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Addiction Recovery and the Power of Storytelling: An Interview with Joan King

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Introduction

In earlier papers, I described the “recovery revolution in Philadelphia”—the recovery-focused transformation of Philadelphia’s behavioral health care system under the leadership of Dr. Arthur Evans, Jr. That transformation process involved hundreds of key people whose leadership touched thousands of individuals and families. One of the earliest tasks of this transformation process was the mobilization of people in personal and family recovery. In 2011, some 15,000 people marched in Philadelphia’s recovery celebration event. One of the hidden heroes in such mass mobilization was Joan King, who as a consultant to Philadelphia’s Department of Behavioral Health, had been conducting training that helped people in recovery learn to craft their stories for public forums. In February 2012, I interviewed Joan about the power of

storytelling in addiction recovery. Please join me in this engaging discussion.

Bill White: Joan, let’s begin by introducing yourself to our readers. Could you share how your past professional and personal background influenced your interest in storytelling?

Joan King: I am a nurse by trade, and a great deal of effective nursing is listening to people’s stories. Coming to know myself as a storyteller began when I attended a professional conference that included a “creativity day.” I chose the least threatening option among everything from drumming to singing, which was storytelling. At that point, I didn’t identify myself as a storyteller, but at the end of the day, the workshop leader tapped me on the shoulder and asked me to stay afterwards. She said, “Joan, you can be a storyteller.” And that experience for me really transformed my life. I started to go to conferences on storytelling and get coaching to develop professionally as a storyteller. That initial experience helped me to understand firsthand the power of someone

recognizing your story and literally tapping you on the shoulder and saying, “You can do this.” Many people who live with behavioral health challenges have not had people in their lives tap them on the shoulder and say, “You have something of great value—your story—that could help a lot of people.”

Bill White: Part of the background of your involvement in storytelling training was your involvement in the larger recovery transformation process in Philadelphia. Could you describe the larger work you were involved in in Philadelphia?

Joan King: Yeah. I started work in Philadelphia in May of 2005—just a few months into their transformation process. I was originally brought in to facilitate the Recovery Advisory Committee, which was a cross systems group of stakeholders charged with guiding the transformation process. From that initial role, I branched out to help with a wide variety of projects related to the transformation process, including the Peer Specialist Initiative, the Day Transformation Initiative, and the Storytelling Initiative.

Bill White: So tell me the story of your storytelling training.

Joan King: Before Philadelphia, I worked in Montgomery County in 2004 to support their recovery transformation activities. One of the first things they did was develop a curriculum to train residential staff and the people living in residences together at the same venue on the same topic.

As we were putting together that curriculum, my colleague looked at me and said, “Wait a minute. You’re a storyteller. Why don’t we put together training on telling recovery stories?” I had never thought about that, but here was an opportunity to meld my two loves: working with recovery organizations and telling stories. So, I developed this very simple little training, and we started to do it in Montgomery County. It was one of those experiences that many of us have had in our lives where you just put something together that seems simple to you

and all of a sudden, you see lights come on in peoples’ eyes as they respond to it—in this case with the realization that they had a story.

So I came in to Philadelphia with that background and with my own personal transformation well under way from hearing so many recovery stories. Early on in the transformation process, Dr. Arthur Evans and other leaders in Philadelphia decided that they would offer what they called the Recovery Foundations Training to anyone in the system, and we rolled it out. We wanted to have a panel of people in recovery at the end of the first day’s training, but we very quickly realized two things: First, as a system, we didn’t really know very many people in recovery. Second, those we did know were a small number of people who always showed up—the professional recovery advocates. We knew there had to be many, many, many thousands more people out there who had not yet been mobilized. We also realized another thing. To tell their stories in public and professional settings, people needed the opportunity to prepare ahead of time for what could be a potentially intimidating experience.

So one day, Dr. Ijeoma Achara, who was the Director of Strategic Planning for Philadelphia’s Department of Behavioral Health, and I were sitting in her office pondering this problem. She said, “what about that storytelling training you told me about?” I said, “I’d be willing to try it if you think it might help.” We both got really excited about how this might activate the voices of people in recovery. We decided to start offering these trainings and to use them to prepare people to present their stories at the Recovery Foundation Training.

The trainings began in the summer of 2005 with 25 people per training, and through word of mouth, they were full almost immediately. When people heard that the city was really serious about listening to the voices of people in recovery, the response was more than we could have ever anticipated.

Bill White: How many people have gone through the storytelling training in Philadelphia?

Joan King: More than 1,000 people have gone through the training to date.

Bill White: One thousand people, that's remarkable. Is there an over-arching philosophy about storytelling that influenced the design of the training?

Joan King: I basically brought to the storytelling training some deeply held beliefs about storytelling, many of which I gained from the storytelling world and particularly from my storytelling coach, Doug Lipman.

Everyone has stories to tell. Your story is your story, and it isn't up to anyone to say what your story is or what your story isn't. Each person must create a venue and develop skills and a voice in telling his or her own story. I bring a real trust to the story. People ask me, "Aren't you worried that people will become upset talking about their trauma?" I do think that is a concern, but when you set up a safe space where stories can be told and you specifically ask people to focus primarily on their recovery story, it changes the story and the identity from a pathology story to a resilience and recovery story. Are there tears? Always, because people are sharing real stories with an open heart. But only rarely does someone come to a place where they need space and support outside of the training. We always have someone who can provide that support, but have almost never needed it. I have developed a great trust that stories will emerge as they're meant to emerge: people share what they're okay with sharing and find the experience empowering.

Telling a story is different than being in therapy. It's different than what people share in a clinical assessment. Stories themselves have an innate power to heal. And the telling of them changes everyone who's touched by the story, both the person who's telling the story and the listener. There is this wonderful Henry Nouwen quote: "One of the remarkable qualities of the story is that it creates space. We can dwell in a story,

walk around, find our own place. The story confronts but does not oppress; the story inspires but does not manipulate. The story invites us to an encounter, a dialog, a mutual sharing." It's almost like the story creates a room that we can all enter and explore. That happens when you trust the story.

Bill White: You've also made reference to a storytelling creed. Could you describe what that is?

Joan King: That is a statement by Robert Fulghum that reads:

I believe that imagination is stronger than knowledge, That myth is more potent than history, That dreams are more powerful than facts, That hope always triumphs over experience, That laughter is the only cure for grief, And I believe that love is stronger than death.

These passages capture the power of constructing and telling one's own story.

Bill White: This power seems particularly applicable to the experience of recovery.

Joan King: There are a lot of people in 12-Step recovery who have witnessed the power of story, but even they may not recognize the power of their story beyond the addiction recovery experience and the differences in presenting one's story within a 12-Step fellowship and presenting it publicly. There are universal themes in peoples' recovery stories that speak to us as a society in general—themes of hope, imagination, finding a way out of darkness. Once spoken in the form of a story, they take on this power that changes everyone in the room, no matter the nature of their challenges. Telling stories connects us to our own imagination, helps us see possibilities about ourselves and helps connect us to our own hope. Stories light up people's eyes. I can walk around the room when people are in storytelling dyads, and I can just see lights coming on in peoples' eyes as connections are being made.

Part of the devastation of addictions, mental illness, trauma, living with community violence, or living with a physical illness is that we lose connection with ourselves and our own story and we lose connection with others. When we lose that connection to our own story, it's like we are lost in space. And when we can re-connect this current experience through "re-finding" our story, to find again who we have been and who we want to be, it's a deep experience of healing. When you begin to step outside of yourself and look at your life as a story and tell your life as a story, it helps you re-connect, backwards and forwards, in ways that enhance your ability to live fully in the present.

Bill White: Could you describe the design of the training that elicits what you've just described.

Joan King: The trainings usually range from 3 hours to a full day. They start with a discussion about recovery and eliciting from the group what their understanding of recovery is. In Philadelphia, I use the recovery definition developed by the Recovery Advisory Committee as a start; when I'm in other places, I pick pieces of recovery definitions from different systems. I try to frame recovery as a universal experience while suggesting that there are specific experiences in recovery and specific skills that you might need depending on the particular recovery process you're in. It's like walking into a room through different doors, but once there, we can learn from each other. That's really what we do in the training process.

I open with two points: 1) Whatever you bring today is exactly what we need to have in the room. 2) The people who are here are exactly who's needed, and we're all going to learn something today. I go around the room and have them introduce themselves, and I ask them to tell me one thing they want to get out of the training today.

The training involves some of the basic skills of storytelling and the characteristics of a good story—story

themes, place, characters, action, its overall structure—beginning, middle, and end, and its ability to help us see things from a different perspective. I give people a basic structure for how they can think about their story today and then we deal with three very practical questions: 1) how can I convey my story in a brief enough form that people will want to listen to it, 2) how can I tell my recovery story, not my "war stories," and 3) how do I decide what to tell and what not to tell?

The training provides a very simple structure: a beginning, middle, and an end with the beginning done as briefly as possible. I want trainees to be able to tell in 3 or 4 sentences the before recovery story. I try to get across the point that you can convey the hard times in a very short and succinct opening, with a focus on what began and continued the recovery story. What were your sources of courage and strength? Who helped you? Who got in your way? And then ending with your hopes and dreams. The middle is where the real action is.

I give them the freedom to use that structure or not to use it. The training also provides ground rules for story-listening—the art of listening without speaking. Even if the other person stops talking, your job is to hold the space. It is a very different listening experience than most people have experienced before, and it is part of the power of the training. I have often had people tell me weeks or months after the training that they now use this kind of listening in their close relationships.

We do a "Simple Story Swap." Each person gets a set time (usually 3 or 5 minutes) to share their story and then to listen to another's story. These are followed by what Doug Lipman calls "appreciations"—opportunities for the listeners to reflect back to the storyteller what they most appreciated about his or her story. It is as simple as it is powerful. And then we do a large group process. What was that like to tell your story? What was it like to listen? What did you learn about your story? We also give people practice in presenting their story

outside the dyads to the larger group and compare these experiences.

There is a basic structure of this training—a schedule and PowerPoints and all that, but the structure is a loose one that can change from group to group. And somewhere in there, I talk about the piece you wrote on recovery as a heroic journey (see

http://www.williamwhitepapers.com/pr/2002_RecoveryasaHeroicJourney.pdf).

While initially people are uncomfortable thinking about themselves as heroes or heroines, working at their story this way opens up new possibilities and new understandings of their story. I especially encourage people with lots of experience telling their story in recovery support meetings to try out this new way of starting their story, to play with it and see what happens. I invite them to start with “Once upon a time, there was a hero or a heroine who set out on a journey,” and it’s amazing what happens. How challenging it is for people—particularly people who have faced great social stigma—to think of themselves in that way.

I’ve also started using slides of places in the world that are important to me to evoke movement beyond this present moment in time. I didn’t do that early on. That’s something I’ve added recently. Partly because I want people to understand sort of the universal nature of stories and that they can take place at any place in time. I try to use that to stimulate the visual centers of people.

I want to very intentionally create a community in the room. So I share a little bit about myself, about my own experience, professionally and personally. I always talk in the beginning about the profound impact that facilitating these trainings has had on me personally in terms of my own life journey.

Bill White: Let me ask you about one issue you’ve referenced and that is guidelines or collective wisdom about what to tell or not to tell in one’s recovery story?

Joan King: I haven’t identified specific guidelines. What I do is engage trainees in

discussion about the context of telling stories—the differences between a public venue and a recovery support meeting where everyone present has a similar experience. For the former, the discussion often notes the importance of preparing ahead of time and having a support in the audience—someone you can check in with after this type of personal disclosure. The other thing I caution people about is not including in any detail within their public story issues that they are currently processing. Public storytelling needs to focus to the greatest extent possible on those things within our personal experience that we have gained at least a measure of emotional peace with. The purpose of the public story is service and education first—not emotional catharsis for the storyteller. I really don’t want to tell people what not to do, but I do caution people about the boundaries of what they choose to disclose and to decide these boundaries ahead of time and not in front of 50 or 500 people. I might say, “I’m not sure it’s really helpful for you or effective for your audience to give the fine details of how you were sexually abused. Saying ‘When I was a child, there were multiple people I loved and trusted who hurt me badly’ will take your audience right there with you.

Bill White: Are there any issues raised about the kind of words people choose to tell their stories?

Joan King: We don’t dictate language, but we want people to think about their language. Part of that is matching language choices to audience. If you’re asked to go and share your recovery story with a group of high school students, you might use different language than if you’re asked to share your recovery story with a bunch of people who are coming out of prison. I don’t correct people when they use language that I’m not comfortable with. I try to use all “person-first” language. When people do not use person-first language in referring to themselves and others, I reframe their language when I give it back to them. I don’t say, “Don’t say this,” but I try to reframe or reflect back first-person language or

language that may be more generally suited for a recovery-focused speaking engagement. I try to be really sensitive about people from multiple cultures, multiple backgrounds, all in the room at the same time.

Bill White: I was thinking of organizations like Faces and Voices of Recovery that really try to heighten people's sensitivity around some of the stigmatized language that has crept into our stories and alternative language that can be used.

Joan King: I really respect that work, and I often ask people in training to reflect on the language imbedded in their story. I view myself as sort of helping people catch hold of the energy around their story, the framework of their story, because most of the people I'm working with are new to that. Language can be refined over time, but people in our training first have to discover their authentic voice.

Bill White: Could you describe the kind of responses from participants to this training?

Joan King: I can tell you a story and then describe their responses. When I ask people to get with a partner, I ask them to choose someone that they don't know because I've learned over time that there's a richness in sharing a story with a stranger even though it may be more uncomfortable at first. One day when I did this, two women sitting on opposite sides of the room found each other. During the exercise, I was watching them and knew something really powerful was going on. After the sharing, one of these women raised her hand and said, "Twenty-five years ago, my son was murdered, and until today, I had never talked to another mother whose son was also murdered. Today, I found a new sister." That's the kind of dramatic experience that happens in the context of storytelling training. The most important part of this training is the impact of people on each other during the training.

I think much of the power from the training comes from participants finding out that they have a story, finding out that their

story has value in the eyes of others and the personal connections people make through the training. People are always exchanging phone numbers in the training. Over the last couple of years, we've had more young people in the training, and it's been really interesting to watch some people who've got long-term recovery sort of take a hold of the hand of this younger person and say, "You've got these incredible abilities; here's my phone number—call me. I'm willing to walk with you."

The other thing that happened with the Philadelphia training is that everyone left with a sense of their potential next step. Jazmin Banks has been indispensable to this effort. She is a natural connector and has developed an extensive resources list that lets people know about training and speaking opportunities. She also maintains an extensive email distribution list so that people can be kept up to date about all the emerging opportunities in Philadelphia. Her energy, vision, and enthusiasm for this networking task have been critical to the success of the training.

Bill White: Joan, could you describe examples of such opportunities for the people who completed the training?

Joan King: The first opportunity was participating on a panel in the Recovery Foundation's training. Another was the ongoing peer specialist training in Philadelphia. Over time, storytelling training became a prerequisite for participation in many of the other recovery transformation activities, e.g., the First Friday training events, activities sponsored by the recovery community center in Philadelphia. People walk out with a packet of names and contacts and websites and a calendar of upcoming events. Those who have participated in the training also get blast emails about volunteer opportunities, new training events, and job opportunities for people in recovery.

As we in the system really came to understand the power of storytelling, we developed a new initiative called Taking Recovery to the Streets. People who had

participated in the storytelling training were put in teams and went out to different venues to share not only their personal stories but to talk about the overall transformation in Philadelphia. To date, they have presented in homeless shelters, emergency cafes, day programs, outpatient programs, and to community groups.

Bill White: What lessons have you learned that you could convey to others who might be interested in doing storytelling training in other communities?

Joan King: One of the lessons we share is not to do this training without having next step opportunities created for the people who go through the training. Have some way that people who've been through the training can begin to plug in to provide vision, leadership, and energy to your sense of transformation efforts.

When I do this training in places outside of Philadelphia, I always ask the system leader who is inviting me to have somebody from their staff either participate in the whole training or at a minimum, come at the end of the day so that they make a face-to-face contact with the people at the training. This training uncovers marvelous potential resources in the community of people in recovery, and it is important that these resources and this energy don't get lost. I think that is the most critical thing and an incredibly low-cost way of activating the community of people in recovery.

Another really important thing is having someone at the training to facilitate the logistics and serve as a hostess. Warmly greeting people when they come in and making sure people can find the bathrooms may sound mundane, but these small details are very important to the comfort, safety, and sense of community we are trying to create within the training. It is very hard to do all of that as the lead trainer.

The larger context of this training is also important. It works best in a system that is committed to the value of the voices of people in recovery as equal partners in guiding the transformation of systems of

care and support. That was a special advantage we had in Philadelphia.

Bill White: My perception from outside is that the storytelling training in Philadelphia empowered a large number of recovering people to become leaders in the transformation process. Would you concur with that?

Joan King: Absolutely. And we didn't know when we started out how important that training would be. We just did the next right thing, and the next right thing was empowering people who could tell their story. Now we have 6 or 8 trainers who do this training routinely in Philadelphia—all developed by training people who had been through the training to become trainers. That was kind of an organic process. I started out with one person who had gone through the training and mentored her as a trainer. Then we did a formal training of trainers to expand the trainer pool. It's not a model that lends itself to come in and spend one day and become a trainer. You really have to go through the experience a couple of times before getting trained as a trainer.

Bill White: Joan, in closing, I want to read a quote that you recently sent me and have you respond to it. It's by Salman Rushdie and it says, "Those who do not have power over the story that dominates their lives, the power to re-tell it, re-think it, de-construct it, joke about it, and change it as times change, truly are powerless because they cannot think new thoughts." Why is that quote so special to you?

Joan King: When I came across that quote, it was a true "aha!" moment. It helped me see clearly what it is that we're doing when we're helping people re-envision their story through the lens of recovery. It reminded me that what we are doing is helping people who have been demeaned and shunned recast their story as a heroic journey and to discover the courage, grace, compassion, and strength that already lies within them. No matter how many times they've had to pick themselves up off the ground, they've

done it. And if people gain that understanding of themselves, it changes their whole relationship with themselves and others. It is that kind of struggle told honestly that makes recovery stories so important, not just to others seeking or in recovery, but to the masses living in denial of the ways that their lives are disempowered by their addiction to many masters.

Stories are catalytic in the sense that creation of a personal story can change one's whole life and create whole new possibilities. In order to make a change, you have to be able to see the change. Finding your story as a heroic journey, telling it and seeing its impact on others, hearing it for yourself out loud; all these things are incredible tools for personal transformation.

Bill White: Joan, that's a wonderful closing. Thank you for your willingness to do this

interview, and thank you for all you do for people in recovery.

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