

# The Desistance Journey

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Into Recovery and Out of Chaos



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# PREFACE

We chose to publish this academic study as a short book because we want it to be accessible to both academics and those working with, or affected by, offending and addiction. We hope the book offers practitioners some insight into their clients' experiences and, perhaps, as a result, new ways of supporting them might emerge. More optimistically, we hope that it will assist policymakers as they design and develop more compassionate, kind and sustainable policies to support individuals like the men in this study.

We also hope the book will help those struggling with active addiction, or even those whose loved ones are struggling, to gain some insight into where their addiction may have originated and learn what's worked for people who have travelled this road, who have hit rock bottom (more than once) and who have come out the other end to find peace of mind.

# EARLY LIFE: TRAUMA AND MASCULINITY

- The men interviewed as part of this study all suffered trauma as children. These traumas were often (con)founded in and by economic deprivation and social exclusion;
- Many participants dropped out of school because they experienced bullying by their peers and neglect by those in authority. This bullying and neglect was often exacerbated by the poverty and abuse they experienced at home;

- As the men had few pro-social role models growing up they looked up to local *hard-men* who taught them how to behave and survive in their community;
- The men coveted a hegemonic masculinity, known locally as being a *hard-man*. The men spent much of their early life trying to cultivate, and then maintain, hard-men reputations. This involved being violent, always being ready to aggress or retaliate against perceived insults and being involved in a range of risk-taking behaviours, including heavy drinking and drug use;
- This localised hard-man subculture was an outcome of economic deprivation and social exclusion, coupled with the absence of pro-social role models and often a lack of legitimate meaningful employment;
- Such hard-man images prohibited behaviour seen as weak, and this served as a barrier to success in school and the development of healthy coping mechanisms, such as talking. With no healthy outlets, drink and drug use became the primary means of suppressing/masking feelings.

# Drug and Alcohol Use

- Drug and alcohol served a number of purposes. Initially, drugs/alcohols were used to fit in and, as a marker of masculine identity and status, and later to self-soothe. All participants in this study eventually entered active addiction;
- As adults, active addiction led to further trauma. Many participants reported experiencing assault, hospitalisation and abandonment as adults. Many reported their mental and physical health deteriorated significantly while in active addiction. Most thought about or attempted suicide, many overdosed: one participant in this study sadly died during the term of the research process.

# RECOVERY AND DESISTANCE

- Recovery from addiction came before desistance from crime;
- Desistance from crime was seen as a *side effect* of overcoming addiction;
- Recovery was often a slow process, and all of the men experienced a *rocky road*, with several *rock bottoms* being reached on the journey;

- Rock bottom often involved a physical process (injury, illness etc.) but more importantly a loss of identity and sense of self. The men described losing their ability to maintain hard-fought masculine identities as they became too weak to engage in violence and were unable to stay in control of their emotions, their bodies and their relationships;
- For some of the men in this study, prison served a positive purpose. Incarceration helped cultivate the hard-man image when they were young. When older, prison gave the men respite from the chaos of their lives and provided access to services which were often the first step on their recovery journey;
- Recovery can be achieved without having to spend time in prison and access to services should not be dependent on spending time in prison. Appropriate services must be more readily available early and often in the community.
- The men all found much-needed support in 12-Step type programmes. These self-help groups provided not only a space to talk about emotions, often for the first time, but also pro-social role models, who demonstrated alternative forms of more positive masculinity;
- The men often needed to distance themselves from existing friends and family, whilst in recovery, however, total isolation in an effort to overcome addiction was seldom helpful;
- Whilst in recovery, the men needed to avoid what they called gateway behaviours, commonly identified as dishonesty (e.g. selling drugs), *womanising* (e.g. dishonesty in relationships), violence and gambling. The men described how engaging in such behaviours was a slippery slope away from a tentative recovery.
- Full recovery involved moving away from an identity based on hegemonic masculinity and the associated behaviours. Success meant leaving the hard-man identity behind and creating a new sense of self.
- Achieving recovery and desistance took time. Finding job and engaging in education were often aims that were not realistic in the early stages of recovery. These came later once the men had a chance to work on themselves.
- All the men in this study spoke about living a good and decent life and giving back to society. Ultimately, all of the men spoke about their experience as a journey out of chaos and their outcome was finding peace of mind (Fig. 1).

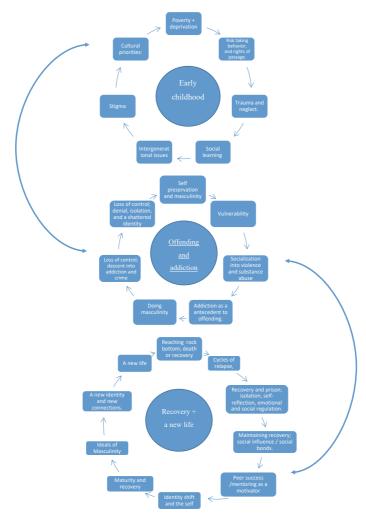


Fig. 1 The three-stage integrated cycles of recovery model

Cork, Ireland

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### CHAPTER 1

# Introduction

Abstract Over the past twenty years there has been an increase in research examining desistance, the process of passive and active desistance and interventions to support desistance. However, despite the well-established relationship between addiction and crime, there is a gap in the literature when it comes to a holistic understanding of the process of moving away from crime and addiction as interrelated processes. More recently there have been a number of studies that examine these processes from a cognitive and social perspective, but there is some distance to go conceptually and practically. This chapter lays the groundwork for a study that examines the processes of desistance and recovery from addiction amongst a sample of men who have spent time in Irish prisons. The chapter explores key concepts of relevance to the study, including addiction recovery and desistance and outlines the processes of data collection and analysis.

Keywords Addiction · Recovery · Desistance · Insider

Over the past twenty years there has been an increase in research examining desistance amongst specific populations, such as sex offenders (e.g. Cresswell, 2021) and perpetrators of political violence (e.g. Lynch, 2015). Despite the well-established relationship between addiction and crime,

however, there is a gap in the literature when it comes to a holistic understanding of the population from whom the process of moving away from crime *and* recovery from addiction are interrelated processes (see Robinson & Hamilton, 2016; Roeyen et al., 2017). While many studies point to how recovery from addiction and desistance from drugs are overlapping processes, research into the area is relatively new (see Best & Colman, 2020).

This book began life as an examination into desistance from offending amongst men in County Cork—the largest county in the Republic of Ireland. With a population of over 500,000 people, the county is served by one male-only prison and, of the almost 300 men incarcerated in Cork prison, an estimated 70 per cent, are believed to have addiction issues (Pollak, 2017); anecdotal accounts put this number closer to 90 per cent. Given the profile of those incarcerated in Cork prison, and the fact that all of the men who agreed to participate in this study had addiction issues, the focus of the project quickly shifted to an investigation of the *bigger picture* of desistance: namely how offending and recovery from addiction were inseparable processes.

This book is based on in-depth interviews with 40 men from Cork who had engaged with the criminal justice system, most had served time in prison. The book traces the participants' life histories: from the hardships they endured as children, through the chaotic teenage years leading into active addiction, further hardship in adulthood, and the often numerous attempts at recovery and eventually, for most, full recovery. The interviews were conducted by the first author (Graham Cambridge), who was born and raised in the Northside of Cork City, an area of the city which has suffered the highest concentration of economic deprivation, crime and problematic drug use.

Graham undertook these interviews as an insider. As a child he experienced the economic deprivation felt by so many of the participants, he knew the streets the men spoke about and as a young adult, he understood the dynamics of the community. Graham brought this personal experience to bear on the research process and was able to communicate in a meaningful way with potential participants. His insider status was central to the data collection and analytical process and gave participants the sense that Graham understood where the men were coming from and, the interviewer and interviewee knew that they shared common connections from a time gone by. This may have been one reason why the participants opened up, and why so many shared traumatic life

experiences during the interviews and trusted Graham with personal information. Being interviewed by a *local*, who had left school at 13 but was now studying for a Ph.D., and being interviewed inside the imposing nineteenth-century barricades of University College Cork helped participants widen their understanding of what was possible for 'people like us'. It showed to the men that further education was not just for the elite, but, that people from the Northside of Cork city could not only go to university but reach the peak of educational attainment. That is, the research upon which this book is based was designed to produce more than a book: it was designed to support those living with addiction and their communities by giving them hope for their future.

Graham is currently employed as an outreach worker supporting people in Cork city with addiction issues. As such, this book is intended to provide readers with a practice-friendly account of the academic work on desistance and a multidisciplinary holistic account of the process of doing desistance and recovery. While this book is academic in design, the voices of the participants are prioritised both to tell their stories in their own words but also to ground the recommendations discovered by the authors in real-world experiences. We hope that the book will help some people who are struggling with their addiction to understand how they got to where they are, understand how are currently feeling, understand that they are not alone and, most importantly, know that peace of mind is achievable. All but one of the 40 men in this study did eventually achieve the peace of mind they sought.

# Addiction

The words used to describe particular drug-using behaviours are socially constructed, they are of a particular time and place and are sometimes unique to particular regions of the world; the terminology used is in a constant state of flux. Words that are deemed acceptable today are rejected tomorrow. A number of academics and practitioners are critical of historically used terms, particularly deficits-based terms where the focus is on the individual e.g. addict. These terms are seen by some as stigmatising and dehumanising terms which strip the person of all other aspects of their identity. The men in this study are all more than their addiction, they were also sons and fathers, friends, builders and so much more. As such, many organisations and academics prefer first-person language which reminds

us to focus on the whole person, for example, *person with a substance use disorder* (see Changing the Narrative, no date).

This said, the participants in this study referred to themselves as addicts and to avoid the words participants used to describe themselves would be dismissive of their experiences (see Leonard & Windle, 2020; Lynch et al., 2021). We acknowledge that the individuals themselves may be reflecting the negative language used about them when they use deficits-based language, but after consultation with the participants, we have chosen to mirror the language universally used by the men who participated in this study. We choose to respect their words and their choices.

The debate about terminology used for what has been routinely referred to as addiction is ongoing. The World Health Organisation (2018: no page) defines 'dependence syndrome' as:

a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal.

Kleiman and colleagues (2011: 5) summarise this as a:

... bad, unwanted, and hard-to-break habit, leading to a pattern in which someone repeatedly takes a drug more often, or in greater amounts, than she or he intends to.

Few people who use drugs go on to develop substance abuse disorders and even fewer become addicted, which Kleiman and colleagues (2011: 6) define as a 'chronic, relapsing disorder' in which the individual 'suffers ... an enormous amount of damage'. This definition certainly fits the description of addiction provided by the men in this study.

Many other organisations now also focus on the *harm* (rather than the use itself), so use the term *problematic drug use* rather than addiction. This is defined by the European Monitoring Centre for Drugs and Drug Addiction (2020: no page) as:

Recurrent drug use that is causing actual harms (negative consequences) to the person (including dependence, but also other health, psychological

or social problems), or is placing the person at a high probability/risk of suffering such harms.

Throughout this book we will refer to individuals who use drugs and alcohol problematically in this way, but where our participants have used the term addiction, we will reflect this in the relevant sections.

# RECOVERY

Recovery is used in the colloquial sense to refer to a journey towards wellbeing, usually with the aid of some form of intervention. This does not cover the full meaning of what is entailed in recovery from problematic drug use or addiction. The Betty Ford Institute Consensus Panel (2007: 222) defined recovery as 'a voluntarily maintained lifestyle characterised by sobriety, personal health and citizenship'. This definition reflects the all-encompassing lifelong and sustained nature of recovery. Nonetheless, very few people problematically using drugs, or even those addicted to drugs, enter treatment: most stop naturally and some simply curtail their use without sobriety. Those entering treatment tend to be the minority where the harm to all aspects of their lives is comprehensive and uncontrollable. This book is about, and for, that relatively small number of people.

The Betty Ford Institute Consensus Panel (2007: 223) further differentiated the stages of recovery into "early sobriety" (the first year), "sustained sobriety" (between 1 and 5 years), and 'stable sobriety' (of more than 5 years). This alludes to a finding of this research: that the longer people are in recovery the more stable they are in their recovery. Addiction is progressive, the longer people are in active addiction the greater the mental, physical and emotional harm that occurs. Recovery is also progressive and the more time that individuals are in recovery, the longer they have to recover from the mental, physical and emotional harm experienced before they started their recovery.

### DESISTENCE

Desisting from crime is the process whereby someone with a history of criminal behaviour stops offending or reduces the severity or incidence of their offending behaviours; in other words they either stop

offending or they engage in less serious crime less often. Like recovery, desistance is not a smooth path, and there are often periods of non-offending, followed by periods of offending and this pattern may continue for some time (Maruna, 2001; McNeill et al., 2012; Weaver & McNeill, 2007). The majority of desistance research has centred upon developmental and life-course criminology where the focus is most often on the developing adolescent, or the period of early adulthood; there is less focus on older adulthood (Sampson & Laub, 1993). Regardless of the developmental period studied, it is broadly recognised that desistance is a dynamic process of change where the ultimate outcome is that an individual stops committing crime.

At a very basic level for both men and women, there are three theoretical phases of desistance. The first, primary desistance, is the process of *stopping offending*, the physical act itself, often involving periods of non-offending. The second, secondary desistance, refers to the process of personal change where an individual commits to being a non-offender, in other words *not offending* becomes an important part of their identity (Maruna & Farrall, 2004). The third, tertiary desistance, refers to the recognition (or lack of) that a person has changed, and can be re/accepted into a group or community. The concept of tertiary desistance identifies that individual desistance requires community support (McNeill, 2016).

## CHAPTER OUTLINES

This book largely follows the normal style of an academic book. Chapter 2 briefly assess the existing academic literature on desistance from crime, and the dual processes of desistance and rehabilitation from addiction. This chapter sets some theoretical foundations.

Chapter 3 provides the socio-economic context of the research site (Cork City). The chapter illuminates the transgenerational concentration of economic deprivation and social exclusion within a small number of areas. It discusses how a gradual process of deindustrialisation from the 1980s increased relative and absolute deprivation, and how inequalities increased during both economic boom (the Celtic Tiger) and bust (the Great Recession). The chapter concludes by reviewing the Irish criminological literature to suggest that the Irish prison population is overrepresented by people coming from socially excluded and economically deprived areas.

Chapter 4 briefly introduces the methods used in this study. In summary, the first author conducted in-depth life history interviews with 40 men from Cork City who were involved with the criminal justice system. As the first author is an insider—he grew up in Cork's Northside and is now an outreach worker—the chapter concludes by discussing the importance and limitations of insider-research.

Chapter 5 explores the early years of the men's life histories, as presented by the participants. This chapter provides insight into how participants reconstruct their experience of early childhood and, how they experience and attribute motive to their early behaviours in light of their later engagement in crime and substance use. The men rationalise their adult behaviours by linking them to childhood experiences, notably: the shame and stigma they experienced in relation to their household poverty, the neglect they experienced as children and, violence and substance use they experienced or witnessed in the home. A central theme to emerge is that the shame and stigma of poverty spurred them to withdraw from school and mainstream community engagement, prompting a cascade of negative life events.

Chapter 6 addresses the broad area of lifestyle, offending and addiction. It begins by exploring the mens' teenage years, focusing specifically on thrill-seeking behaviour, but also how the lack of local pro-social role models resulted in the men looking up to local 'hard-men'. The men speak about what life was like growing up in their community and how it was dominated by violence, crime and addiction. They identified how their behaviours were responses to their environment and served strategic purposes. The men discussed cultivating hard-man identities as survival mechanisms to avoid being victimised and how they used alcohol and/or drugs to soothe the pain of the childhood traumas discussed in chapter three. The men also discuss how their behaviours were learnt through interacting with peer groups and family members, and imitation of local 'hard-men'. The men were eager to look at their behaviours and link them to their traumas of early childhood. This chapter documents how drink/drug use initially served a purpose—it helped the men to deal with the trauma, hurt, boredom and helplessness in their lives—but quickly became problematic as addiction overtook choice. The chapter concludes by discussing how the mens' lifestyle harmed their physical and mental health and often culminated in suicide attempts, overdoses and incarceration.