

Issue 5 December 2024 ISSN 2631-7583

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# Embodying Artistic Citizenship in Addiction Recovery Musical Contexts Kate Daly

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## **Abstract**

Arts Practice Research (APR) as a paradigm champions embodied data, investigating the felt, 'lived' experience of a phenomena. Experience shapes our perspective and understanding of reality (Gallagher & Zahavi 2007). The methodological frameworks of arts practice, autoethnography and storying are employed in my research to examine the 'what is it like' (Nagel 1974) feeling of singing in recovery. Key conceptual frameworks of 'addiction recovery' and 'artistic citizenship', are employed to introduce 'addiction recovery musical contexts', the ethnographic site of my research. Silverman and Elliott (2018) describe artistic citizenship as going beyond the individual expression of what it means to be a citizen and an artist, acknowledging our artistic responsibility towards the needs of the greater community. I investigate the embodied 'story' of singing in addiction recovery and locate how this impacts my facilitation of group singing sessions in this context. Through a reflexive-autoethnographic lens, I examine the 'auto'; my subjective experience singing in these spaces and interrogate how this is culturally linked.

## **Keywords**

Art practice research, embodiment, artistic citizenship, addiction recovery, recovery capital, storying.

## Introduction

Group singing is celebrated globally as an enactment of culture and community. Studies have shown the positive experience felt by participants engaging in singing together and how it connects us (Batt-Rawden & Andersen 2020; Battistelli 2019; Camlin, Daffern & Zeserson 2020; Fahey et al. 2022; Harrison 2019; Moss et al. 2018). It is an activity found to reduce anxiety and depression, boost confidence, self-esteem and offer a sense of self-control (Livesey et al. 2012). In group singing synchronicity can occur between people offering a physical and musical regulation or 'attunement', which refers to "the phenomenon of entrainment between nervous systems" (Battistelli 2019: 9).

Through an autoethnographic lens I examine the embodied feeling of singing within recovery musical contexts I facilitate. I have many roles within my arts practice: I am a singer, researcher, recovery participant and group singing facilitator. There is an inherent power dynamic to my 'insider' participant/researcher role and even with the best reflexive practice there is a potential "underbelly" to my research (Etherington 2004: 206). There is a responsibility representing a community who chose anonymity as I am sounding the voices "in the silent margins" (Phillips et al. 2018: 88), and it is important to state I do not speak for the recovery community as a whole.

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In this article I outline the conceptual frameworks I employ in my research and how they interplay with my research methodology, informing and shaping my work in recovery music-making contexts. A recovery continuum describes the time following treatment for an addiction, or time not in active addiction, acknowledging it is not a linear process from 'ailment' to 'cured'. It is maintaining abstinence from the substance or behaviour of addiction (where possible) and engaging in recovery-promoting behaviours, i.e., learning coping mechanisms to deal with triggers (Keane et al. 2014). For a successful recovery an individual goes through a transitionary time with the reparation and/or cultivation of self, relationships, cultural beliefs and dignity (Battistelli 2019). I propose that while a person is learning self-regulation and coping mechanisms addiction recovery musical spaces can offer cultural peer support, whether they identify as singers or not.

Whilst viewing artistic citizenship as meeting a social need in my community through my arts practice, I do not view it as solely utilitarian. It is affecting change both in the development of my artistry and social spaces within my community. As an artistic citizen I have rights and responsibilities in my role as a singing facilitator who is creating with others in a collaborative recovery community. I believe this to be the most ethical practice as I am challenged through autoethnography to 'zoom in' (Clandinin & Connelly 2004) on my own recovery and singing experience, and to 'zoom out' interrogating if, and how this is observable in a larger cultural context. By using the word 'embodiment' I am implying the 'felt' experience of acting as a citizen in a community and not the 'individual' expression of citizenship as it is predominantly known in our society (Silverman & Elliott 2018; Elliott et al. 2016). Rather, it is a social justice fulfilment, the uptake of my responsibility to a larger community need, whilst also meeting a personal one (Silverman & Elliott 2018).

In the following sections, I take an overarching look at my arts practice, documentation methods, conceptual frameworks and how these reciprocally influence my facilitation and research. Knowing there are external forces which the group spaces will be impacted by my first step as a facilitator is to examine what I bring into the space; my intentions, beliefs, values and embodied knowledge (Gallagher & Zahavi 2007). Recognising the impact research has had on my practice to date, my creative singing self is continuously responding to the concepts and activities of Arts Practice Research (APR). This investigative 'zooming in' allows me to articulate my experiences within the methodological and conceptual frameworks I discuss.



## **Conceptual Frameworks**

Two key frameworks employed in my research; 'addiction recovery' and 'artistic citizenship' will be explored further in this section. They offer a structural way of examining and presenting my experiential socio-cultural research. After outlining these concepts, I examine their interplay in the context of my research.

## **Addiction Recovery**

Addiction at a physical level can be described as pathways paved in the brain through repeated behaviours to stimulate the dopamine reward system (Reynolds & Zontou 2014). These behaviours are justified for self-fulfilment, resulting in substance misuse or compulsive behaviours (gambling, sex, social media etc.), which impact negatively on a person's life and relationships. The theory of addiction as a treatable disease was defined by the American Medical Association in 1956 (Battistelli 2019). The causes of addiction, or pre-determining factors, are many and with little specificity. The contestations are loud from the 'addiction is a choice' deviant-debate, to the residue of the 'say no to drugs!' political campaigns of the 1970's and 80's in America. The ignored claim of addiction's universality (Reynolds & Zontou 2014; Sloan 2024a) "compounds addiction and hinder recovery' (Sloan 2024a: 10). George Engel proposed the biopsychosocial treatment model in 1977, which considered biological, psychological and social factors (Skewes & Gonzalez 2013). Addiction recovery came to be:

[C]linical recovery (symptom remission), functional recovery (getting a job and coping with daily life demands), personal recovery (improvements in wellbeing and life satisfaction) and social recovery (developing strong and supportive social networks)

(Slade 2010, cited in Buckingham & Best 2016: 6).

Recovery from any trauma (acute or chronic) can be seen to take three stages; the first to establish immediate safety and reconnection with one's own body and support systems (family/friends/work), the second to deal with the traumatic material, and the third to reconnect with "ordinary life" (Herman 1992: 223). The person in recovery dealing with their trauma from addiction can seek catharsis through music, which falls outside the remit of my research. However, it is important to acknowledge there may be instances where this type of catharsis happens in the creative process of group singing. The first two stages of recovery need to be in place before engaging in singing



sessions, as Herman (1992) highlights how moving too quickly through the stages can interfere with recovery.

Singing and group singing can also pose challenges for participants. A study by Kreutz & Brünger (2012) on group singing shows how it can raise stress hormones in the body, particularly in performative settings, "there can be serious consequences of such negative experiences, such as social exclusion, mental and physical stress" (236). Hillary Moss (2020) also posits how music can do unintentional harm as well as good. Within my own music practice in recovery contexts, I ensure to have additional support in place for participants, e.g. leaflets on display for additional professional recovery support, and a facilitator of aftercare groups attends the sessions. I also have support in place for myself in my research, i.e. regular supervisor meetings and my own support network in recovery, who are aware of my research.

Effective group singing and cultural engagements lie in the third stage of recovery, as Herman (1992) outlines it as the time to reconnect with one's community. This is one of the main factors for my choosing to invite participants who are in addiction recovery for a minimum of one year to join my research singing groups. Time is one of the most important factors in establishing recovery. A community can offer support through recovery capital, a construct coined by Granfield and Cloud (1999). Recovery capital, developed from Bourdieu's concept of social capitalii, has four categories of resources to support an individual's "sustained recovery" (Stanojlović & Davidson 2020: 1). These are: social, physical, human and cultural (Cloud & Granfield 2008; Foley et al. 2021; Granfield & Cloud 1999; Keane et al. 2014; Reynolds & Zontou 2014). Cultural recovery capital looks outward to the community, seeking activities with others which can offer "a level of emotional stability, especially where family connections had become frayed due to drug and alcohol use" (Foley et al. 2021: 4). While a person is becoming accustomed to self-regulation and developing coping mechanisms, recovery musical spaces can support them as a cultural recovery capital resource, one where positive recovery behaviours can be mirrored (Best et al. 2016).

# Artistic Citizenship and Recovery

[A]rtistic citizenship is inclusive of, for us, *all* forms of music-making and *all* types of formal and informal musical interactions, [...] to act with a deep awareness of the powers that music has to move, bond, heal, empower, and motivate people to act with an *ethical commitment to communal well-being*.

(Silverman & Elliott 2018: 366)



Eurocentric dominance in the historic narrative has left an indelible mark on what musical excellence is presumed to be. The words 'artist' and 'artistic' have a residual 18<sup>th</sup> century 'art-for-arts-sake' notion and Western Classical connotation (Silverman & Elliott 2018). As an artist one decides to accept, perpetuate and/or challenge these learned ideals. Citizenship holds socio-political rights and responsibilities. Being a citizen is multidimensional, and one can have multiple citizenships. Elliott et al. (2016) highlight how it has come to represent selfhood and the 'individual' in a community, yet it carries inherent responsibilities, i.e., to be law-abiding. In essence, there are compulsory responsibilities we have as part of living socially. There are also additional responsibilities, such as volunteering, donations etc., where people can choose to take on further 'burdens' (Rawl 1997) for the communal 'greater good' (Elliott et al. 2016).

There is a call-to-action in artistic citizenship where: "physical, musical and emotional participaction is required" (Silverman and Elliott 2018: 373). To be an artistic citizen is to 'show up' for one's community. This meets a personal need - to 'act'. Being present with the intention of supporting each other fulfils a communal responsibility, which is particularly significant in recovery. It is the enactment of advocacy and rewriting the social contract with people who have felt 'othered' at some point in their addiction and/or addiction recovery story (Reynolds & Zontou 2014). They may feel dispossessed of their right to engage freely and publicly in society due to stigma (Reynolds & Zontou 2014). For me, being an artistic citizen is the feeling of sharing a positive cultural recovery story in a song, creating a social recovery space together. In the following section I will look at my arts practice research and how it is integrated with these conceptual frameworks.

## **Methodological Framework**

Robin Nelson (2013), leading scholar in Practice as Research (PaR), highlights how there is a constant dialogue between one's practice (know-how), critical reflection (know-what) and contextual readings, which situate the practice (know-that). As the PaR paradigm was developing, the very question of what constitutes knowledge was raised (Freeman 2010). Arts practice researchers were considered to be engaging in the process of "radical dis-location of ways of knowing" (Kershaw 2009: 107). Through a multi-modal approach, I employ arts practice, autoethnography and storying (Phillips et al. 2018). My creative practice of singing and group singing facilitation is the epistemological site of my research inquiry. Arts Practice Research (APR) and the 'creative output' (as termed in the Irish World Academy of Music and Dance where I



conduct my research) view the practice itself *in action* as data producing and/or the transmission of the data from the practice and reflection. The documentation accompanying the creative outputs can serve an academic and creative purpose reciprocally:

[E]thnographic writing and writing as a generative strand of creative practice [...] weaves its way into both the artistic process and the reflexive framework of research.

(Phelan & Nunan 2018: 4-5)

#### **Arts Practice**

In my arts practice I champion the community music principle where the process of music making is prioritized over the product (Bartleet & Higgins 2018; Camlin 2014; Higgins 2012; Veblen & Olsson 2002). The success of the group singing efforts is not measured solely by a standardised, cumulative performance. Rather, the quality of the experience is measured by the participant's sense of engagement through feelings of agency and reciprocity in the process of music-making (Higgins & Campbell 2010). Henley and Higgins (2020) question what excellence looks like in inclusive spaces, how we measure it, addressing our values, power relations and how this impacts facilitation. Through a community music lens, I support the view of performance and participation as existing on a spectrum (Camlin 2014; Turino 2008). My arts practice research falls at the nexus of community music and community music therapy. Whilst therapeutic outcomes are probable in the sessions I facilitate; my goal is not a therapeutic one. Instead, I seek to engage in a creative relationship, one of peers supporting each other musically and culturally in recovery.

My current singing practice is sharing songs from pre-composed/known repertoire: as solo songs, rounds, and short harmony songs in 2/3/4 parts in varied genres and styles. When sharing songs in social recovery spaces, I choose those that are potentially familiar, i.e. folk songs in the English language. I offer lyric sheets and accompany the singing, where appropriate, with chords on the piano or singing harmony. In these spaces, I try not to 'teach' songs, preferring to invite participants to share a song/poem/suggestion if they would like or join in the chorus/or a call-and-response song. Often, it is a co-facilitated space, which I feel dilutes the hierarchical nature of one facilitator. I am both a singer and facilitator in this space, inviting songs and supporting the singing without any expectation on participants to sing. I do this to alleviate potential anxiety for participants of 'having to perform', preferring the space to be a musicking<sup>iii</sup> one. Invitations are always extended, and those who take the creative risk are supported and encouraged.



#### Autoethnography

Autoethnography is described as storying the 'self', which is then culturally linked to one's larger societal context (Adams et al. 2014; Chang 2008; Freeman 2010; Holman Jones et al. 2015; Wall 2006). Personal experience as primary data expands my understanding of social phenomena (Holman Jones et al. 2015). According to Gallagher: "Regulation of body chemistry is not autonomous from cognitive processes, and vice versa" (2017: 109), meaning perception is affected and/or biased by the environment around us: socially, physically, and psychologically. When looking at activities such as singing, particularly in recovery settings, there is the need to acknowledge the body's part in responding to the activity, providing insights into how these encounters can have positive and/or negative impact on a person. I am choosing to tell a deeply personal story to serve my research inquiry; Chang (2008) highlights the need for sensitivity when applying autoethnography; to avoid criticisms of self-indulgence or narcissism.

Decision-making in my research is guided by ethical principles outlined in Etherington (2004): fidelity, autonomy, beneficence, non-maleficence, justice and self-respect. To practice ethically, I also engage in reflexive practice, which Etherington describes as:

[A]n ability to notice our responses to the world around us, other people and events, and to use that knowledge to inform our actions, communications and understandings. To be reflexive we need to be aware of our personal responses and to be able to make choices about how to use them. We also need to be aware of the personal, social and cultural contexts in which we live and work and to understand how these impact on the ways we interpret our world.

(Etherington 2004: 19)

Intuitive responses within sessions are captured through 'reflection-in-action' and 'reflection-on action'. "*Reflection-in-action* is concerned with practicing critically [...] whilst they are in the thick of it [...], which is deeply embedded in practice" (Bartleet & Higgins 2018: 9) (authors italics). *Reflection-on action* "occurs after the community music activity has taken place" (Bartleet & Higgins 2018: 10). Through journalling, I reflect on my approaches and responses to delivering songs and facilitating song gatherings. Beginning my journals with free writing, I revisit the data for memory recall (Clandinin & Connelly 2004), focusing on a significant moment and zooming in again to garner more detail from the experience. This informs my storying.



### Storying

Phillips et al. (2018) describe storying as: "inquiry, as theorising, as sharing/presenting research" (5). Storying is familiar, something we do, aiding in connecting and situating ourselves. It provides a medium of communication for people at the margins and acknowledges that the individual story is "not meant to stand for all" (Phillips et al. 2018: 63). In storying, I am piecing together many fragments of my story, looking at how it relates to "broader social, cultural and political events and thinking" (2018: 82). Gallagher and Zahavi examine how our storied selves exist publicly in pre-existing social narratives and paradigms:

Who we are depends upon the story we (and others) tell about ourselves. [...] one cannot be a self on one's own, but only together with others, as part of a linguistic community. This narrative connection [...] provides a framework for understanding others.

(Bruner 2002, cited in Gallagher & Zahavi 2008: 201)

Combining felt experience and voicing our body's stories, we are "emplaced and embodied in lived stories regardless of time" (Phillips et al. 2018: 61). Our bodies are epistemic; we hold data in our movements, expressions and senses (Battistelli 2019; Shusterman 2008). Embodiment is somatic, kinaesthetic (Gallagher 2017; Gallagher & Zahavi 2007), and intuitive (Bannerman 2006). An element of my research is focusing on how our bodies hold stories (Phillips et al. 2018), which we tell ourselves cyclically, forming our reality. Through creative spaces new imaginings can interrupt or enhance this narrative, creating new perspectives to see ourselves in new ways (Shusterman 2008).

#### Artist Researcher, Recovering Citizen

My praxis acts as "a mirror to my culturally inscribed body [...] a living enactment of [my] culture and social beliefs" (Cancienne and Snowber 2003: 243- 244). Piecing together storied fragments (Phillips et al. 2018) of embodied knowing, I examine them through the prism of the methodological, conceptual and contextual frameworks I employ. In the development of my research, my firsthand experience was the reason for creating spaces to share with others who are in recovery in my community. For many years I remained 'anonymous' in my recovery, self-imposed silence due to embodied stigma and fear of being thought 'less than' or having 'failed' at life. Through singing and facilitation, I can authentically engage as an artistic citizen, challenging my perception and role in my arts practice. Through creative connection, there is the potential to generate collective responsibility by 'showing up' for one another (Elliott et al. 2016). Participants can feel part of a 'visible' recovery community, "creating bridges to non-stigmatized and non-excluded groups" (Best et al. 2015: 196).

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From my research journals, I have noted how each time I perform in recovery musical spaces, I feel calm, with no rush of adrenaline from the feeling I am about to perform. I have always felt a sense of anxiety when singing in stage-performance environs due to a self-imposed expectation of high technical and aesthetic prowess. This expectation, I believe, was shaped by my 'classical' pedagogical influences and learned values. I challenge these now through awareness, reflexivity and questioning how these feelings serve me and my art practice. I am cognizant of the potential for participants to have a similar feeling and perception of their musical ability. Their prior musical experience, along with their expectations in space, can impact significantly on how they engage and how I facilitate. In spaces specifically for people affected by addiction, group singing presents nuanced benefits and challenges. I engage as a singing facilitator who has previous vocal training and performative experience. This background has created challenges for me as the notion of what is artistic, or deemed of value is conditioned, viewed through a prism of taught values and beliefs. I have had to unlearn or re-evaluate their purpose in my singing in each context. In recovery settings, singing connects me with others. Excellence begins to mean something different when the invitation is extended beyond participants with previous musical experiences to those who may be new to singing or, like me, returning to singing and overcoming performance anxiety in recovery. Taking part can be the most rewarding part and feel excellent. In a song I wrote recently, the lyrics highlight for me how sharing in these spaces carries with it a sense of vulnerability, yet it has supported my own creativity and recovery:

Look into my eyes and see
I'll be there to share my truth,
Will you do the same for me,
When I lose my voice
Revealing what fears been hiding?

# **Addiction Recovery Musical Contexts**

Addiction recovery musical contexts (both physical and conceptual) are ethnographic sites where I am developing my research. Here, I combine my own reflexivity and influences from the previously mentioned methodological and contextual frameworks. Recovery musical contexts, as I perceive and develop them, are music-making spaces with participants who are on a recovery continuum. The invitation is extended to their families, as addiction is commonly seen as a family disease, affecting those close to the person in addiction (Best et al. 2016). I participate as a singer. Also, I (co-)facilitate the space as a socio-cultural one; people can join to listen, play an instrument, recite



poetry, sing a solo or join in the group song/chorus/activity. This context is for music-making, which supports recovery and is not focused on performance, but more an invitation to take part. The relationship I am establishing in the groups is creative and peer-supported. It is not that of a music therapist or counsellor. This is important as the musical 'toolkit' is similar to a music therapist<sup>iv</sup>, but the goals and relationships of the group are defined differently. I seek to create a community space which is a safe cultural-capital-promoting space where healing and therapeutic outcomes are possible, and probable. Yet, the intention is one of a creative experience together, enhancing connection through our shared healing journeys.

As a facilitator I consider the interpersonal and intrapersonal "responsibilities, roles, rights, resources, relationships" (Stanojlović & Davidson 2020) in the group. Factoring in the potential nuanced needs of individuals in recovery can support them to "exercise full citizenship [...] ending social marginalization" (6). The parameters of the group music-making and social encounters can be outlined by each group together and are subjective to those contributing to the group, thus allowing for the establishment of trust and reciprocity (Higgins & Campbell 2010). 'Check-in' is an activity we engage in at the beginning of each session, inviting each person to share their first name and how their week has been, if they would like to. Similarly, 'Check-out' is asking participants if they would like to share after the music-making activities. Checking in and checking out are both community music and recovery activities and a time for people to reflect and share observations with fellow participants. It is recovery practice that people do not engage in conversation with the person speaking; other participants listen and do not 'cross-share' - meaning, they do not give advice or comment on what another person has said. The way of engagement is through identification and witnessing of their experience.

David Best (2016) posits the need for visible recovery communities, to attract people to the life of recovery who may be in active addiction. At present our communities are sites where addiction is perpetuated (Sloan 2024a). For myself, I have taken on the role of an advocate, sharing my recovery identity publicly. This is done with the hope of reducing stigma meta-narratives and encouraging more people in recovery to come together as a community for social gatherings. The narrative of addiction is slowly changing from one of a personal failure to a person needing new coping mechanisms to deal with life on life's terms (Reynolds & Zontou 2014). As a singer and group singing facilitator in recovery, I am engaging in a "new social contract" (Stanojlović & Davidson 2020: 6) with my community, which not only supports my musical career but also promotes my

recovery journey. It has created a positive knock-on effect as I become more present as an artistic citizen in my larger community. Many participants invited into the addiction recovery musicmaking space do not have musical backgrounds or previous experience. However, they are engaging in the sessions to support their recovery, exploring new social music-making opportunities and/or community settings. Each person's agency is considered, ensuring they are invited to engage in a way that feels most comfortable.

In the field of addiction studies recovery is seen as a social process:

[W]e need to move away from the view that it is simply an individualised personal journey and see it instead as a socially embedded process of successful social identity transition. (Best et al. 2016: 120)

Peer support is a crucial factor in sustained recovery and is described as "non-clinical assistance by persons with lived experience of similar conditions" (Stanojlović & Davidson 2020: 2). There are several Irish examples of peer recovery groups in the arts; from sober sessions to theatre (RADE 2024) and singing groups (Waterford High Hopes Choir 2024). In the UK, significant strides have been made to highlight publicly the many artistic endeavours of the recovery community, notably in the *Performing Recovery* magazine (Sloan 2024b). There is a shared creative story of successful cultural engagement with recovery-specific groups in dance, choir, recovery arts cafés, orchestras, and theatre. SOLACE, a participatory intervention for people in recovery by the Brighton-based New Note Orchestra, highlights how participants feel the activity of collective music-making and cultural engagements generates a connection with a community which supports their recovery, impacting positively on their well-being and confidence in public (Gleeson & Tomlinson 2019).

Addiction recovery music-making contexts are a call-to-action; "consider moving people – musically and emotionally – towards action for social change, social justice, peace and reconciliation and resistance to oppression" (Silverman & Elliott 2018: 373). Engaging with participants in this space puts "musicking to work' for transformative sociopolitical change" (2018: 369). The social meta-narrative surrounding addiction does not account for the individual's experience of residual prejudice and stigma whilst in successful recovery. There is a common thread in the dominant story, how it "becomes the truth" and has the "potential for greater distribution" (Phillips et al. 2018: 81). The addiction narrative is self-perpetuating. The onus is on the recoveree to bear this embodied social judgment, irrespective of its impact on well-being, individually and/or communally (Reynolds & Zontou 2014). Successful reconciliation and healing



occur under a veil of anonymity. Through working with others in the musical space and by researching our shared experience, participants can become:

(guardian[s] of the collective story [...] consider carefully the position of the silent, unnamed author and place myself in their shoes and ask, 'would I want this story in the public eye?' and if so, 'what do I want to have heard?'

(Phillips et al. 2018: 69).

Through our shared experience, we construct our 'story' (Phillips et al. 2018), our shared reality within the time/space and plains of the cultural space. When we unveil our recovery with peers, a new story is written together, one of healing and hope.

## **Conclusion**

Through engaging in singing, in and for my community, I am enacting my artistic citizenship. I wish to be an agent of change and aid others and myself in recovery in these cultural and social spaces. Vulnerability has the capacity to isolate, yet when shared in a group one trusts, it connects us. New possibilities unveil themselves through creativity in recovery. Through APR, I begin with inward reflection. The 'auto' in autoethnography has brought me to see how conceptual frameworks can offer support for what sometimes feels like dissident ideas in my research. The perspectives I embody offer potential data for transformation and new insights, and these bring new awareness to my singing and facilitation practice, a symbiotic process.

Inviting people in recovery to come to recovery musical spaces is not just the act of showing up for one another, it is a defiance of stigma, self-imposed or otherwise. Each person has a right as a citizen to explore their creative humanity and vulnerability. It is also important to fulfil our responsibilities to our communities to participate meaningfully in examining what cultural spaces we provide; are they diverse to accommodate and include people who may feel like they are on the margins of a community? We can create these spaces to include ourselves and participants needing alternative socio-cultural spaces. If met in community activities, recovery capital has the potential to be a resource for a person in sustaining their recovery. By not defining what is possible through a narrow and well-worn path of measurement, we can plough new pathways in our brains, changing narratives which do not serve us. Forming meaningful connections in our communities through singing and music can lead to more visible and sustainable recovery communities. These can be a beacon for people in active addiction to see the possibility of an alternative reality.



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<sup>&</sup>lt;sup>1</sup> Many addiction treatment models include 'Anonymous' talk therapy groups: Alcoholics Anonymous, Gambling Anonymous etc. In reality these groups are a confidential space. The practice of anonymity/confidentiality extends past the group, in a recovery practice where most people do not reveal their recovery identity in their public lives.

ii "[S]ocial capital is the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalised relationships of mutual acquaintance and recognition, or in other words, to membership in a group." (Bourdieu 1986, cited in Keane et al. 2014: 19).

iii Christopher Small's notion of 'musicking' (1998), changes music from a noun to a verb - an action, and inclusive of people taking part in all aspects; the playing/singing of music, active listening and organising the music events. It emphasises the social dimension of music-making.

<sup>&</sup>lt;sup>iv</sup> Songs from known repertoire are sung together in sessions with/without accompaniment, activities such as creating soundscapes and songwriting are used by community musicians and music therapists alike. In both contexts music can be seen to work on many levels "as an end in itself (intrinsic) and a good for a secondary purpose (instrumental)" (Wood & Ansdell 2018: 463).