

GUIDELINES FOR PERSONAL SAFETY AND PUBLIC RECOVERY SELF-DISCLOSURE (BILL WHITE, BILL STAUFFER, AND DANIELLE TARINO)

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He who shows himself at every place will someday look for a place to hide. –African Proverb



Earlier blogs in this series explored the benefits and limitations of public recovery disclosure, the potential risks to multiple parties involved in such disclosure, and the ethics of recovery disclosure. In this final blog in the series, we explore guidelines for individuals and organizations aimed at minimizing risks related to public recovery disclosure.

The Decision to Disclose

Before disclosing our recovery status or details of our addiction/recovery experiences at a public level, we suggest giving careful thought to such questions as:

- Is this the right time in my recovery to share my recovery story at a public level? Will this strengthen my recovery or would it be a diversion from more critically needed recovery activities?
- Are there any negative effects for myself, my family, my community, and organizations within whom I am associated that could result from sharing my story in public or professional settings?
- Could such story sharing subject me to discrimination in housing, education, employment, health care, or social and business opportunities? Could it have any legal ramifications?
- Do I have a support system that could help me manage any such effects if they should arise?
- Will I be sharing my story alone or alongside other people in

recovery?

- Do the potential benefits of public disclosure as a community service outweigh the potential personal risks?
- Who is controlling how my disclosure will be used and is there an explicit right for me to have the final edit on what elements of my disclosure are presented?

Purpose of Public Disclosure

Many people in recovery will have shared their recovery story with family and friends, with medical and treatment professionals, and with other people in recovery before the opportunity for public recovery disclosure arises. Public disclosure is different from any of these preceding situations and involves a different purpose and style of storytelling.

Public recovery storytelling is about service to a larger cause than self. It is the use of self and one's own story as a catalyst for personal and social change. With each story sharing opportunity, we prepare ourselves by asking key questions. What do I want members of this audience to understand, feel, and do? How can I present my story in a way that will achieve those goals? How can what I do today contribute to the larger goals of the recovery advocacy movement?

It is important that addiction treatment and recovery community organizations provide a process of informed consent when inviting individuals to share their stories in public and professional contexts. This involves a clear statement of the potential benefits and risks of public disclosure and screening out individuals for whom such disclosures present an unacceptable level of risk. Asking individuals currently receiving services to participate in public story sharing or marketing activities is coercive and exploitive.

Disclosure Preparation

Many of the risks involved in public recovery story sharing can be avoided with adequate orientation and training. Messaging training has been an effective tool used by Faces and Voices of Recovery and other recovery advocacy organizations to prepare people for this unique service ministry. Messaging training spans both the intent and content of public story sharing and the mechanics of effective story sharing (e.g., language, tone, adaptation for different cultural contexts and audiences, etc.). Pursuing these activities within an established recovery community organization helps assure peer and supervisory support for the “ups and downs” of such sharing experiences.

Public Self-disclosure and 12-Step Anonymity

AA, the precursor of all 12-Step programs, promulgated a tradition of personal anonymity at the level of press as both a protective device for AA and as a spiritual principle. Public disclosure of recovery status and sharing one’s recovery story without reference to affiliation with a particular 12-Step program complies with the letter of 12-Step traditions (See Advocacy with Anonymity), but it may not always meet the spirit of the Traditions. This could occur when advocacy is used as a stage for assertion of self (flowing from ego / narcissism / pride and the desire for personal recognition) rather than as a platform for acts of service flowing from remorse, gratitude, humility, and a commitment to service. For members of 12-Step fellowships, adhering to anonymity traditions (in letter AND spirit) in public recovery story sharing is recommended as a protection both for 12-Step programs and for the protection of the recovery advocate.

Timing of Disclosure

Our capacities (energy, abilities, competing needs and demands) for recovery advocacy ebb and flow over time. It is appropriate to ask ourselves if this is the optimal time for public recovery story sharing, whether this is the first time we have such opportunity or whether we need to take a break from such activities during times of personal distress or competing demands that require our focused attention. Warning signs indicating the latter include losing emotional control over the content of our story sharing (via unplanned expressions of frustration, resentment, anger, sorrow) or experiencing boredom or a loss of energy in our public story sharing. Difficult experiences and emotions can be referenced strategically within our talks (once we have emotional control over them), but public and professional meetings are not the appropriate venues to work out unresolved traumas of the past or present. When we drift across that line, it is time to take a break from this public service role.

Scope and Focus of Disclosure

People in addiction recovery have many stories they can share. There is the life preceding the onset of drug use, one’s addiction career, the turning point of recovery initiation, and the story of one’s personal and family life in and beyond recovery. All of these may be touched on in public recovery story sharing, but the emphasis of this story must be on the recovery story and the lessons drawn from it. Great care is required with the media to maintain this focus. There are dangers that others hijack a recovery story intended to lower stigma in a way that fuels stigma, social marginalization, and the criminalization of addiction. We best serve the advocacy movement and protect ourselves by maintaining a focus on the recovery side of our stories and how we escaped the chaos and drama of addiction.

Depth of Disclosure

There exists a continuum of intimacy defining the degree of risk in public recovery story sharing. There are experiences, feelings, and thoughts known only to ourselves that we have not shared with anyone else. There are experiences, feelings, and thoughts we have shared with only within our most trusted relationships. There are the communications we have expressed only within the context of professional counseling, within a sponsorship relationship, or recovery mutual aid meetings. And there are things about ourselves we have shared widely with those we encounter in our daily lives. Such communications range from high emotional risk to low emotional risk. The question is: Where does sharing our recovery story in professional or public meetings, in media interviews, or on social media fit in this continuum?

All recovery story sharing at a public level involves potential risks to ourselves and other parties, but those risks increase in tandem with the level of detail about our experiences contained within those stories. The category “people in

recovery” includes highly armored people who are unable to trust others enough to share their real experiences, feelings, and thoughts. Others in this category enter recovery with no armor and no boundaries to facilitate the nuances of self-disclosure and self-protection in different settings and relationships. People existing on the extremes of this continuum from overly guarded to completely unguarded may need greater time in recovery prior to recovery story sharing at a public level. All people on this continuum need guidance and discipline to manage the depth of public recovery disclosure and the discipline to maintain this boundary over time.

Training and supervision related to public recovery disclosure can provide a safe setting in which we can address such questions as the following:

What is the level of risks (who could experience harm and to what degree?) in the following story sharing venues: a social media post; a radio, television or newspaper interview; speaking at a recovery celebration event; speaking to a professional audience; or speaking to a public audience; writing an article or memoir about our recovery experience?

What parts of my story are not appropriate to share publicly? (We want to break no-talk rules related to addiction/recovery, but we want to avoid disclosures that are so intimate in detail that they pose threats to our own emotional health or repel those who hear our story.)

What aspects of my past or present experience remain too emotionally intense to include in my public recovery story? (These are the boundaries we need to define BEFORE we stand before an audience or sit for an interview! Message training and peer supervision can assist this process.)

Have I avoided referencing other people’s stories who might experience harm or discomfort resulting from my disclosure? (It is best to get permission for inclusion of others within our stories, e.g., spouse, family members.)

Have I fully explored why I am sharing my story and sought feedback from other people who know me to understand the nuances and potential unintended consequences of disclosure?

Facing Criticism of Public Disclosure

As a final note, it is not unusual for individuals disclosing their recovery story at a public level to draw criticism for such activities from expected and unexpected quarters. You may be accused of “grandstanding,” “ripping off the program,” violating program traditions,” or be caught in the crossfires of various ideological debates. Some will comment on what you should have or shouldn’t have included in what you shared. Our advice is to have one or more people you are close to who can help you sort such feedback. And to positively use what you can and disregard the rest. Do know that such criticism is inevitable and can help us refine our message and its delivery—even when the criticism is unfounded and prompted by spurious motives.

Closing

We have tried in this series of blogs to explore the purpose, contexts, and risks of sharing our recovery stories at a public level and to explore some of the ethical issues involved in recovery story sharing. It is our hope that these discussions and suggested guidelines will serve as a catalyst for discussion and a tool for the training of recovery advocates who choose to join the vanguard of people who are putting a face and voice to the recovery experience.

Our stories have the power to achieve many things, but we must not embrace total responsibility for eliminating addiction/recovery-related stigma. Those individuals and institutions who spawned and perpetuated stigma and discrimination bear that responsibility. What we can do is offer our stories and our larger advocacy activities to offer hope to wounded individuals, families, and communities and do so in a way that protects our own health and safety.

Link to Blog Post [HERE](#)