't be wielding the whip over us.

There are a number of human resource groups that can help the recovering addict deal with other addictive behavior problems. We have already mentioned Gamblers Anonymous. Those of our members with eating problems may benefit from the program of Overeaters Anonymous. Our gay members who need help in coming to terms with their sexuality will find a gay counseling center useful. Of course, any outside source of help should be evaluated in terms of our own priority of staying clean.

29. Getting into therapy

The decision of whether or not to seek the help of a professional counselor is one many of us in the program must make. We think there are benefits to be gained from counseling, but there are also dangers which we will want to avoid. In this section we explore some of the benefits vs. risk aspects of the subject.

Generally, the attitude of Narcotics Anonymous toward therapy is very open minded and tolerant. Often one will hear at a meeting a remark such as "and my therapist told me. . . ." Many of our members came out of rehabs in which some form of psychological counseling was part of the treatment program, and have continued with that therapy until the present day. It obviously works well for them.

What might cause the newcomer to seek counseling? It may be fears or anxieties or a bout of depression that the newcomer can't seem to deal with in terms of the program. However, such emotional instabilities occur with great frequency early in the program. They are often the inevitable symptoms of making the adjustment to a life without drugs. Usually time is all the treatment we need. We suggest, therefore, that the newcomer wait about six months before making a decision to seek counseling based solely on such symptoms.

Certain of us contemplate getting counseling later in our recovery because we find ourselves stuck and want the therapist to guide us onto new ground. We feel we need an outsider to take an objective and experienced look at our living patterns and to make concrete suggestions. In such situations, the help a counselor provides can be very useful, and viewing the counselor as a guide who walks along with but perhaps a little ahead of his client is a very healthy attitude to take. We should beware of seeking counseling because we want a surrogate father or some other authority figure in our lives. We have to accept the fact that there is no way we can buy a new set of parents.

What should you look for in a counselor? Most important of all, he should take a realistic view of addicts and their problems, and understand that staying clean has to be the primary goal of your life. Many of the therapists who work on or are associated with rehabs have such an understanding of addiction. Furthermore, a growing number of therapists are themselves members of the program. All other factors being equal, we should certainly recommend you choose such a therapist.

A therapist who cannot understand why you shouldn't be able to use drugs, including alcohol, in moderation or who wants to pin-point the "causes" for your addiction is one to avoid. We have no direct quarrel with the views of such therapists, but they are not the therapists for us. They may be able to help some of their clients, but we are so unnerved by having to cope with their zany views about addiction that we can't benefit from even their good advice.

Some therapists who are legally qualified to dispense medication become convinced that to every emotional problem there is a pharmaceutical solution. As the saying goes, "If your only tool is a hammer, then every problem becomes a nail." We must be very wary of treatment by such therapists. For recovering addicts many medications have great potential for abuse, particularly the tranquilizers of the meprobamate and benzodiazepine types. Valium, one of the latter, is probably the most abused drug in the United States today and, strangely enough, many doctors are still blind to its dangers. A recovering addict who takes such is playing with fire. Rather than getting into a therapy

program which involves the use of any drugs, we strongly suggest you investigate one of the lay treatment groups, such as Recovery, Inc. These programs are drug-free and those of our members who have tried them have found them to be tremendously effective in helping them to overcome a host of different emotional complaints, such as phobias, anxiety attacks and depression. Some of our members continue to be active in such programs throughout their recovery. One member whose claustrophobia was so severe that he couldn't get in an elevator or in an airplane found himself completely relieved of his symptom after attending Recovery meetings for a year, and his experience seems to be typical.

Some of our members hold very negative views about medical doctors as therapists and would advise against going into therapy with a psychiatrist. Of course, there are many exceptions. One member recalls going to a psychiatrist who threw him out of his office shouting, "You're a drug addict, that's your problem! Go to Narcotics Anonymous. Come back here when you've been clean six months!"

When seeking a therapist, ask around, paying particular attention to those program people who have had successful experiences with therapy. Before you commit yourself to any therapy, remember you have a right to know your therapist's views about addiction; you and he should define the goals of your therapy and agree on a reasonable time limit for the therapy. Therapy should not be an open ended affair. Talking with your future therapist frankly and openly about such matters is for you good training in assertiveness.

30. Diet and exercise

We have stressed that addiction is a three-fold disease: mental, physical, spiritual. Much of our advice has dealt with the first and last two of these. In this section we discuss how to deal with the physical part of the disease through two powerful tools: diet and exercise.

The mention of these two words may make us cringe. In our addiction, diet and exercise received attention only insofar as we could work them around our drug using. As our addiction progressed, they received less and less attention. Our disregard for our basic physical condition coupled with the devastation that drugs produced left us physically wrecked. But now, staying clean, we have a chance to undo the damage. Those of us in the program who have intelligently followed a plan for exercise and diet feel we are now in better physical shape than ever before.

The process of physically rebuilding ourselves, like so much else in the program is work. But it is necessary if we are to enjoy a full measure of self-respect. We have to face ourselves in the mirror every day; if we like the appearance of the person we see there, it's easier to fall into the habit of self-respect which is so essential to our mental well-being.

We can't claim to advise you on "the diet" or "the exercise plan" to follow. We can give you some pointers, but remember that nothing can be accomplished overnight and that moderation is the backbone of any intelligent plan. Since, as addicts, we tend to take everything to extremes and to try to make up for lost time, we need to remember that the idea of physical recovery must be approached with moderation and patience. Don't be disappointed by your performance. Give yourself a break.

If we are to enjoy a measure of physical health we can no longer consider our bodies as repositories for junk food. Like any other important aspect of our lives, diet must be planned and eating can no longer be done on impulse or simply when it is convenient.

For addicts, breakfast is probably the most important meal of the day. Sailing into the day with a head full of coffee and an empty stomach is a sure invitation to a later crash: Anger, short-temperedness, depression and binges of self-will can be some of the mental results of ignoring the first meal of the day.

We suggest you eat three balanced meals a day. Try to stay away from sugars and fats as much as possible and to concentrate on foods high in protein--milk, fish, meat, cheese, eggs. Remember to include plenty of fresh vegetables and fruit in your diet. Drink plenty of liquids (2-4 glasses of water a day).

Many people in the program use vitamin and mineral supplements. These are a matter of personal discretion. If used, they should be used in moderation, since even something as innocent as vitamin supplements can develop into a compulsive indulgence. If you do decide to include such items in your daily diet plan, check for safe dosages of the fat soluble vitamins (A, D, E). For sleep problems, some have found chamomile tea, pantothenic acid, bone meal and warm milk helpful. The B vitamins are good for restoring energy drained by stress and depression. Also you need a source of vitamin C, since your body does not manufacture it (juice, fruit). Caffeine (coffee, tea, chocolate) should be used in moderation only.

Food can affect your mood and energy levels. As you continue to assume responsibility for the body you live in, you will develop a sixth sense about your physical response to various foods, to what and how much you eat. Your body will become an ally in your recovery.

Eating can also be a rewarding social event. Try to plan for as many of your meals to be spent with program people as you can. Meals can be important occasions for sharing.

Let's consider the subject of sports and exercise. About the only consideration we gave to exercise in our using days was to put down those who engaged in it. They were the bone-headed jocks; we were the cool ones, the philosophers. But if we are to grow physically, as well as spiritually and mentally, we have to abandon such judgments. We live in bodies for which we are responsible.

Exercise can be a unique method for releasing day-to-day tension and frustration. Also, as does eating, it can provide a means for socializing. Many program members are into activities such as jogging, weight lifting, basketball and swimming. Planning such activities with program members is a way of strengthening your commitment to the fellowship.

Exercise acts to increase our self-esteem, not only because it makes us look and feel better, but because it provides tangible evidence that we can set for ourselves goals and develop a program to meet them.

Physically, exercise does two things:

- 1) builds cardiovascular stamina; and
- 2) develops muscle tone.

Jogging, a good exercise because anyone can do it, does the former but not too much of the latter. Weight-lifting accomplishes the latter but not the former. Swimming does both.

It is important, whatever exercise you chose, to set goals you can fulfill. Ten minutes of jogging actually accomplished is better than a grandiose scheme for a half hour of jogging which you cannot even attempt because it intimidates you. Start small. There is no way to get in shape overnight. Above all, be assertive. Ask around. Seek the advice and support of those who are into what you are trying to do. It is a way of meeting new friends. Generally people who are exercise and sports veterans are happy to share their expertise. For instance those into weight-lifting are usually happy to help you develop a lifting plan. Pool lifeguards are usually accommodating about giving the novice swimmer pointers. Aside from the direct physical benefits exercise gives us, the opportunity to work with others yields many beneficial side effects.

When planning your exercise routine, remember that many doctors recommend at least thirty minutes of continuous heart-pumping exercise 3-4 times a week. But be certain you are in an appropriate physical condition to commence exercise, and don't neglect to do warm-up exercises before you start your exercise program.

31. Changes

There is an expression in the program, “If the only thing you do is don’t use, then you’ll use.” This expression indicates we recovering addicts are simply too sick to survive without making changes. And we have found those changes must take place in all areas of our lives.

Most of us, before coming into the Narcotics Anonymous program had tried, at one time or another, to stay clean without making changes in our lives. After staying off drugs for a few days we began to feel better physically. In fact, we found it surprisingly easy not to use. But what happened as the newness of staying clean wore off was that our lives began to seem empty and meaningless. There seemed to be no direction, nothing to work toward. Eventually, we come to view the prospect of living life without drugs terrifying. Being essentially the same people we were when we had stopped using and having no defense against taking the first drug, we used again. Looking back on such experiences we see now that we really had no choice. We had no program to help us deal with our addiction. And we had vastly underestimated the extent of our sickness.

Quitting doesn’t count. As Mark Twain said, “Quitting smoking is easy. I’ve done it a thousand times.” It’s **staying quit** that’s the problem. And to do that we need to make sweeping changes in our lives. Specifically, we must make changes in our **attitudes** and in our **behavior**.

Drug addiction rightfully has been called a disease of attitudes. If we are to have any success at staying clean over the long run and finding the happy life we all want we should work on changing our attitudes.

One of the first habits we must work to change is the habit of seeing ourselves as outsiders, outside society, outside the law. We must begin to think of ourselves as useful, contributing members of society, sharing with all others in our society certain social and emotional needs. The old head set, “me against the world,” has to be abandoned, as difficult as it is to do. We came to see the idea that we expressed our individual differences through the use of drugs as a myth. When we begin to see the drug culture for what it actually is, a culture of slavery, we will have made great progress. If we are clean we aren’t slaves to a connection or to hustling. Our opportunities are virtually unlimited. For the first time we have a chance at true joy.

Another--attitude that has to be changed is the attitude of secretiveness. Along with making decisions to stay away from a drug one day at a time we make the decision to share our thoughts and feelings with others. Only in this way can we avoid a return to drug oriented behavior.

And we have to make behavioral changes, too. Obviously, we have to stay away from drugs and paraphernalia and from the territory and persons who were involved in our using. But it is equally important to make other changes, to develop the habit of acting out of self-respect rather than self-loathing, to learn restraint of tongue, to acquire the habit of acting **against** our impulsiveness and compulsiveness. Our recovery will be very precarious if we do not learn to avoid acting out verbally and physically our anger. One member, whose experience is echoed by many others, said that most of his growth came from learning to keep his mouth shut at the right times. If we have not developed our assertiveness sufficiently to express our needs in a given situation without anger, then the next best thing is to “turn the situation over.” as the program expression goes, which really means we decide not to speak or act angrily.

One of the main benefits of taking Steps Four through seven is that by doing so we devise--a clear plan for making the changes needed. (See “Getting into the Steps.”) Until we do this, we may not have much of a sense of what needs to be done. But it is never too early to start making behavioral changes. Some sponsors advise making small changes just for the sake of making changes. If you usually wash your face before brushing your teeth, reverse the order. Or try driving a different way to or from work or a meeting. Such suggestions may sound trivial but they can accomplish two very nontrivial changes in your attitudes. They will commit you to the concept of a new life built through change and they will demonstrate that you are not ruled completely by your old habits.

Obviously some of our attitudes and behavior will be easier to change than others. Some changes we will resist very strongly. But our “NEVER” attitude must be changed to a “NEVER SAY ‘NEVER’” attitude. If you find yourself saying “This I cannot give up,” try adding an open-minded “yet” to the sentence.

32. Getting into the Steps

By attending the meetings and getting involved in the fellowship of Narcotics Anonymous we no longer feel we are waging a solitary battle to stay clean. We know others have done it, and we begin to believe we can learn from their advice and direction. The relief we experience on coming into Narcotics Anonymous and discovering that others have been where we are and have survived is enormous. We find we are loved and accepted for what we are, not for what we have pretended to be. No one is shocked by our past; in fact, we are encouraged to talk about it.

We may experience a sense of elation that lasts weeks or even months. (Sometimes this feeling is called a “being on a pink cloud.” The implication is that, as all clouds must eventually disperse, so the pink cloud must come to an end.) During this initial period of euphoria--if we experience it; many don’t--it seems that staying clean requires almost no effort. Every day is like a new toy. But sooner or later rude reality intrudes. The initial euphoria, enjoyable as it was, comes to an end. Our love affair with the program is over. We may find ourselves bent out of shape with anger, resentments, anxieties, all those demons we thought we had left behind with our using. One of our juiciest resentments is that the good feelings didn’t last. What did we, or the program, do wrong? “It’s not fair!” we howl.

At this point we begin to discover what those newcomers who experienced no elation in their early days have known all along--that staying clean involves work. We can’t stay clean on the good vibes on the fellowship alone.

Naturally, if we experience this letdown, we want to know what to do. Our sponsors or others in the program then begin to suggest that we examine--the--applications of certain principles, called Steps, to our lives.

What are the Steps?

Think of building a clean life for yourself as you would think of building a house. As mortar, brick, wood, nails and plasterboard are to a house, so must the Steps be to your recovery. No materials, no house; no Steps, no lasting recovery. It’s that simple.

The Steps--there are twelve of them--act to change us as persons. If we only stay clean--not that such would be possible for long--we merely go from being sick using addicts to sick non-using addicts. Addiction does not come in packets or pills or bottles--it comes in us. We are damaged people and it’s unrealistic to pretend otherwise. We are isolated, out of touch with ourselves, others, God. To survive we need to reorganize our inner and outer lives. The Steps help us to accomplish that.

The Steps are written in a way that is simple and easy to understand. The principles embodied in them are not new. Most of the Steps can be found in the principles of the Washingtonian movement and the Oxford Group, lay spiritual fellowships active mostly in the early 1900s. These groups did not have as primary goals the rehabilitation of addicts or alcoholics, although some alcoholics found they could stay sober by using the tools of these fellowships. The concern of the fellowships was the spiritual conditions of their members. The basic ideas behind the Steps are even older, and occur as ingredients for many religions and spiritual orders of the world.

Roughly speaking, the Steps help us to do four things:

1) Come to terms with what we were (Steps 1, 4, 5, 8, 9);

- 2) Come to terms with what we are (Steps 1, 4, 5, 6, 7, 10);
- 3) Establish a spiritual basis for living (Steps 2, 3, 11); and
- 4) Prepare ourselves for a life of service (Step 12).

The First Step requires us to admit we are powerless over our addiction, and that our lives had become unmanageable. It is the one Step we must begin to work as soon as we come into Narcotics Anonymous and, further, to continue to work each and every day of our lives. Whenever we identify with a speaker at a meeting or speak ourselves we are working the First Step. Every time we help a still suffering addict, the gratitude that we experience for our own recovery is actually work done on the First Step. The admission of powerlessness over our addiction must be complete--no reservations or hedging with statements such as "Well, meth **did** get me in a lot of trouble; but pot, that's something else." We must admit and accept the indisputable fact that our addiction **was in us**, not in the drugs we took, in short, that we are powerless over all mood changing chemicals. It is hardly possible for us to take the First Step perfectly when we come into Narcotics Anonymous--that requires an insight into our addiction that we don't yet have. But as we continue to stay clean, we get a clearer idea of how very central using drugs was to our life. **We lived to use and used to live.**

The First Step says "I can't do it." The Second Step says "God can." The Third Step says "if I let Him." In the Second Step we are asked to believe that a power greater than ourselves--to which the Steps attach the label God but which we don't need for the moment to define--can restore us to sanity. How do we come by this belief that we can get well? How do we decide something can happen which is contrary to all our experience? With us events always went from bad to worse; they never went the other way. Yet, the Second Step requires us to believe in hope, to have faith. Saint Paul called faith "the evidence of things not seen." In fact, if we had proof of something, believing it would require no faith at all. Nevertheless, in Narcotics Anonymous we are provided with a kind of proof. Look around you. You will see people who were once where you are, and who are now staying clean.

As we continue to stay clean we will encounter many living problems which, like drugs, cannot be solved by the application of will power alone. We may find ourselves devastated by an emotional crisis, exhausted by an ongoing temperamental conflict with a fellow employee, too emotionally caught up in the recovery of someone we are sponsoring. When we are new, everything seems to be a crisis. "Life is," as a German philosopher put it, "a bed of hot coals with a cool spot here and there." The Third Step which is worked on a daily basis allows such matters to be taken out of our hands. In any

situation we do the best we can do and leave the rest to God. Our recovery is no longer our own project.

Step Four enables us at last to come to terms with our past and with what we are. Opinions differ on how soon after coming into the program the newcomer should start on the Step. Many members think that six months is a long enough waiting period. Certainly, an earnest effort at the Step should be begun in the first year. It is usually stressed that the inventory the Step requires should be done with pen and paper. Vague inventories, "Yeah, I was a little dishonest," will inevitably result in a lot of self-deceit. How long could a grocer, for instance, stay in business if he conducted his yearly inventory just by talking to himself? "I see some cans of tomatoes over there; and here's some detergent." In fact, the comparison of taking the Fourth Step to a business inventory is a fairly accurate one. It should be done dispassionately--that is, without a lot of self-blame. It should be written down. It should be done more than once. Some members do the Fourth Step at a fixed time every year.

Taking this Fourth Step can be stressful. You should have all your supports available when taking it. Stay in close touch with meetings and your sponsor.

When we get our inventory down on paper, the result is electrifying. We begin to see for the first time ourselves as we really are--there's some bad in us, and a lot more good than we had ever thought. One member compared taking the Fourth Step to pouring developer over a photographic plate and watching an image emerge. The image is us. We finally come to recognize ourselves as human beings. It is the beginning of the end of our isolation. The walls are coming down.

However, if we stop the inventory process at the Fourth Step, our task of discovering that we are human isn't complete. We haven't used what we've found to reach out to others, to build a bond with the rest of the human race. We may have a better idea of what we are, but others, including God, still haven't let us know that it's all right to be who we are. We may still feel unique, isolated, and unforgiveable. Probably, we all imagine we have committed several unpardonable sins.

It is in taking the Fifth Step that we put these fears to rest. We reveal to God, ourselves, and another human being the "exact nature of our wrongs," that is, those facts about ourselves we have uncovered in our Fourth Step inventory. We know what we have found and since, presumably, we have sought God's guidance in the inventory taking, so does He. It only remains to tell "another human being." Who? The consensus of opinion is that it needn't be another program member, although it usually is. It should, however, be someone whose maturity, judgment, and ability to keep his silence you respect.

The Fifth Step is a confessional communication, it is privileged. Be certain the person you have chosen knows what you are requiring of him. Because of our many fears about taking the Step, we often want to slide into it in a casual way during a social situation, almost as an afterthought. On the contrary, it should be a very structured event. Plan to go somewhere where you both will be alone and absolutely undisturbed, particularly by telephones, for several hours, an entire afternoon, preferably.

You shouldn't worry too much about whether what you reveal on the Fifth Step will be kept in confidence. It undoubtedly will, but that is probably not the only or even the best reason the communication is considered privileged. The taking of the Step is an **act of self-respect on both your parts**. You prove yourself to be an adult worthy of privacy--the other person shows he is mature enough to decline the temptation to gossip.

As someone once said, if ever there is a time for courage in the program, this is it. With fear and trepidation one newcomer asked his sponsor how he should begin the step. "It's easy," was the answer. "Just think of two or three things you told yourself you could never tell anyone, and tell them first." Some of us expect to be denounced, consoled, or pitied for being so sick. These things do not happen. Usually the respondent listens politely, may occasionally ask for clarification, even may share one of his own experiences--this last to let you know you aren't alone. He does this only rarely, since it has to be your show.

Those who have taken the Fifth Step may compare it with several things. One said it is like being handed water after being on the desert all your life. Another said that it is like finally breaking out of a glass prison. We recovering addicts find the Fifth Step one of the most baffling, frightening, exciting and exhilarating events of our lives. Once we take it we can never be the same again. We close the door on the old life.

More than anything else, the Fourth and Fifth Steps give us a direction in which to travel. We at least know what we are like, our strengths and weaknesses. Now the real work begins. We must start the business of improving the human assets which will strengthen our recovery, eliminate the character defects which might tempt us to re-enter our Game of use again. The Sixth and Seventh Steps provide us with a systematic way of changing. Narcotics Anonymous is not a self-improvement program as such. But we have discovered that we cannot continue to barge recklessly through life, using other people and venting our immaturity on everyone around us and still stay clean. If we do not grow, we die. We must work to rid ourselves of anger, vengefulness, being judgmental, the tendency to blame others for our problems, impatience, self-pity, all the other defects of character that are the inevitable result of a using life. We must discover gentleness, compassion, the ability to put ourselves in the other person's place, forgiveness. We must learn to extend ourselves to others.

The idea that we can be possessively jealous of a few, indifferent to the many, and the sworn enemy of anyone has to be abandoned. Every time we say “no!” to the worse part of us, it gives us a measure of self-respect. Thus, the result of self-improvement is not only that we stay clean--it is self-love.

Steps Eight and Nine help us put the past in its proper place. The past need never haunt you again. You should wait until you have accumulated some clean time before you begin these Steps. A great deal of damage, to yourself and others, may be done by a premature attempt to right the wrongs of the past. Your efforts to make restitution and apologies, for instance, to other players of your Game, usually won't be understood, and would involve your getting in touch with your Game again--a dangerous business. Unless we have a little time in the program, we won't have a clear idea of how amends should be made. However, during your first year, you can do something on these steps. Compile a mental list of those you have wronged, for example, and ask others in the program how they have come to terms with their pasts. You should avail yourself of your sponsor's advice before you start beginning either of these Steps.

The Tenth Step is a continual application of a daily basis of the principle of moral inventory of the Fourth Step. It provides us with a way of righting our daily mistakes--namely, by admitting them. We “continued to take personal inventory and when wrong, promptly admitted it.” Why admit a wrong rather than apologize for it? Our apologies are often required but they are of no value unless they are preceded by an honest admission to ourselves that we have erred. How readily apologies fell from our mouths during our using--but mentally we still continued to judge and blame others for our mistakes. The Tenth Step requires a totally different approach to the problem of righting wrongs: We begin by recognizing our own role in our behavior. The time for blaming others is past. We learn to take total responsibility for our own lives.

The Tenth Step is one of those Steps, along with Steps One, Two, Three and Eleven, that the beginner can start on immediately. No one has ever been harmed by using the Step too soon. The sooner we make ourselves accountable for our behavior, the better. If we know that a mistake will require an admission of wrong to ourselves and then an apology to someone else, we are less likely to indulge in extravagant and childish behavior.

Many program members not only work the Step throughout the day but precede their evening prayers with a brief survey of their thinking and behavior during that day, searching in particular for self-justifying and self-willed behavior, and for traces of the old Game in daily activities. We also at this time try to give ourselves credit for the

things, and there are many of them, that we have done right. We can then go to sleep with a good conscience, one of the most priceless gifts of the program.

We have already indicated that for us recovering addicts, a spiritual basis for living has to be a main goal. (See the section, "Prayer: the spiritual part.") The Third and Eleventh Steps are our primary tools for becoming spiritual people. It is a good policy to set aside a specific time in the day to meditate, to think about who we are, where we want to go, to remind ourselves of the sources of our help. The daily activities of our new lives are compelling: it is altogether too easy for us addicts, who are compulsive by nature, to get caught up in a daily routine in which we forget our primary purpose. We may find ourselves going day after day with no systematic attempt at meditation or prayer, reassuring ourselves, perhaps, that we will pray tomorrow. We should take the Eleventh Step on a daily basis; like everything else of value in life, it requires self-discipline. As we have indicated, setting aside a particular time for taking the Eleventh Step is helpful. Many program members prefer either early morning or late evening. Above all, it is necessary to be alone without distractions. Reading spiritually oriented literature may be a help. If you have no such literature, we have a suggestion. Go into any church and tell the minister or priest that you are interested in obtaining reading material which will help you to learn to pray and meditate and to grow spiritually. Some of the best nondenominational literature is available through the American Friends Service Committee. Each person in the program has favorite books on spiritual growth. Ask around.

In the Twelfth Step we learn to reach out to others. After we have experienced some spiritual growth through applying the other steps in the program, we are ready to help others. For most of us, the act of helping others is very unfamiliar. But the reason for doing it is very simple. In helping them, we help ourselves. The still suffering addict reminds us of who we once were, and gives us an insight into our addiction that we cannot obtain any other way. Doing Twelfth Step work puts us face to face with our recovery: We see how far we have come.

What is called a Twelfth Step call is a contact made with a still using or barely clean addict outside the Narcotics Anonymous meeting rooms. It may take place in the addict's home, or in a rehab, jail, or detox. The call may have been initiated through a personal referral or a call to the Narcotics Anonymous hotline.

Six months or so of clean time is adequate preparation for you to begin helping others, but remember to go on a call with a more experienced member of the program. There are other rules you should remember, too. Men Twelfth Step men; Women Twelfth Step women. You should not Twelfth Step members of your own family or

fellow Game players. Let someone else in the program do it. As much as you may want to, you cannot help such people. It is impossible for them to see you as a source of help. To them you are still a fellow player of the Game.

Doing Twelfth Step work is essential to our growth, but it requires caution. Not only our own welfare but the welfare of others is involved. You must discipline yourself to accept the experience of those who have been in the program longer than you and to defer to their judgment. At this particular point in your recovery, the most important asset you can take on a Twelfth Step call is the example of your own staying clean. Don't try to lay on the still suffering addict a wisdom you can't possibly have. We share our "experience, strength and hope." It is best to think of yourself merely as a messenger, carrying the message from one place to another. Whether the message is accepted or not is not up to you; it is up to God. Its acceptance requires the other person's readiness, which is a function of how far down on the ladder of addiction that person has gone. You can't sell anyone on recovery. As someone once said, "If they aren't ready, it doesn't make any difference what you tell them. And if they are ready, it doesn't make a lot of difference what you tell them, either." The result is out of your hands. It is the effort which helps you.

This has been a necessarily brief survey of the Steps. The newcomer who wishes to broaden and deepen his knowledge of the Steps should make Step meetings a regular part of his meeting schedule. The systematic application of the Steps to our daily lives will keep us in fit mental and spiritual condition, and as long as we are spiritually and mentally fit, we will not use.