The “New Life” model of a Japanese self-help group for alcoholics

Tomofumi Oka

Summary: The purpose of this paper is to discuss the “New Life” model developed by a Japanese self-help group for alcoholics, Danshukai. Danshukai’s “New Life” model has emerged as an alternative to medical or spiritual recovery models. Although in the early period of Danshukai’s operation, the “New Life” model was considered to be the only available model by the Danshukai members, as medical services for alcoholism have developed in Japan, the medical recovery model has grown in popularity among the members. Consequently, it has become difficult for Danshukai to fully develop their potential as a self-help group, with many alcoholics seeking out medical professionals rather than peer members in self-help groups. Therefore, in order to develop their group, Danshukai leaders need to be more conscious of the importance of the “New Life” model. However, the “New Life” model is still ambiguous, and therefore social-work researchers can contribute to Danshukai’s value and development by helping the organisation’s leaders clarify and articulate the specifics of their “New Life” model. In this paper, I first present two types of recovery model as mentioned above and discuss the “New Life” model as a third type of recovery model. Second, I present two statements regarding the “New Life” model: 1) The “New Life” model has no written programme; and 2) the “New Life” model can be well understood as an application of Zen Buddhism.

Key words: Self-help groups, Alcoholism, Recovery, Zen Buddhism, Danshukai, the “New Life” model

The purpose of this paper is to describe the “New Life” model that the Japanese self-help group for alcoholics (Danshukai) has been using since their genesis. Although Danshukai has 9,455 members as of 2010 (Zendanren, 2010) and has always been the largest self-help group for alcoholics in Japan, there is a paucity of research literature on it. In particular, because there are very few English-language articles about Danshukai, it has been largely undocumented in the non-Japanese literature. To fill the void in research, in collaboration with an Australian anthropologist, Dr. Richard Chenhall, I have been studying Danshukai since the end of 2006 utilising participant observation, qualitative interviews, and collection and analysis of documents printed by Danshukai (Chenhall & Oka, 2009). Then I have come to the conclusion that some Danshukai members may be in confusion about their individual goals: recovery*1 or "new life," because we did not receive clear answers when we asked Danshukai leaders what they thought of "recovery."

One of the main goals of Danshukai, when it was established, was to establish a “new life” for alcoholic members and their families. The national alliance of Danshukai groups (Zendanren) was started in 1963 by two Danshukai groups, which were not at that point referred to as Danshukai*2 but as Danshu-shinsei-kai. The etymology of Danshu-shinsei-kai is: a “group” (kai) aiming at a “new life” (shinsei) through “practicing abstinence” (danshu). The “New Life” model was to be the core of the philosophy of the Japanese self-help
model followed by Danshukai, which was viewed as different to the idea of “recovery” as defined by the Twelve Steps of Alcoholics Anonymous (Chenhall & Oka, 2009; Kurube, 1992; Smith, 1998).

However, as more medical services began to be provided for alcoholics, Danshukai groups came to use more medicalised and psychiatric terminology such as “dysfunctional families” and “manic depression.” Currently, many Danshukai leaders and members consider and discuss “recovery” –not “new life”– as their individual goal. Because their concept of “recovery” was introduced by medical professionals, medical doctors and professionals are considered more eligible than Danshukai members to talk about “recovery,” even in the context of Danshukai meetings. This might be a case of professional takeover of a self-help group or a precursor of the demise of the self-help group. In fact, the number of Danshukai members who belong to the national alliance has been decreasing since 2001 (Zendanren, 2008b). This paper aims to investigate Danshukai members understanding of the “New Life” model, and to empower Danshukai by encouraging leaders and members to practice their original model instead of the medical recovery model.

To achieve the aim, this paper has three sections. In the first section, I discuss the two kinds of recovery models that are often used by Japanese alcoholic self-help group members and related professionals: spiritual recovery models and medical recovery models. The second section presents an examination of an essay written by a veteran Danshukai leader and describes how Danshukai members use the term “recovery” in contrast to “New Life.” The third section explores two statements about the “New Life” model.

Two kinds of recovery model

To understand the importance of the “New Life” model for Danshukai members, let me distinguish between two kinds of recovery model for alcoholics: spiritual recovery models and medical recovery models. The former include that used by Alcoholics Anonymous; in this model, alcoholism is in part “a spiritual disease” (Connors, Walitzer, & Tonigan, 2008). The latter, the medical recovery model, is one that stresses physical and mental morbidity and disregards spirituality. I have to admit that this dichotomy is too simplistic, in the sense that it ignores other possible models, such as social recovery models (Barrow, 1998). However, putting this aside for the moment, the definitions of recovery in the field of treatment of alcoholism in Japan can be divided into the two types mentioned above. This dichotomy reflects what the Japanese think of recovery. Japanese addiction professionals and many self-help group members tend to use the medical recovery model, whereas a minority of self-help group members pay more attention to the spiritual recovery model. To discuss this issue further, let us consider how Alcoholics Anonymous defines the term “recovery.”

In the literature, the description of recovery in Alcoholics Anonymous is variously documented. For example, Borkman (2008) points out the particularity of the usage of the term “recovery” in Alcoholics Anonymous by stating the following:

Recovery is a special term used in AA . . . to connote the process by which alcoholics become abstinent and undergo the self-help/mutual aid journey to heal the self, relations with others, one's higher power, and the larger world. Recovery includes the belief system and program of action, groups and their
meetings, the Twelve Steps, and helping others within the context of a network of recovering peers. Recovery is a personalized and self-paced journey that is undertaken interdependently with one's alcoholic peers and follows recognizable general stages. (p. 13)

While Borkman's description of recovery stresses the social relations of alcoholics, some authors pay greater attention to the spiritual side of recovery in Alcoholics Anonymous (Connors, Walitzer, & Tonigan, 2008; Kurtz, 1979; Kurtz & Ketcham, 1992; Morjaria & Orford, 2002; Rogers & Cobia, 2008; Room, 1983; Tangenberg, 2005; Weegmann & Piwowoz-Hjort, 2009). On the other hand, Alcoholics Anonymous is sometimes referred to as popularising the disease concept of alcoholism, as Suissa (2003) says:

Alcoholics Anonymous has a tremendous influence on the public's view of alcoholism and the way to treat it. . . . According to this ideology, alcoholics cannot deal with their lives because of their permanent disease: allergy, loss of control, progressive disease, loss of will power, and so forth. (p. 206)

Whether Alcoholics Anonymous includes the disease concept of alcoholism as part of their approach is not a simple question; some agree with this argument (for example, Roman, 1991) and others do not. This complicated issue is well explicated by Kurtz (2002). First, he points out that “contrary to common opinion, Alcoholics Anonymous neither originated nor promulgated what has come to be called the disease concept of alcoholism” (p. 6). He adds:

Most members of Alcoholics Anonymous do speak of their alcoholism in terms of disease: the vocabulary of disease was from the beginning and still remains for most of them the best available for understanding and explaining their own experience. But the use of that vocabulary no more implies deep commitment to the tenet that alcoholism is a disease in some technical medical sense than speaking of sunrise or sunset implies disbelief in a Copernican solar system. (p. 6)

In short, while the term “recovery” as used by Alcoholics Anonymous includes spiritual recovery and better human and social relations, Alcoholics Anonymous may have been considered by the Japanese as holding a disease concept of alcoholism, because the group refers to alcoholism as a disease in its printed materials, such as handy leaflets printed by Japanese Alcoholics Anonymous. As a result, in Japan, professionals and self-help group members have accepted the disease/medical concept of alcoholism as consistent with the work of self-help groups.

I have pointed out the confusion between two kinds of recovery in Japan; other types of dichotomy regarding recovery have been suggested by some authors. For example, Room (1998) states that self-help groups for alcoholics can be classified into two categories according to whether they have a spiritual or a secular basis; he treats Danshukai as having a secular basis. As another example, after a thorough literature review, Collier (2010) argues that the concept of “recovery” has two different meanings in mental health: medical and non-medical recovery. These are, respectively, “(i) the traditional definition of recovery, referring
to cure from illness; and (ii) contemporary ideas about ‘recovery’ referring generally to a process of change and personal growth” (p. 17). Additionally, Barrow (1998) presents the social recovery model as opposing the medical recovery model in the field of substance abuse. According to the social model, “substance abuse problems result from a lifetime socialization process in a milieu that encourages use, . . . and . . . treatment involves both the individual and the social and physical environment” (p. 55). Barrow states that Alcoholics Anonymous incorporates this model in their practice.

If we accept these statements, we face a complicated conceptual problem: Whether there can be non-medical recovery models that include neither spiritual recovery nor improvement of social environment. My point is that the “New Life” model of Danshukai might be a model of this sort: The non-medical recovery concept of Danshukai seems not to include the type of spiritual recovery that Alcoholics Anonymous stresses, and Danshukai members seem not to have much concern about social explanations, despite their emphasis on social explanations in their newsletter.

To sum up, we can think of two types of recovery: One is medical, and another might be tentatively described as spiritual. Danshukai groups and Japanese professionals in related fields tend to follow the medical model only importantly, they may mistakenly conclude that Alcoholics Anonymous would also support a medical recovery model. They are also aware that the type of Christian spiritualism promoted by Alcoholics Anonymous cannot be incorporated into the Danshukai philosophy, which functions within a non-Christian culture. An alternative originally existed within the Danshukai tradition: “New Life.” In the next section, I will illustrate the “New Life” model by quoting the words of a veteran Danshukai leader.

**A testimony on the “New Life” model**

As mentioned above, through interviews and participatory observation I have found that when Danshukai members discuss “recovery,” their meaning is ambiguous. Sometimes it refers to medical, and sometimes to non-medical models of recovery. Danshukai has over half-a-century of history, and in the beginning, the leaders and members never used the term “recovery.” We have testimony on this matter from Kobayashi (2010), who has been one of the top leaders of Zendanren (the national alliance of Danshukai), and is the writer of the *Shishin to kihan* (Danshukai guidelines). I translate his words as follows:

We [Danshukai members] all know the term “recovery.” However, there can be a variety of interpretations of this term, so that members could have completely different ideas about the term even though they all have practiced abstinence for a long time . . . When I joined Danshukai in 1967, there were absolutely no members who used the term “recovery.” Since the mid-1970s, when medical services for alcoholics were started, medical doctors seem to have begun using the term. In those days the term “recovery” meant the situation in which the patients of these doctors joined Danshukai and regained their healthy bodies. In order to distinguish patients under treatment from patients who practice abstinence in the community, the doctors called the former group “alcoholics” and the latter one “recovered.” Thus, in the early history of Danshukai, “recovery” was nothing but a medical term. On the other hand, since the beginning,
Danshukai has stressed the idea that members should start a completely “new life” while practicing abstinence. Because of this, the majority of Danshukai groups put the term “New Life” into their group names. Additionally, the founder of Danshukai, Harushige Matsumura, asserted that Danshukai is a group that educates members to be a new type of people. However, many of the members thought that they had no problems except for drinking too much, and that they would naturally be all right only if they stopped drinking. Unfortunately, there were only a smaller number of members than expected who were ready to change themselves and create a new life. This is the case even now. (p. 3)

Kobayashi goes on to tell his own personal story of having been isolated within Danshukai, because he fell into heavy drinking again even after joining.

At that time I met a senior member, Mr. N. He said to me, “Alcoholism deprives people of important things, and so alcoholics should regain them through abstinence.” This advice moved me most. As a professional stated recently, “Alcoholism is a disease of loss.” I agree with this, because I am sure that the loss of self, the loss of human relations and the loss of sociality are features of alcoholism. Then, I began to recover from this loss of self, and made effort to repair relations with my family and to improve other human relations. However, years later, I realised that Mr. N’s idea of recovering from loss did not fit me, and I had to change my ways of thinking. Because I fell into alcoholism in my mid-twenties, even if I succeeded in recovering my “lost self,” I would obtain nothing but my immature self. If I think of the family relationship as the primary human relationship, because I grew up in a “dysfunctional family,” any healthy relationship with my wife and child was unfamiliar to me. Because by the time when my child could remember [what was happening to his family] I had become a helpless alcoholic, I had never had any normal relations with my child. So, how could I regain or recover what I had never had? “What should I do?” I asked myself with the bitterest distress. After worrying it out for a long time, I came to a very natural conclusion: “Because I am a member of Danshu-shinsei-kai [which aims at a “new life”], I should not think of recovering what I lost. Instead, I realised that, with the purpose of Shinsei-kai [group for “new life”] in mind, I should create a new life for myself and build a completely new relationship with my family. [When I realised this,] ten years had already passed since I had joined Danshukai.” (p. 3)

These translated passages show three important things: First, for Danshukai members, “recovery” had meant “medical recovery” only, and Kobayashi points out that many Danshukai members still have this medical image of “recovery” in mind. This agrees with my observation of Danshukai meetings. The members often talk about their delight at “eating healthily” and “sleeping well” with their recovered health.

Second, “recovery” was referred to as recovering something that members have lost. As Everett (2009) says, “Common definitions of the word recovery include a return to health or consciousness and regaining a sense of balance, control, or composure” (p. 761). The term has nothing to do with “new life” ; where “recovery” is past-oriented, “new life” is future-oriented. I repeatedly hear from Danshukai members who started drinking heavily when they were very young that they never had good relationships with their families or other people.
This being the case, what can they recover if this means recovering what they lost? There is a contradiction for Danshukai members in accepting the "recovery" concept: "Recovery" suggests an impossible goal of recovering what they have never had.

Third, in the above passages, this veteran leader used a technical term, "dysfunctional family." This technical term, which is completely unknown to ordinary people in Japan, is very often used among Danshukai members. I was a little surprised that many Danshukai leaders and veteran members are familiar with such technical terms or jargon that come from specialist discourse. Other examples include "adult children" of alcoholics and "intergenerational transmission of alcoholism" (Berkowitz & Perkins, 1988; Protinsky & Ecker, 1990; Van Gundy, 2002). The idea of intergenerational transmission seems to appeal to the Japanese because the Buddhist concept of karma is present in Japanese culture, and teaches that "the sins of parents are visited upon their children."

In short, the Danshukai "New Life" model is different from the medical recovery model. However, the above quotations include very little of the concrete content of the "New Life" model. Although we understand that in this model Danshukai members are aiming at a "new life," we naturally wonder what a "new life" looks like. Are there any steps, like the Twelve Steps of Alcoholics Anonymous? How do Danshukai members think they can realise the "new life"? In the next section, I will try to answer these questions.

What is the “New Life” model?

Let me present two statements about the “New Life” model, which I have developed through my fieldwork on Danshukai. Although I have to admit that we need more evidence to confirm these statements, I expect that they should be helpful for exploring the “New Life” model further.

Statement 1
The “New Life” model neither employs nor can employ programmes like the Twelve Steps. There are few guidebooks for Danshukai members to depend on. Instead, there are a lot of maxims that Danshukai members are required to know.

As Alcoholics Anonymous has the Big Book, so Danshukai has its own guidebook, according to which the members are expected to regulate their practice of abstinence. The title of the book is Shishin to Kihan [Principles and Rules], and the book explains the seven Danshukai Shinsei Shishin [Principles for Abstinent New Life] and ten Danshukai Kihan [Danshukai Rules] (see Appendices A and B). The book was first printed in 1993, which is quite late considering that Zendanren was founded in 1963. The structure of the book is influenced by Alcoholics Anonymous's Big Book, and the purpose of the book presents "a programme" that is equivalent to the Twelve Steps and Twelve Traditions of Alcoholics Anonymous. Some leaders stress the importance for Danshukai members to learn these principles and rules using the Shishin to Kihan. However, the book is very seldom used in Danshukai meetings, as noted by Shimmitsu (2009, p. 83), who studied Danshukai groups in West Japan. In Tokyo (in East Japan), too, where I conducted field work, the
book was very seldom used. Three times I attended three-day workshops sponsored by Zendanren, in which new members coming from various areas were supposed to learn how to practice abstinence as members of Danshukai, and found that the book was not used and not even mentioned\(^5\). Therefore, I have to conclude that although the book is supposed to be the most important reference book in the "New Life" model, the influence of the book is in fact very limited.

Except for this book, there are very few guidebooks that Danshukai members commonly use. Danshukai groups have pledges (Chenhall & Oka, 2009, pp. 119-121), and these passages would work as guides to the programme, although they are very brief. However, as Shimmitsu (2009, p. 83) has pointed out, instead of guidebooks, there are many short phrases in circulation among members as helpful maxims. The most famous group of such maxims is a collection of fifty sayings of Harushige Matsumura, which is known as *Matsumura Goroku* (see Appendix C). Ten months after the death of Matsumura, Köchi Prefecture's Danshu-shinsei-kai conducted a survey to determine which Matsumura's sayings had made a deep impression on Danshukai members all over Japan. These were subsequently edited into fifty words as the *Goroku*. (Köchi-ken Danshu-shinsei-kai Kyōsen-bu, 1983). Although many Danshukai members consider *Matsushita Goroku* to be "the" goroku, various forms of goroku seem to have been made. One example is *Kodama Goroku*, a collection of sayings of a Masataka Kodama, who founded a Danshu dōjō or group house, which I will talk about later (Shigeta, n.d.). Hiroshi Harada's collection of short remarks on abstinence is also well known (Hokkaidō Danshu Rengō-kai, 1986).

Zendanren and some local associations of Danshukai make monthly or daily calendars, which have a maxim or an epigram on each sheet. These maxims are usually anonymous. Additionally, there are also many maxims that are disseminated orally. An example is, *oya ga shindemo Danshukai* [on the very day when your parent dies, you should attend a Danshukai meeting], which stresses the importance of attending Danshukai meetings. Another is *ashi de kasege* [do legwork (to maintain abstinence)], which encourages members to attend many Danshukai meetings even if they are held far away. *Atama dekkachi ni naruna* [Don't rely on your brain] is also often heard in Danshukai.

Because many introductory studies on Alcoholics Anonymous start with reference to explicitly expressed guidelines such as Twelve Steps and Twelve Traditions, scholars might want to begin researching Danshukai by analysing their explicitly expressed or written guidelines or rules. However, as shown below, we have to consider the possibility that many important rules in Danshukai are not written.

The lack of trusted guidebooks in Danshukai might be related to a feature of Japanese culture, which can be categorised as "high-context", according to Hall and Hall (1987, 1990). Hall and Hall divide cultures into two groups: high-context and low-context cultures. In a high-context culture, people suppose that "most of the information is already in the person, while very little is in the coded, explicit, transmitted part of the message" (Hall & Hall, 1987, p. 6). On the other hand, in a low-context culture such as American culture, in which Alcoholics Anonymous was developed, "the mass of the information is vested in the explicit code" (Hall & Hall, 1987, p. 6).
Statement 2

The "New Life" model might be based on some concepts from traditional Japanese religions, especially Zen Buddhism. As a result, there are some commonalities between Danshu (practicing abstinence) and Zen practice. That trait makes the way of Danshukai similar to various dō "way" or "discipline" practices, such as jū-dō and cha-dō, and in fact some call the practice of Danshukai "Danshu-dō."

I have previously pointed out the influence of Zen Buddhism over Danshukai (Chenhall & Oka, 2009) while quoting the following passage of Enomoto (1985):

In Zen practice, shikantaza, which means devoting oneself wholly to just sitting without thinking of anything else, is considered the first step to spiritual awakening. . . . They think that people will be spiritually awakened and emancipated from worldly attachments by regulating the outside of oneself (the form) and meditating. In Danshukai, alcoholics firstly put on the form of abstinence and regulate their outside. Thereafter, they gradually get ready to cultivate the spirit of abstinence. While controlling their deviant (drinking) behaviour from the outside, they guide themselves to the life of abstinence step by step. (p. 161)

In terms of the influence of Zen Buddhism, three interesting common points between Danshukai and Zen Buddhism can be observed: lack of interest in abstract ideas, emphasis on lived experience, and training for enlightenment, which leads to the development of “dō spirit.” I will explain these three points.

First, Zen and Danshukai both show little interest in abstract ideas. As stated before, Danshukai groups do not use their guidebooks very much, and their Shishin to Kihan are not taken seriously by rank-and-file members and even some leaders. Danshukai have not developed abstract rules or explicitly expressed procedures surrounding their activities. As shown above, “don't rely on your brain” is one of their commonly used maxims. Zen has a similar tendency; as a famous Zen master, Suzuki (1961), talked about the emptiness of abstract ideas and "the oppression and tyranny of intellectual accumulations":

The mind is ordinarily chock full with all kinds of intellectual nonsense and passional rubbish. . . . It is chiefly because of these accumulations that we are made miserable and groan under the feeling of bondage. . . . We long for naturalness and freedom, yet we do not seem to attain them. . . . [The Zen masters] want to have us get rid of all these wearisome burdens which we really do not have to carry in order to live a life of truth and enlightenment. Thus they utter a few words and demonstrate with action that, when rightly comprehended, will deliver us from the oppression and tyranny of these intellectual accumulations. (p. 28)

To a question of what Zen is, he answered:

It is, in fact, in the very nature of Zen that it evades all definition and explanation; that is to say, Zen cannot be converted into ideas, it can never be described in logical terms. For this reason the Zen masters declare that it is “independent of letter,” being “a special transmission outside the orthodox teachings.” (p. 267)
A famous Buddhist thinker, Hajime Nakamura, studied how Buddhism has been transformed through its adoption in Japan, and argued that the Japanese had a "tendency to avoid complex ideas" (Nakamura, 1964, p. 557). While pointing out a similar simplification process in Japanese adoption of Confucianism, he stated: "Japanese philosophy in the past has been influenced by this tendency to shun theoretical argument. . . . The Japanese scholars endeavored to grasp only what they could utilize in . . . learning for practical understanding" (p. 561). Considering this attitude of Zen Buddhism to abstract ideas, we might regard it as very natural for Danshukai to have developed few theoretical approaches to abstinence or alcoholism. Simple maxims and mottos like *ichinichi-danshu* (abstinence for one day) and *rei'ai-shusseki* (attend meetings) have been sufficient.

Second, in Zen Buddhism, what is valued instead of abstract ideas is lived experience. Danshukai also highly values experience and always encourages their members to talk about their experience.* Suzuki (1961) states:

Conviction must be gained through experience and not through abstraction, which means that conviction has no really solid basis, except when it can be tested in our acting efficient life. Moral assertion or "bearing witness" ought to be over and above an intellectual judgment; that is to say, the truth must be the product of one's living experiences. An idle reverie is not their business, the Zen followers will insist. . . . As they are against chewing the cud all the time, they put in action whatever reflections they have made during hours of quiet sitting and test their validity in the vital field of practicality. (pp. 317-318)

If we accept the similarity between Zen Buddhism and Danshukai's way of thinking, we will realise how to read the *Matsumura Goroku*, which I already introduced as a substitute for any formal guidebook of Danshukai. *Goroku* etymologically means a record of words, and has been used to mean "containing the sayings and sermons, 'gatha' poems, and other literary works of a Zen master" (Suzuki, 1960, p. 73). Therefore, "to understand it [goroku] requires some special practical training in Zen" (Suzuki, 1961, p. 9). We can suppose that those who collected Matsumura's words considered him to be a *danshu* (abstinence) master. Some sayings included in the *Goroku* are vague or opaque, and Danshukai members would claim that an individual needs to understand these words through his or her own experience, not through mere contemplation.

The Zen Buddhist tendency to value experience (*taiken*) is also found in Japanese religions, especially a group of non-traditional religions called "New Religions." The following passage is taken from a research article (Anderson, 1992) on a New Religion organisation, Zenrinkai:

*Taiken* are of central importance to Zenrinkai and many other Japanese New Religions. The word *taiken* can be used as both noun and verb, and is usually translated into English as "experience." The word *taiken*, however, generally implies an experience that is both different and more important than an "ordinary" experience (*keiken* . . .). Zenrinkai, along with numerous other Japanese New Religions, uses *taiken* to designate narratives of personal experience whose dual focus moves from an initial recounting of the problems encountered in life before encountering the religion, to the benefits received after joining the religion and internalizing the teachings. (p. 319)
We will see a striking symmetry between this Zenrinkai and Danshukai: If "the problems" and "the religion" are replaced by "alcoholism" and "Danshukai" in this passage, this description of experience (taiken) is valid in Danshukai practice. This symmetry is, I think, a proof that New Religions and Danshukai both are influenced by traditional Japanese religious ideas (See also Sharf, 1995, Shimazono, 1986).

The third point mentioned above is that Zen Buddhism has given "the dō spirit" and thus a sort of spiritualism to Danshukai. Enomiya-Lassalle (1973) describes "the influence of Zen on the Japanese dō, i.e. ways":

There are many: the way of tea, cha-dō; the way of the bow, kyū-dō (archer); the way of writing, sho-dō, calligraphy of Chinese characters; ka-dō, the way of flowers, flower arrangement; jū-dō, the way of wrestling or jū-jitsu; the way of the sword, kendō or fencing; the way of Arts, gei-dō; and finally, the way of the knights, bushi-dō, Japanese chivalry. Originally all of these were practised in Japan, but not in the manner of sports or arts or tricks. They were expressions of an inner spiritual attitude. In all these "ways" there lives one spirit and that is the spirit of Zen. . . . All of these "ways" have the same purpose: a unity of spirit and a unification of spirit with nature and with the universe. All of them presuppose mu-ga, the non-ego or the surrender of self. They attempt to confer on the practitioner a perfect inner harmony and peace of soul. (pp. 59-60)

As well as bushi-dō and cha-dō, Danshukai has danshu-dō or danshu-no-michi, the way of abstinence.* Dō and michi both mean "way", and so danshu-dō means the same as danshu-no-michi. Danshu-no-michi seems to be better accepted among Danshu members, because this word is included in the only official song of Zendanren (the national alliance of Danshukai).

Let me give some examples of danshu-dō or danshu-no-michi. First, some maxims were created under the name of danshu-dō. The author of the maxims was the first president of the association of Danshukai in Hokkaidō, the late Mr. Hiroshi Harada. He was a well-known advocate of danshu-dō, and named their newsletter "Danshu-dō," partly because this can be a pun between Hokkaidō and danshu-dō. He created Danshu-dō Jikkun "The Ten Warnings of Danshu-dō" and Danshu-dō Goshin "The Five Hearts of Danshu-dō." He also applied a well-known ten-stage growth model of Zen practice, "Ten Bulls" or "Ten Ox-herding Pictures," to Danshukai abstinence practice (Nara Wakakusa Danshukai, 2005). A second example is Danshu dōjō. Dōjō etymologically means the place (jō) of dō. The Danshu dōjō was established by Masataka Kojima, an alcoholic in a remote island in the Pacific Ocean, Hachijō-jima, in 1965, and was moved to Wakayama in 1969. Currently this dōjō is maintained by Zendanren as a peer-led therapeutic community for alcoholics, in an application of dō spirit. A third example is the fact that someDanshukai members call themselves danshu-ka. Ka means a person who practices dō spirit, such as sho-ka "a person practicing sho-dō" (calligraphy). A fourth example is Tokyo Danshu-shinsei-kai, in which everyDanshukai member is given a dan rank, according to the length of their membership: For example, if a member joined two years ago, he or she possesses the second dan. "The dan . . . ranking system is a Japanese mark of level, which is used in traditional fine arts and martial arts" (Wikipedia, n.d.), which are practiced with dō spirit. This Danshukai
Dan ranking system is found only in Tokyo as far as I know, and Danshukai is different from Japanese fine and martial arts in that it has a very non-hierarchical relationship between those of high and low ranks, partly because the rank signifies the length of the membership, but not the length of the continuous abstinence period. Although I have given these examples, I have to add that some Danshukai leaders are dissatisfied with danshu-dō, because this sort of idea seems very old-fashioned to them.

If continuing to discuss the dō spirit of Danshukai, we would face a more complicated term, seishin. Kobayashi (2005) stated that Kōchi-ken Danshu-shinsei-kai members had called the spirituality they felt toward President Matsumura's words and actions "Matsumura Seishin" (p. 3). A shortage of space in this paper does not allow me to discuss this interesting term any further, after referring to an anthropologic-linguistic analysis of the term (Wierzbicka, 1997, pp. 270-274) and a discussion of seishin in terms of Japanese social organisations (Moeran, 1984).

To sum up, there are a lot of commonalities between Zen practice and Danshukai practice. However, because many Danshukai members, like most Japanese, have little knowledge about Zen practice, it would be hard or impossible for researchers to find direct testimony from Danshukai members that would prove the relationship between Zen and Danshukai.

**Conclusion**

Richard Chenhall, an anthropologist who has studied Danshukai with me, has pointed out that many Danshukai studies have considered Danshukai in comparison with Alcoholics Anonymous only, and that more studies are needed to examine Danshukai's connection with traditional Japanese therapeutic methods such as Naikan therapy and Morita therapy (personal communication, 6 February 2011). Through this paper, I have shown that it would be useful for Danshukai researchers to pay more attention to Zen Buddhism, the dō spirit, and some Japanese religious forms.

I would like to conclude this paper by quoting an email from a veteran leader of Danshukai, who strongly supports danshu-dō:

I believe that more than half of the criticism of Danshukai and Zendoňren does not deserve any attention. If we were swayed [by that criticism], Danshukai would not be Danshukai anymore, and that would weaken Danshukai. Many doctors and scholars cannot understand Danshukai, because they are admirers of the US [culture or academics]. Such [doctors and scholars] criticise and give advice to Danshukai without understanding Danshukai. I wish Danshukai members were more confident in their activities. [However,] many of them are unfortunately feeble before authority figures, and they are confused [by the criticism of the doctors and scholars]. . . . We can say that Danshukai, many of whose members are Japanese, does not need any "Steps" [like the Twelve Steps of Alcoholics Anonymous]. Any culture has religious backgrounds. In Zen Buddhism, people are just sitting. In Jōdōshū [a Japanese Buddhist denomination], people are only chanting Namuamidabutsu, and in Nichirenshū [another Japanese Buddhist denomination], people are only chanting Nammyōhōrengēkyō. These people have no Steps, but
they are forever doing the same thing, and [by doing this,] they develop themselves. This is michi (dō). If this is applied to Danshukai, it is in the sense that we continuously talk about our experience. When you join Danshukai for the first time, you talk about your experience at the first meeting. After ten or twenty years, you still talk about your experience. This repetition is great. It is useless to discuss which is more sophisticated, this michi and Steps, because this is a cultural difference. . . . We are Japanese who want to stop drinking, and so we need to pay more attention to Japanese things. I strongly believe that if we have to practice abstinence, it is more important for us, the Japanese, to feel rather than to think, [to consider] practice rather than theories, and emotion rather than intellect. Many doctors and scholars have embarrassed us by chattering about “developed America,” without considering anything Japanese. (Hiromasa Takahashi, personal communication, 19 February 2011)

This passage tells us a lot about how we can develop research on Danshukai. Cultural studies on Danshukai could lead to very rich results, including new insights on indigenous social work (Gray, Coates, & Bird, 2008) and civil movements which stand up to medicalisation (Berghmans, de Jong, Tibben, & de Wert, 2009; Conrad, 2007).

Acknowledgements

Dr. Richard Chenhall encouraged me to finish this paper by sending a lot of suggestions through email and Skype. I am also indebted for their generously provided insights and experiences about the “New Life” model to many Danshukai leaders and members including Kōtarō Hagiwara, Tetsuo Kobayashi, Gen Ōtsuki, Hiromasa Takahashi, Kayoko Kobayashi, Yoshio Osate, Mamoru Araki, and Yoshio Shimada, and a very longtime Danshukai supporter, Takayuki Geshi. This research was conducted with a Grant-in-Aid for Scientific Research (C) # 19530513.

Footnotes

1. We have to notice that the term “recovery” is used in studies of mental health (Jacobson & Greenley, 2001) or bereavement (Tedeschi & Calhoun, 2008) differently from usage in the field of addiction.

2. Although “Danshukai” is not listed in Japanese-language dictionaries, it can be considered a common noun, not a proper noun. In my interview with a veteran leader of Danshukai on 2 October 2009, he revealed that a young bureaucrat in the central government had suggested that alcoholics' self-help groups should have a common name if they wanted to be supported by the government, and that Danshukai leaders accepted the suggestion. Zendanren (the national alliance of Danshukai) annually publishes two handy notebooks (“Abstinence Diary” and “Abstinence Pocketbook”), the 2011 versions of which include a list of about 570 Danshukai groups and associations. The great majority of their names were created by combination of the name of a district with “Danshukai”. For example, Edogawa Danshukai is a Danshukai working in Edogawa District of Tokyo. The second most popular type of name is comprised of the district.
name and "Danshu-shinsei-kai," such as Nagano Danshu-shinsei-kai. In the third most popular type, Danshu-tomo-no-kai is used instead of Danshukai. The etymology of -tomo-no-kai is a “group” [kai] of “friends” [tomo]. Danshu-tomo-no-kai was originally the name of the oldest and first self-help group for alcoholics in Japan, which once had a nationwide network (Chenhall & Oka, 2009; Kamihorinouchi, 1979). Danshu-tomo-no-kai was unaffiliated with Danshu-Shisei-kai groups belonging to Zendanren. However, some Danshukai left the alliance of Danshu-tomo-no-kai and joined the alliance of Danshu-shinsei-kai (Geshi, 1987). Although they cut the relations with the central office of Danshu-tomo-no-kai, they decided to keep their original names. On the other hand, we have to notice that many self-help groups that do not belong to Zendanren also call themselves Danshukai. The examples include groups belonging to Danshu-tomo-no-kai, and those which left Zendanren because of leadership conflicts. Zendanren has no intention to control the usage of the name "Danshukai."

3. This essay was written by Kobayashi as a response to my essay, which stressed the importance of the “New Life” model of Danshukai (Oka, 2010).

4. This English translation was printed in the annual report of 2008. However, it has never appeared since then. Because no English translations of the titles of “Danshu Shinsei Shishin” and “Danshukai Kikan” are given, I translated the titles only.

5. Some of my field informants pointed out a basic reason the book is not so popular: an indifference to the authority of the Kōchi-ken Danshu-shinsei-kai. The book was written by a great leader of the Kōchi-ken Danshu-shinsei-kai and the book includes many episodes about Harushige Matsumura, who was the first leader of Kōchi-ken Danshu-shinsei-kai and the first president of Zendanren, the national alliance of Danshukai. Unlike Alcoholics Anonymous, which was said to be started by Bill W. and Dr. Bob, most of Danshukai groups were not started by "Mr. Matsumura." When Mr. Matsumura began to organise the Danshukai alliance, there were already various voluntary groups for alcoholics that were independent from one other. This is important despite the fact that Zendanren was established and developed under the strong leadership of Kōchi-ken Danshu-shinsei-kai and that Kōchi had been the centre of the Danshukai movements in the beginning of the history of Zendanren.

6. The English word “experience” might be misleading. As Yuasa and Kasulis (1987, p. 49) wrote, “Japanese philosophers use two words for ‘experience,’ keiken and taiken, which correspond roughly to the German distinction between Erfahrung and Erlebnis. When the distinction seems most relevant, the translators have rendered taiken as ‘lived experience.’”

7. Coining “something-dō” is not unusual among Japanese. For example, Hashimoto (2007) introduced yakyū-dō, as the “way of baseball,” which is practiced by non-professional baseball players.

References


Journal of Substance Abuse Treatment, 15(1), 55-64.


Shimmitsu, S. (2009). Tōjisha no katari to tōjishasei no keisei: Danshukai kaiin no jiko henyō katei no bunseki


Appendix A


1. We must recognize that we are helpless against alcohol and we could do nothing all alone. [We must realize that we are helpless against alcohol and cannot do anything alone.]

2. We must be present at abstinent regular meetings and talk about ourselves frankly. [We must be present at
regular abstinence meetings and talk freely and frankly about ourselves.]
3. We must recall all experiences that we hurt persons when we drank, and admit our past faults. In addition, we must listen to our companions modestly and penetrate ourselves. [We must recall all experiences where we hurt people because of our drinking, and admit to our past faults. In addition, we must listen to our companions modestly and reach deep within ourselves.]
4. We must recognize that contacts with each character and spiritual relationship can lead abstaining to success, let us deepen between companions. [We must understand that contact with each person and a spiritual relationship can help us achieve abstinence, so let us deepen our relationship between companions.]
5. We must make every effort to change ourselves and plan our new lives.
6. We must make up for not only our families but also everyone we had annoyed. [We must make it up to not only our families but also everyone else who we annoyed in the course of our alcoholism.]
7. We must teach how pleasant abstaining is to people who are worried about alcoholic poisoning. [We must explain the satisfaction of practicing abstinence to people who are worried about alcohol poisoning.]

Appendix B

“Danshukai Kihan [Danshukai Rules]” translated into English by Danshukai (Zendanren, 2006). To make it more readable, I added my translation in brackets.
1. This association is a self-help group by alcoholics and for alcoholics, and also a group for citizens' activities. [This association is a self-help group by alcoholics and for alcoholics, and is also a group for citizens' activities.]
2. Whoever wants to give up drinking can join this association. [Whoever wishes to quit drinking is welcome into this association.]
3. It's a principle for every member of this association to give his/her name. [It is a principle for every member of this association to state his/her name.]
4. Members' activities are voluntary in principle.
5. We must be equal on all conditions and no ruler exists at abstinent regular meetings. [We must be equal on all conditions, and there should be no ruler at regular abstinence meetings.]
6. Abstinent regular meetings consist of members' personal experiences from beginning to end. [Regular abstinence meetings consist of members recounting personal experiences from beginning to end. Or, all talks in the regular abstinence meetings should be related to members' personal experiences.]
7. We attach importance to families' attendance at meetings.
8. This association must make a contribution to a society through not only consultations about alcoholic poisoning but activities for enlightenment. [This association must make a contribution to a society through not only consultations for alcohol poisoning but also activities for enlightenment.]
9. We must manage this association with membership fee. But we can get subsidies, contributions and so on with good intention. [We need to charge a membership fee in order to manage this association. But we can
obtain subsidies, contributions, and so on, with good intent.]

10. This association should not be taken advantage of for political, religious, and commercial activities.

Appendix C

Matsumura Goroku (Kōchiken Danshu-shinsei-kai Kyōsen-bu, 1983, pp. 1-4)

1. Let's not fail to attend a meeting.
2. We cannot stop drinking alone. Stop resistance that is of no consequence.
3. Our practice of abstinence will never be complete.
4. Stop drinking for today. Then, take it one day at a time.
5. Practice abstinence positively.
6. Attend a meeting with your spouse.
7. Talk seriously only about your experience of practicing abstinence in a two-hour meeting.
8. Discover your own way of practicing abstinence.
9. Put your abstinence first all the time.
10. Alcoholism is a disease of your mind and body.
11. Do not boost your religion or political party in a meeting.
12. An alcoholic's biggest enemy is not alcohol, but him/herself.
13. Self-conceit leads to failure.
14. If you fail, attend a meeting immediately.
15. Alcoholism is a disease that affects the entire family.
16. Danshukai is an organisation of alcoholics, by alcoholics, and for alcoholics.
17. An alcoholic has only two alternatives: taking alcohol to the grave or practicing abstinence in Danshukai.
18. Danshukai members are equal regardless of their abstinence period.
19. We respect you for your courage to join Danshukai while the majority of alcoholics are unconscious of their existence.
20. Danshukai members are more virtuous in some aspects than ordinary people.
21. You cannot drink in moderation, but you can practice abstinence.
22. Always remind yourself about your problem to avoid the danger of returning to drinking.
23. Your service to other alcoholics is a cause for your abstinence.
24. Reconfirm your abstinence by listening to other members' experiences.
25. Never drink, so that you obtain the cooperation of your family and colleagues.
27. Do not be tempted by that first glass of alcohol.
28. Be punctual.
29. Write encouraging letters to fellow alcoholics.
30. Make efforts to enlarge our national organisation.
31. There is no abstinence without severity.
32. Practice first.
33. Your abstinence must not depend on others but on self-help and self-reliance.
34. Do not abandon hope if you fail. Treat it as a stepping stone to success.
35. Beginners should not attend any drinking party. This is only a passive way of practicing abstinence.
36. Have the courage to identify yourself (to the public), and make it clear that you are a Danshukai member.
37. Acknowledge differences in characteristics of one other and learn from one another's experiences.
38. Talk about one another's faults and failures, and make efforts to relate to one another closely.
39. Don't make alcohol your master.
40. Be proud of being a Danshukai member.
42. Do not impose any conditions on your abstinence.
43. Never leave the last alcoholic alone.
44. Listen without argument.
45. One and a half years after joining Danshukai, take part in the management of Danshukai.
46. Please develop Danshukai by stepping over my corpse.
47. (Establish) one Danshukai in each prefecture.
48. A member should avoid any places that might lead to people misunderstanding the member's intention.
49. Carry out your original intention.
50. You and I share the same constitution. There is no other way to live than to practice abstinence.
断酒会の「新生モデル」について

岡 知史

要旨：本論文の目的は、酒害者の自助組織である断酒会の「新生モデル」について論じることである。断酒会の「新生モデル」は医療的な、あるいはスピリチュアルな「回復モデル」に代わるものとして、断酒会の結成当時は唯一利用可能なモデルとして断酒会メンバーによって使われていた。しかしアルコール依存症に対する医療サービスが充実するにつれて、医療的な「回復モデル」のほうが断酒会メンバーのなかでも支持されるようになってきた。結果として断酒会は自助組織としての可能性を十分に展開することが難しくなってきた。なぜなら、医療的な「回復モデル」を念頭におくとすれば、酒害者は断酒会の会員よりも医療専門職の援助を求めがちになるからである。このような事情から断酒会のリーダーは、自己の組織を自助組織として発展させるためには、彼らが当初からもっていた「新生モデル」の重要性についてさらに留意する必要がある。しかしながら「新生モデル」は未だ曖昧な部分があり、ソーシャルワークの研究者は、断酒会のリーダーが「新生モデル」についてさらに深く解明することを支援することによって、断酒会の発展に寄与することができるだろう。この論文では、まず上記に述べた二つのタイプの「回復モデル」について述べ、それに代わるものとしての「新生モデル」について述べる。特に「新生モデル」について二つの説を提示したい。ひとつは「新生モデル」には書かれたプログラムはないということ。もうひとつは「新生モデル」は禅の応用として理解可能であるということである。

キーワード：自助グループ、アルコール依存症、回復、禅、断酒会、「新生」モデル
Self-help groups for mental health, or mutual aid groups are voluntary associations of people who share a common desire to overcome mental illness or otherwise increase their level of cognitive or emotional wellbeing. Despite the different approaches, many of the psychosocial processes in the groups are the same. Self-help groups have had varying relationships with mental health professionals but generally is shown in research to provide additional support alongside mental health professionals. Due to