Renouncing Methamphetamine: A Relational Perspective

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Abstract

Problematizing the classical literature in drug addiction, which determines the use of methamphetamines as an addiction/illness that has to be treated (Durrant & Jo, 2003; Rush, 1805), this article presents a relational theory, specifically making use of the concept of relational being (Gergen, 2009) to amplify the understanding of the process of renouncing methamphetamine without professional intervention.

For the purpose of this article, two cases from a Ph.D. research that explored the life stories of people who renounced methamphetamine without formal treatment are brought. The analysis resignifies the understanding of using and quitting methamphetamine as an embodied action done in collaboration with others.

This reconstruction of meaning helps in seeing the renouncing of methamphetamine as a relational trajectory in search of new modes of belonging and bonding with others. Such a perspective reveals the relationality of the process which is often being unnoticed and may help practitioners to find alternatives of understanding people who are attempting to quit drugs.

Key words drug us, methamphetamines, natural recovery, relational theory, relational trajectory, sense of belonging

Introduction: Brief Historical and Cultural Overview

A general question residing in the background of this article might be stated as: How can we take the complexities of people's lives into account in order to help us broaden our understanding of how methamphetamines are renounced? In these introductory paragraphs, before presenting our relational standpoint and articulating it with real stories, we want to explore the historical and cultural construction of using and quitting methamphetamine and its implications. We decided to focus rather on one specific substance instead of addressing drugs in general because we wanted to avoid the ambiguity of comparing several substances. Moreover, methamphetamines are number one among "hard drugs" in Czech Republic where the research was conducted (Mravčík et al., 2012).

A classical way of understanding the process of renouncing methamphetamine is the addictionas-disease concept (Reinarman, 2005) that is based on the idea that addiction is a disease that must be treated medically and has its roots in the late 18th century (Durrant & Jo, 2003; Rush, 1805). The original image of addiction involved primarily alcohol but at the end of the 19th century the same image and concept was also used for heroin, cocaine, cannabis and barbiturates (Alexander, 2008; Durrant & Jo, 2003; Szasz, 1974). The scope of addiction grew over the 20th century when not only drugs were addressed as addiction but any other activities practiced in an excessive way (gambling, eating, shopping, etc.), were diagnosed as symptoms of addiction and therefore illnesses to be treated medically (Alexander, 2008). This approach to addiction, originally applied and used only in medical settings, gradually spread over to other professional organizations as well as lay groups like Alcoholics Anonymous, and finally media and general public adopted the concept as a dominant way of understanding excessive behavior (Bailey, 2005; Peele & Brodsky, 1991).

The optimistic side of taking addiction as a disease to be treated is that people dealing with substance abuse could be taken out of the marginal world, and from being excluded from society started to be seen as people in need of care. However, many authors problematize the many side effects that the concept of addiction-as-disease brought along (Alexander, 2008; Davies, 2006; Gibson, Acquah & Robinson, 2004; Gubrium, 2008; Hammersley & Reid, 2002; Hughes, 2007; Klingemann, J. I., 2011; Radimecký, 2007; Reinarman, 2005; Schaler, 2000). To start with, it led to a massive hospitalization of people who were treated as ill and, after being released and coming back again, even as chronically ill. Life-time abstinence from most of the drugs has been stated as the only way to cope with this illness which further created a risk of self-fulfilling prophecies and supported negative self-beliefs when one used the substance again even after years (Davies, 2006; Schaler, 2000). Besides, this approach also prevents an exploration and understanding of other possibilities that might lead into un-acceptable behavior (Klingemann & Sobell, 2007). The fatal picture of a chronic illness called addiction was therefore being reproduced for three centuries closing down other possibilities of seeing the picture differently and with more complex elements.

From 70's of the 20th century, the awareness that the people in medical institutions are only the "tip of the iceberg" of those who manage to deal with their drug use started to grow (Biernacki, 1986; Cahalan, 1987; Cunningham, 2004; Price, Risk & Spitznagel, 2001; Robins, 1993; Room, 1977; Vaillant & Milofsky, 1984). From the 90's of 20th century, many studies conclude that there are various routes to quitting drug use and medical treatment is just one of them (Klingemann & Sobell, 2007; McIntosh & McKeganey, 2002; White, 1996). In her qualitative comparision of treated and un-treated alcohol drinkers, Klingemann, J. I. (2011) concludes that "(t)he disease model implies the stability of the status of the alcoholic – which potentially weakens the individual's chance to reach the stage of stable recovery" (p. 266). Also self-organisations of drug users have offered critiques of the medical model of addiction and call for other means of talking about them and their peers (Bröring & Schatz, 2008; Jürgens, 2008).

Within these new critical movements the fields of sociology and social psychology started to play a very important role in producing and amplifying the meaning of addiction and renouncing and various concepts of identity and self were brought forward as promising explanatory tools. A phenomenological understanding of identity was used by Biernacki (1986) in his attempt to explain the process that his respondents undertook after quitting heroin use without institutional support. For him, the process of natural recovery is connected to development of new or re-formed identities. The stabilization of these identities involves new social commitments and new experience that confirm identity changes and help in overcoming the fear and suspicions of non-addicts. It is a very long and demanding process to get to the state of "recovery" but – as Biernacki (1986) states – it is possible: "Ultimately, the self-identity and perspective as an addict can become so deemphasized and distant that cravings for the addictive drug become virtually nonexistent. For all practical purposes, the addict can be said to have recovered" (p. 180). Many other studies of recovery use a concept of identity or self in a similar way (Anderson & Mott, 1998; Baker, 2000; Etherington, 2006; Fiorentine & Hillhouse, 2001; Kellogg, 1993; McIntosh & McKeganey, 2002; Vaughn & Long, 1999; Weinberg, 2002).

In a more recent strand of thinking about drugs and addiction, some authors (Duff, 2007; Gibson et al., 2004; Hughes, 2007; Newbury & Hoskins, 2010; Vitellone, 2004; Weinberg, 2002) noticed that the former theories of identity and addiction neglected two important aspects of the daily life connected to drug use. Firstly, according to these authors, there is not enough attention paid to the embodied, corporeal experience of using drugs, and secondly, these theories stay at the level of individual experience and do not pay attention to the relational and material context that shapes this experience. Therefore, these

authors (Duff, 2007; Gibson, 2004; Hughes, 2007; Vitellone, 2003; Weinberg, 2002) suggest to go beyond and move towards relations where the identities are being formed. In this line, Hughes (2007) talks rather about identity practices and living practices and proposes "a level of analysis capable of engaging with both ongoing production and reproduction, change and continuity at the level of configurations of individuals rather than 'the individual'; in effect, always simultaneously conceiving individuals and the relational networks they constitute." (p. 678). Similarly, Duff (2007) is making a claim that many addiction theorists does not notice that the drug use is actively shaped by specific and unique local contexts and the transformation of these contexts have also a capacity to transform the drug use as such. All these studies move us toward more relational perspective of people who use drugs. And this is also the journey that we are taking in what follows.

Relational Standpoint for Understanding Using and Renouncing Drugs

As many writers from philosophy, sociology and psychology noticed, modern society puts a strong emphasis on individual freedom, subjective rights and inner life which led to a general individualization in Western society (Bauman, 1999; Gergen, 1991; Taylor, 1989). However, there was another line of thought in the shadow of this dominant tendency, represented by the school of pragmatism (James, 1983; Mead, 1977), later by phenomenology (Merleau-Ponty, 1962) and social constructionism (Berger & Luckmann, 1966) which challenged this primacy of the individual and pointed out that people are born into webs of relationships and only within this relational matrix an individual is constructed. This was also supported by the Russian cultural historical school of Vygotsky, Luria and Leontyev that focused on the formation of individuals in the social world, and also by Bakhtin and his ideas on importance and primacy of dialogue in the constitution of self (Burkitt, 2008). All these authors influenced the ideas that we conceptualize as a relational theory for our purpose.

One of the most influential proponents of a relational theory and practice is Kenneth Gergen. In his book Relational Being (Gergen, 2009) he clearly states that he is not focusing on inner worlds of individuals but what transpires between them through their ongoing interactions and relationships. The shift from rationality and a focus on individual minds to relationality and a focus on relationships is due to the epistemological approach of this theory in which our social world is taken as a byproduct of coordination among people. Understanding that our reality, meanings, and actions in the world are socially constructed and not universal entities, positions all the theoretical approaches available within a particular community, which Kuhn (1962) would call paradigms. Each paradigm holds a set of assumptions leading to some understanding about people and the world, consequently generating some actions. In that sense, the notion of rational individuals is only a well-rooted tradition of the Western world (a paradigm) and not an ontological phenomenon. Building on writings of prominent philosophers such as Bakhtin (1981), Rorty (1979) and Wittgenstein (1953), the relational theory and practice becomes another body of knowledge that elaborates on relational processes and collaborative action in the construction of meaning and actions. To use Gergen (2009) words, "...[i]t is not individuals who come together to form relationships; rather, it is out of collaborative action (or co-action) that the very conception of the individual mind comes into existence (or not)" (p. 181). In this approach, relationships and collaborative action create a principle background out of which such phenomena regarded as individual or inner emerges from, are being maintained, transformed and gain their meaning.

The relational theory seems to us to be a promising approach to broadening understandings in the field of drug use and especially the process of quitting. Gergen (2011) uses the term bounded being to describe the idea of self-contained individual, an independent, separated person with a singular self, a reasoning with a cognitive apparatus. Taking the concept of bounded being as only a discursive option of how to understand self and not as an ontological statement, Gergen (2011) invites us to consider another discourse that might be more useful in this field, the relational discourse. For him, action never stands

alone. It always relates to some preceding action(s) and gains its meaning only after being supplemented by following action(s). Individual self or self-identity also has its origins in this process of collaborative action (co-action).

It is noteworthy that when Gergen writes about relationships he does not mean only those with persons we had face-to-face contact with but also with fictional figures, i. e. from books, TV or from our interactions in internet space. All these figures – both real and unreal – stay with us and even if we do not currently see them or meet them, we can regard them as invisible guests (Watkins, 2000) or social ghosts (Gergen, M., 2001). These concepts suggest that the imagined voices not only remind us of past or potential future reality but they are "(...) a reality as intrinsic to human existence as the literally social" (Watkins, 2000, p. 177) which means that they are also creative of our worlds and our relationships. As Gergen (2011) states, "(...] at any given moment, these potentials come into life (or not) depending on those with whom we are in relationship. Through the relational process such potentials may blossom, as it were, or become withered." (p. 281). In this way, he draws rather positive and generative theory and opens new horizons for inquiry.

In the area of drug use, Newbury and Hoskins (2010) conducted a relational inquiry of people who use methamphetamines. Their objective was to search for understanding of the experience of adolescent girls who use crystal methamphetamine. As they were inspired by a relational methodology, they used a multiplicity of methods including eliciting photographs and one-to-one dialogues through which they managed to touch upon very complex issues. They emphasize especially their own conduct and interaction with participants, i.e. the engagement with participants on human level, mutual learning or understanding events in relation to one another. Regarding the conclusions, rather than talking about findings, they talk about creating new knowledge with the adolescent girls. In agreement with the relational standpoint, they regard knowledge as a process of co-creation that is never finished. New knowledge involved many aspects of the lives of participants that rarely were directly connected to crystal meth use but more often to their relationships with others and their surroundings. As a general observation of the process of relational inquiry, they write that it is more than ", (...) developing a relationship with the participant, although of course this is an important aspect of research process. It means attending to the multiple relational dimensions of her experience and how they constitute and are constituted by each other. (Newbury & Hoskins, 2010 p 646).

Following Weinberg (2002) and in tune with the relational ideas of Gergen (2009) and the work that was recently done by Newbury and Hoskins (2010), we articulate in this paper a conceptualization of drug use

By exploring stories of people who quit the drug use without medical intervention we focus on the relational aspects that supported the decision making and helped with the construction of new (methamphetamine free) stories as an embodied action with others. With this theoretical background we approach the issue of renouncing longterm methamphetamine use, having a relational lens to understand it. By exploring stories of people who quit the drug use without medical intervention we focus on the relational aspects that supported the decision making and helped with the construction of new (methamphetamine free) stories, those of which the methamphetamine is not part.

The Research Design and an Illustration

The ideas discussed in this paper are part of a Ph.D. research developed by one of the authors, namely Pavel. The second author, Celiane, was invited after the data gathering phase, to help with the analysis and interpretation of the findings. The main goal of the study was to explain, from a relational perspective, the transformative process that occurs when a person has quit methamphetamine use and did

not use any institutional support such as treatment or counselling. The study had a qualitative design using social constructionism as the theoretical framework of the research. For data collection, 20 participants were recruited to participate by using informal social networks and by advertising (websites, newspapers, notice boards in local stores). As a previous requirement, the participant should have an experience with regular methamphetamine use (= at least twice a week) in a period of one year as a minimum and the time passed from application of the last dose of the drug had to exceed 5 years. In this period, also no institutional support aiming at recovery from drug use was sought.

As an interview style, a narrative interview (Jovchelovitch & Bauer, 2000) was chosen to help the participants express their experience in the way that was most relevant for them at that point of time, by their own language and to emphasize the events, themes and figures that they themselves regard as significant in terms of their quitting process of methamphetamine use. At the same time, the interview approach counted on the dialogical nature of the meaning-making process in which the interviewer is also involved and remains inevitably unfinished (Čermák, 2002; Holstein & Gubrium, 1995). The narrative interviews were prompted by drawing a "lifeline" by the participant according to the instructions of Blatný et al. (2004) followed by talking about moments that the participant regarded as important. The other part of the interview was specifically focused on the period of time after quitting meth and we proceeded without any structure following concepts of shared inquiry (Anderson, 1997) and active interview (Holstein & Gubrium, 1995). The interviews were recorded and transcribed and the participants were offered a small financial reward. The analysis rested on two levels, first of which was identifying moments that the interviewees themselves regarded as important and the second was focused of moments that the researcher found surprising for himself – with regard to both his professional and personal life.

In what follows, we offer two illustrations to demonstrate our relational approach in this theme, the cases of Alice and Libor (both fictional names). Both of them used methemphetamines more than two years and at the time of the interview they have no longer used it, at least for five years. None of them used any professional intervention to help them overcome their methamphetamine use. The reason we chose only two cases is the apparent limited range of this text and the need to explore our point in depth. Since this article is not aimed at presenting the Ph.D. research as such but at showing the usefulness of relational standpoint for understanding the process of renouncing methamphetamines, introducing two different cases, each of which demonstrates one part of the process, seemed the most appropriate method towards this purpose.

Relational Trajectory... (Alice)

Alice, 26 years old, starts to tell her story of quitting drugs in quite an unusual way. Instead of centering the quitting event at the core of her story she starts with riding horses at the age of 15, then moving away from her family and getting her first and second jobs. The drug-use story appears between riding horses and the first job. The story goes on about her life in general until the interviewer explicitly steers the conversation towards her methamphetamine use and specially about the time when she stopped. The question follows:

Interviewer: Then, was there a moment when you decided to quit?

Alice: Yes, it was pissing me off for a long time (oh, pardon O). I was annoyed with the people around me. I was never someone who would steal... I stole gold chain lets from my parents and such. I am not proud of it but it happened. However I would never rob other people, no way. But I was hanging out with bunch of punks. Then things really started to bother me, the way I looked, not being able to leave your cell phone laying around without having your friends stealing it, things like that. I didn't necessarily wanted to quit but I realized that I did not want to be around those kind of people. I can't recall a specific moment when I decided: ok, now I quit. Probably it was slowly disappearing, until I just...

Interviewer: So you actually wanted to disconnect from those people rather than stop using methamphetamine?

Alice: For me, it had a lot to do with the people around me, rather than me destroying my health or mind with some drug. It is really connected with those people because you party with your friends – not alone, right? This is not a drug that you would take alone and then go somewhere. "That's the way I felt."

...not only that Alice did not distinguish a certain moment that would qualify as THE breaking point for quitting the methamphetamine (which was the invitation in the first question), she also challenges the whole idea of a rational decision to stop taking drugs. As demonstrated in this part of interview...not only that Alice did not distinguish a certain moment that would qualify as THE breaking point for quitting the methamphetamine (which was the invitation in the first question), she also challenges the whole idea of a rational decision to stop taking drugs. She is saying that it was not the drug that she wanted to get away from. In the first place, she wanted to get rid of the people around her because they bothered her. Renouncing the drug was only a natural byproduct since it was connected so much with this particular group of people.

Taking the Gergen (2009) concept of multi-being, we may view these situations as a combination of moments in which Alice starts thinking of moving away from the group she was part of. To borrow Gergen's words, all these relationships may have start to have an influence on a person, "(...) when voices from elsewhere are imported into the immediate relationship /and/ this shared world stands subject to reflection and rejection. One sees that things could be otherwise, this isn't as good as we thought, it could be better, it is offensive (Gergen, 2009, p. 160)".

Except for the most important group at a certain time (in this case "bunch of punks") there are other people present: for example, Alice was raised by her parents, with whom she lived until 18, and even if she was not at home frequently, she still had contact with them as well as with her sister. We can think of these stories and persons that Alice is still considering and bringing in her conversations and reflections as the invisible guests (Watkins, 2000) or social ghosts (Gergen, M., 2004) participating in her inner dialogue. They serve not only as dialogic partners for her meaning making but also as role models and may place Alice in a certain position or identity.

In the following quote Alice talks about the relationship with her parents after they found out that she was using heroin in her 15 years:

"I didn't have the guts to do that, to run away from home. As I started with heroin and my mum found out, she was always there for me, she drove me to school and picked me up after school, everything. Then, when my father was supposed to be picking me up from school, he wasn't so responsible. Maybe he underestimated the situation. But anyway, it wasn't so bad. He said: 'we will meet at the station.' And I didn't have the heart or it didn't even cross my mind not being there. I couldn't break the trust we had."

These voices, for example the voice of her relationship to her father characterized by the words, I didn't have the heart not to be there", may have played an important role in the process of changing the relational background of Alice. Even if the original "authors" of these voices didn't visibly and concretely assisted Alice in her renouncing methamphetamine at the age of 19, the coming out of the relationships with her social ghosts or invisible guests might have been important factors of the discomfort she felt

when going out with her friends. Even if apparently oriented toward the, bunch of punks", there might have been a mixture of voices –that talked to her in her inner dialogue.

Not only voices from the past but also present and future, not yet existing relationships, were present in this mixture. They were not very concrete since Alice stated that making specific plans or dreaming about the future was not something she would do. As she said, all she wanted was to get rid of those people that were around her. However, subsequently she tells about a new intimate relationship that she started just after and also a job she got; those were also the moments when her everyday face to face interactions changed a lot. This is how she describes her general attitude towards future relationships:

"(...) I just wanted to be able to relax, when you sit with someone, drink with someone, like friends, buddies you know, in a way you don't have to keep an eye on the other or so..., and in the groups of junkies there is no such trust and if there is, then it is just like temporary. These are just not situations, or a way people should live their lives according to me."

In this quote, we can see that there was an importance of trustful relationships which she already mentioned when describing relationship with her parents. Learning this, we may start to view her relational trajectory (Gergen, 2009) as a pathway towards more "trustful" relationships. And we could understand from her relationship with her parents that she already had an experience of such relationships from the past – before entering the group of people who were using meth. This relational experience somehow returned as the promise of a better life she wanted to have.

In Shotter's (2010, 2012) sense, leaving a certain realm of relationships is not at all mechanical, rational activity but it is much more complex, complicated and unique. This is not a shift that the person does alone – it is inevitably dialogical, joint activity that necessarily involves other people who the person comes into relation with and who help her co-create the sense of what is being done and who the person is becoming. Even if now, nine years after Alice has stopped using methamphetamine, we can see the whole new set of relationships she is currently involved in, it was not a sudden event that she just changed the relationships as a dress. The whole process had to be consisted of small, living, dialogical events,

"(...) certain ways of being-with, or of relating-to, them - where the switch from one way of being-with to another is a switch of possibilities in relation both to the others around us, and to the rest of our surroundings. Hence the complexity of the fluid, complex, continuously changing landscape of everyday life... that, in fact, is perhaps best thought of as a seascape requiring navigational skills!" (Shotter, 2012, p. 60)

In summary, the whole transformation process happening with Alice started when tensions within her complex relational matrix emerged (her past, present and potential future relationships). In searching for more trustful relationships, she started to move from the actual groups of people within which the feelings of discomfort were strongly experienced and she slowly created new bonds with a hope that these feelings would not appear. In these new groups, the methamphetamine use was no longer sustainable.

...Towards a New Sense of Belonging (Libor).

In the second illustration, Libor's case, we want to focus the attention to the ways in which particular communities might invite and engage into enchantment (Gergen, 2009) and a sense of belonging, allowing one to build new meanings again. Libor stopped using methamphetamines suddenly and, unlike Alice, he stated that there was a rational decision at the beginning – one day he was on his way to the local meth lab and he quickly learnt that there had been a police raid a few hours ago. He was lucky because he was planning to be there earlier but at the same time he was scared to death because he knew that he could be arrested later. And as he described in his interview, he knew that he never wanted to go

to prison. For two or three days he hid in different places, he was even afraid to go to the toilet. At this time, his decision not to use meth again started to flourish supported by the fact that a person who was his source of the drug was arrested. However, he started to go regularly to a local pub and drink alcohol quite heavily after this event and it lasted almost half a year. He openly talks about alcohol as a substitute for methamphetamine and even if he no longer used methamphetamine, he does not regard the renouncing of the drug as something very significant:

"Interviewer: You said that it was the period [of heavy drinking] from May till fall. Did something change in the fall?

Libor: As I was drinking all the time, I was in fact mentally even worse. Because of the booze and the non-existence of anything else and any other activity. I also started to be aggressive towards people which I should not have – my mum, my brother, simply everybody around me. So we sort of talked about it. At that time, I started to meet people that I'm still seeing. And it was clear that something was going wrong, that there was a mistake somewhere. And that the mistake was within me – but the problem is not meth but it is alcohol. And then I stopped going to those pubs."

We can observe here two types of difficulties. Firstly, there is the difficulty of the substance and the physical space: instead of using methamphetamine in the flats, Libor started to go to a pub where he drank alcohol heavily. But secondly, there was another kind of difficulty: that one which Libor is connecting with talking to his mother, brother and people that he had started to meet that time. In a similar sense, Shotter (1993 - 2008) distinguishes between first-order, intellectual difficulties and second-order difficulties of orientation or of relationship.

People that Libor started to meet were an informal network of musicians, writers and activists who organized concerts, events to support the human and animal laws or published zines. Within these relationships he started to learn something very new for him. In the following quote he describes it in more detail:

"I found out about a concert that I thought might be interesting. So I went there and met a lot of people from my hometown – people I'm still seeing and collaborating with on different things today. There, at that concert, I saw very different things than before. And I felt it is amazing – those people were doing all those things by themselves, they were trying to create something meaningful – and not necessarily for someone else, but for themselves. They were making their own culture. And this was an absolutely crucial breaking moment, when I sort of realized that life is not about, either on booze or on meth, getting wasted..., but that you should enjoy yourself in a way, but in a way that it doesn't hurt you. That you don't hurt others and maybe there are things in the world I could do, that interest me apart from that. Just open your eyes a little and look around yourself. That was a fundamental thing for the further progress..."

In a sense, Libor gained access to an existing network of people where he could have found not only new friends but also opinions, values, meanings, emotions, activities – or in his words, "culture" – that spoke to him in this particular period in his life. We can think about it also that Libor gained a new notion of the good which, according to Gergen (2009), can become an "intelligible and desirable form of life" (p. 217) only in significant relationships. This community was a natural, non-institutionalized, continuous relational network with many features that were welcomed by Libor in his particular life situation.

Interviewer: Were there other important moments in your life when you started to meet those people at concerts, you would say were significant in your life then?

Libor: It was all significant. Most importantly I had something that gave me meaning, I had something that I didn't have do to but I did it because I felt that I wanted to do it. And that was very important. My mental problems did not disappear, I had a lot of mental problems but now it was not so hard to cope with them, because in that group, the culture was based on that everyone, in a way, had mental problems and everyone had their own problems and depressions And in the music they could express all those feelings. Those people were writing poetry and you were not alone. For example you read a magazine that was published by a guy with a similar mental problems as you and you could read about how he used to live... now it is not like that but in the beginning when I got into that I could really relate to a lot of things in those magazines.

This process of mutual support and possibility for sharing with "peers" is unquestionably important factor in many institutions and groups meant for helping people overcome problems, however, here it is not a "purpose" of existence of such community, rather its natural component. The fact that it was not an institution enabled also natural non-judgmental and non-hierarchical ways of relating. With Shotter (1993), we can conclude that this community helped Libor to gain a sense of belonging, being at home including participating in the living tradition of the culture.

In this vein, Gergen (2009) describes a process of "bonding "by which he means creating bonds, commitments in relationships that endure after the initial coordination of action. Through the words and activities he participated in the co-creation of shared realities, and the comfort, reliability, and trust that accompany them" (Gergen, 2009, p. 175). Gergen mentions an enchantment, meaning "(...) injecting into its existence a sense of transcendent importance" (Gergen, 2009, p. 179) as an important step in the process of bonding. The enchantment was clearly noted when Libor started talking about this culture or community. A visible change in his speech, gestures and facial expressions would happen. He also continued to talk about these people even after we finished the interview. This all made us think about bonded relationships within the community which helped Libor gain the sense of belonging that he lost after getting out of the groups in which meth had been used.

Discussion

We introduced the relational perspective to create meaningful understandings with people that go through the process of renouncing methamphetamines. In the following paragraphs we try to suggest why and in which regard this perspective might be a useful way of considering the complexities of people's live that helps to broaden up the possibilities for renouncing drugs. To be clear, we are not trying to replace one framework for another and make it universal, but it is more like an invitation to open for new possibilities, to look for broad understandings and meanings with the people that are the carriers of the particular experience.

It would be difficult to apply the addiction-as-disease concept to any of the above examples. Neither Alice nor Libor were in contact with any professional that might attempt to diagnose and treat them while they were using methamphetamines. Neither did they use the concept themselves – they did not even use the word "addiction". The objection might be that they may not have been addicted – but this is a tautology that i.e. Klingemann & Sobell. (2007) is clearly describing. In the line of this argument, addiction is a chronic illness that must be treated; if you stop using drugs without treatment, it means that you were not addicted; in other words, there is no world of addiction outside the world of medicine who was originally the creator of the concept. From the relational point of view, this concept of addiction–as-illness is constructed within the historical development lines of medicine, politics and culture and, more importantly, in the immediate interactions of "addiction professionals", lay individuals and public.

If not taken so strictly, we may consider the notion of spontaneous remission (Smart, 1975) which might be used to explain these experience. This line of argument is: As other chronic illnesses, addiction may

also just disappear without a clear reason why. From this point of view, we would view the experience of Alice and Libor as exceptions from the rule. However, our concern is that this concept denies the activity of the persons themselves; the activity that is not focusing on destroying addiction or quitting specific drugs but which is more a spontaneous responsive bodily orientation in an actual relational matrix (Shotter, 2010). If we leave the notion of cause and effects behind and start to participate in a world with others, we can no longer see persons who stop doing something just because an illness disappeared. We see living beings that responsively orient themselves toward one another, including us.

Identity seems to be a more promising concept to use for these experiences. Alice provided us with an interesting view on renouncing methamphetamines and her case definitely had much to do with identity but she would not clearly fit into any of the routes "of identity transformation sketched by Biernacki (1986). Since she did not decide" to stop using drugs, she did not constructed any new identity or an identity that existed before or while using drugs. Renouncing drug use was more like a byproduct of a more pervasive transformation that had a lot to do with ethical dilemmas, tensions around particular actions she was around. Her task was not to get out of drugs but to get away from the people around her. Approaching her words with a concept of relational being (Gergen, 2009) enables us to understand more soundly the relational, dialogical and embodied matrix and background that was significant for this transformation instead of solely focusing on identities which we derive and deduce from ways of talking. In other words, we do not want to construct identities and their features that we might intellectually defend based on our readings of the texts. We want to point out the background of these first-order changes and problematize and challenge the image of individuals with an identity.

In Libor's case, identity might be a very attractive concept to use. With reference to Biernacki (1986), we might see how the new identity is developed, what are its features and commonalities with others. Although this is a tempting way of thinking, we were trying to go beyond it and to get even closer to the experience itself. When thinking about identities, we can easily find ourselves thinking outside the conversation with the other and making assumptions, conclusions and conceptualization on the basis of comparison with others. In the relational perspective, we may not want to go this way. The unique composition of each person's relational matrix and the unique situation of the meeting with the other person create a situation that is incomparable with others. All we can do is to find ways to understand more, to make sense of these meetings and explore possibilities for moving on.

Conclusion

In the present article, embracing the relational approach, drug use was described as an embodied action with others (e.g. partners, family members, friends, pets, new activities, and new spaces...) or embodied collaborative action (co-action). That means the action of using drugs is taken as never isolated from its context, belonging just to an illness in a body, but it is a complex matrix of relational encounters and disencounters.

The action of quitting methamphetamine might start as a rational individual decision but it is also a byproduct of changes in the whole social surroundings. Nevertheless, the whole process as experienced by the participants started with new engagement, new forms of life, in which collaborative action played a

We perceive this process not as an ordinary change ...but as a surprising change that is mediated by dialogical encounters and joint action, offering enchantment and a new sense of belonging. very important role, involving relational change and co-creation of new interactive landscapes. That suggests the relational trajectory as a discontinuous and complex process that can be mediated by certain moments, meetings or encounters that activate new actions and relationships. In the case of Alice, we have seen how useful it was to consider the idea of multibeing (Gergen, 2009). The discrepancies between the

voices of people she was around at that time and the voices of her past and potential future relationships all together made her reflect on her current situation, especially in specific interactive moments. As she started to have access to new relationships and the voices from the past were supplemented by them, she was losing contact with her drug-using friends and, as a consequence, with the drug itself. Then, in the case of Libor, we could observe the process of becoming part of a new community with a whole new set of values, customs and emotions. We perceive this process not as an ordinary change when i.e. one substance substitutes another ...but as a surprising change that is mediated by dialogical encounters and joint action, offering enchantment and a new sense of belonging. Those relational aspects are often forgotten and not highlighted in a rational and individualist paradigm and this paper actively brought to the surface.

In summary, within the perspective presented, we can view renouncing methamphetamine and drugs in general as a relational trajectory towards a new sense of belonging. The relational trajectory suggests that the process is not a lonely one even if it may be assisted by a reduction of people around the person. It is a collaborative action where the collaborators may be not only people in face to face meetings but also invisible guests (Watkins, 2000) or social ghosts (Gergen, M., 2004) developing inner dialogues and also imagined relationships and communities. Shotter (2012), paraphrasing Wittgenstein, says that these relational ways of practice are not aimed to find a final answer to problems but they should help us seeing how to go on together. This approach invites us to be more curious about living worlds of people that we talk to – in practice, research or daily life. As a consequence, when approaching from a more open and curious perspective, then we – instead of extracting facts and behavior – co-create new understandings.

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Endnote

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