EXPANDING RESTORATIVE JUSTICE AND ITS RELATIONSHIP TO ADOLESCENT SUBSTANCE RECOVERY

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ABSTRACT

Youth who are struggling with substance abuse issues and criminal behavior related to their addiction often times find themselves isolated and estranged from their families, peers, and communities. For this study sample participants, once deciding to extricate themselves from a life of drugs and crime, these youth must attempt to reintegrate back into the families and communities they left behind or abandoned, whether by choice or not, while using illicit drugs and involved in delinquent and criminal behavior. Successful reintegration, as well as successful treatment outcomes seems to be attached to a combination of Alcoholics Anonymous 12 Steps and restorative justice precepts, specifically the encounter and amends process. This essay examined the accounts of seven youth who were seeking sobriety and recovery in an in-patient drug treatment facility. Each discovered that an apology for harm and pain caused, an acceptance of this apology, and forgiveness for past transgressions by parents, family, significant others and the community at large were factors that aided their ability to maintain their sobriety. Each also found that parental involvement and support was not only a catalyst for successful treatment outcomes, but also for successful reintegration back into the family, school, and community.

For adolescents entering residential treatment, their involvement in drugs and crime are life-marking events. These life marking events are associated with crime and addiction and serve to underscore how others see them and how they come to see themselves. Any attempt for the study participant's to extricate themselves from illicit drugs and crime and to regain their sobriety requires successful treatment programming and reintegration to their families and community.

These are relatively young individuals whose ages range from 14 to 18 years of age, and whose substance abuse and addiction as well as their criminal behavior have negatively impacted parents, family, and friends, as well as the wider community and society. These youths' substance abuse recovery efforts recognize a need to move away from their "Vida Loca" (Moore 1978). Restorative justice suggests a move toward a new person with a visible new path, a "mantra" for maintaining sobriety (Van Ness & Strong 2000; Braithwaite 2001). For their recovery and assumption of a new life and a place in larger society, community and family networks, traditional drug abuse psycho-social treatment is not enough. This essay serves to provide some insight into options and actions these youth need to consider and take to extricate themselves from their lives with drugs. Moreover, this essay focuses on The Alcoholics Anonymous (AA) 12 Steps and questions of family involvement and support among young drug users who have entered a private drug treatment facility.

Adolescent drug use and abuse and the concomitants that are associated with these behaviors such as crime, delinguency, isolation, separation and estrangement from peers, family, and society has been a growing concern for those who study youth and drug use. Study participant's who want to extricate themselves from substance use and abuse and begin a life of sobriety face a number of struggles due to their lack of maturity. Because of the study participant's age and youth they are unable to comprehend the magnitude of addiction and the recovery process. Central to these efforts are the relationships and reactions of these troubled youths' family and personal friendships. This essay focuses on youths who are seeking to return to families, friends, community and larger society in order to resume their lives. The need to extricate oneself from seemingly unavoidable relationships, contexts and consequences related to drug and crime arise for youths seeking drug abuse treatment. But their current sphere of action and influence provide little meaningful examples, paths, or means to end their existing social networks and enter a world without drugs and crime.

This program consisted of detoxification, in-patient individual and group counseling and the AA 12 Steps. Family support was held to be central to their recovery. Frequently, additional concerns arise to impede youth completion of treatment programs. For many, additional attention is needed to address and facilitate the problems of reintegration.

In this essay, I will examine how combining the treatment process and dealing with issues of family involvement may be helpful to youth who made a decision to live sober and productive lives. Three questions quided this exploratory study. First, for those youth who want to be extricated from a life of drug use and crime, what are the factors that improve their chances for completing treatment? Second, how are youth incorporating AA 12 Steps? Third, how does family support affect the sobriety and recovery in the lives of adolescent substance users and abusers? Prior to describing the study and the design and methods of the analysis addressed in this essay, I will explore the literature that quides restorative justice precepts and its relationship to AA.

CATALYST FOR ADOLESCENT SOBRIETY

In 2001, Youth and Society presented a special issue that focused research that addressed adolescent substance abuse in relation to principles and practices of restorative justice. Throughout the special issue, the definition or explanation of restorative justice was explored. There has been debate concerning the definition of restorative justice (Zehr & Mika 1998; Burnside & Baker 1994: Morris 1994: Sullivan & Tifft 2001). Some proponents of restorative justice see it as an acknowledgment of harm done, an apology for it, and forgiveness offered as being central to one's personal healing. Restorative justice also sees the need for some efforts that re-establishes one's relationship with the family and communities that have been impacted by the youths' lives with drugs and crime (Tavuchis 1991).

Stripped to its basics, restorative justice involves the identification and reparation of harms experienced by victims; obligation on the part of the offender to repair harms; and a process involving victims, offenders, and communities (Shenk & Zehr 2001). In Braithwaite's (2001) article, restorative justice is explained as a set of social processes. Typically, in restorative justice processes, stakeholders sit in a circle and discuss how to ultimately restore the victimized, the victimizer, and the community following an injustice. Restorative justice then may be characterized as a process whereby all the stakeholders affected by an injustice have an opportunity to discuss its consequences and what needs to be done to right the wrong

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(Braithwaite 2001).

Sullivan and Tifft (2001) also speak of 'making things right' which occurs when the victim, offender, and community attempt to heal from the harm or hurt.

An essential part of the healing process is the public acknowledgment by the community at large of what has taken place, an acknowledgment that something has been ruptured and is in need of repair. If this process of repair is to have any meaning for those directly involved, at the very least it will require that we encourage those who have been harmed to tell us about their pain and suffering in their own terms. That is, they must be able to share with us how their lives have been affected by the harm, how they continue to be affected, and what their expanded needs are.

The Center for Justice and Reconciliation defines restorative justice as a systematic response to wrongdoing that emphasizes healing the wounds of victims, offenders and communities caused or revealed by the criminal behavior. It further posits that restorative justice programs are characterized by four key values: 1) **Encounter**, which

creates opportunities for victims, offenders, and community members who want to do so to meet to discuss the crime and aftermath.

2) Amends, which "expects offenders to take steps to repair the harm they have caused"; 3) **Reintegration**, which "seeks to restore victims and offenders as whole, contributing members of society"; and 4) **Inclusion**, which "provides opportunities for parties with a stake in a specific crime to participate in its resolution".

Participants in the restorative justice program seek forgiveness for harm caused to the victims, forgiveness for themselves and forgiveness *from* the community as well. They recognized harm had been done to many they had encountered during their short lives. Relationships were going to have to be repaired if they were to move forward with their lives and their recovery.

Recognition by a substance abuser of the injustices caused by stealing from friends and family, lying, or other untrustworthy behavior is often the kind of recognition of injustice that motivates change through restorative processes. (Braithwaite 2001)

Participant interviews reveal that the completion of the encounter and amends stages were the catalyst for their sobriety. Yet, there was little on how this may be related to youth in drug abuse treatment. Serendipitously, the facility's reliance on AA 12 Steps and family involvement allowed exploration of this central question.

DESIGN/METHOD

To answer the questions posed by my research – a) what are the factors that help youth successfully extricate themselves from their addictive and criminal environment, and b) what effect does the AA 12 Steps and family involvement in youths treatment have on youth's completion of treatment and return to their family and community, first, I had to examine the youth's accounts of their extrication from a life of drug use and crime. I sought to identify the factors that improve their chances for program completion. And, second, I wanted to explore the ways that family involvement affected these adolescent substance abusers recovery efforts.

To uncover this information, I observed and interviewed youths seeking treatment in a local, nationally acclaimed private drug treatment facility. The facility afforded the opportunity to explore youth seeking treatment that included AA principles and practices and soliciting family involvement and support.

The researcher approached the director of the Light House Drug Treatment Facility and fully explained the research goals and objectives and requested permission to conduct a study at the adolescent facility. Approval was based on permission from the parents of the participants and from the facility residents as well. After explaining and detailing the purpose of the study and my role in the study (and at the treatment facility) the parents and treatment participants and staff agreed unanimously to participate in the study. I assured them that I would follow human subject research guidelines such as confidentiality, safeguarding records, anonymity, and their ability to end study participation without warning. Each parent and participant signed a permission slip (approved by the IRB) and it was agreed that those who were not part of the research study were not to be made aware of my identity. The thought behind this was that the youth participants would act more natural and forthcoming if they thought the researcher was part of the treatment team. If the researcher was to encounter, interact, or gain privileged information in regards to one of the residents who was not a study participant then the parent was to be contacted and the parent and resident were to be made aware of my role and the study.

I conducted an ethnographic exploratory investigation into the experiences of these youth and the Light House drug abuse treatment program. Additionally, I delved into their interactions and relationships with family, friends, and community. First, I conducted extensive personal interviews with each subject utilizing a life history approach. The life history information consisted of eight openended questions that related to their extrication efforts. Additionally, I participated in group sessions and interviews with counselors and their families.

Throughout a 12-month period the researcher conducted follow-up interviews with each youth, some occurring during treatment and some after treatment. The researcher spent no less than 1 time per week at the inpatient facility and no more than 3 times per week. Creating a qualitative element to the study, I spent hours socializing with the participants, and observing them at the treatment center. I also conducted interviews with various counselors, administrators, and family members to determine their views of the treatment, and, secondarily to assess the trustworthiness of the participants' accounts (Bogdan & Biklen 1982).

Many study subjects were in their last 30 days of a nine month, residential, inpatient treatment program. My initial contact with study subjects began three months before they exited the residential treatment program. Utilizing opened-ended questions, I focused on the youth's background, drug use career, family and peer relationships, and criminal behaviors. After having the interview tapes transcribed, coded, and analyzed, I explored the accounts for synthesizing concepts and patterns. These patterns emerged after listening again to the tapes, continuing to observe and interact with the participants, and sifting and sorting to make a match between categories (Fetterman 1998). I examined each of the participant's cases for completion of treatment program and familial involvement.

Several themes emerged from the life case summaries. Following the initial sorting, coding and memoing the researcher identified many themes. Determining the core themes the researcher decided to

give priority to topics on which a substantial amount of data has been collected and which a recurrent or underlying pattern of activities in the setting under study. (Emerson, Fretz & Shaw 1995)

One theme is the making of amends in treatment and upon their return to their families and communities. This occurred for youth in their group sessions, especially as they became involved with AA 12 steps. Additionally, this correspondingly paralleled some family involvement and support activities. From interviews, participant observations, and access to group/family session notes, we sought to explore the importance of two key AA steps: the seeking of amends by those harmed by the addiction and criminal behavior of these youths; and the perception of these two steps in their treatment and subsequent sobriety.

In obtaining these interviews and observing the study subjects in group sessions, I decided to further explore the relationship between the Twelve Steps program and the youths' sobriety. After spending many hours with the residents, therapists, and administration of the facility, this essay focused on one treatment cohort. The treatment cohort consisted of seven teenage participants: two Euro-American males; one African-American male; one Jordanian-American male; two Euro-American females; and one American-Indian female.

The treatment facility also incorporated the 12-Step traditions and philosophy into their facilities treatment efforts. The Light House treatment services included individual, family, and group therapy sessions which addressed the behavioral, emotional and mental health needs of the residents. And following the 12-Step's traditions, each resident received drug related treatment, which included AA group meetings and the assignment of a sponsor. The individually assigned sponsor was to serve as a support system and provide guidance and encouragement to those new to sobriety. The Light House treatment program was centered on AA and the 12-Step traditions. Even though there has

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been much debate in regards to the effectiveness of the 12-Steps (DeSena 2003; Trimpey 1996; Peele & Bufe 2000) and particularly in relations to youth (Schwebel & Zaslaw 2002) the facility views AA's 12-Steps, and family involvement as being prominent in the youth's substance abuse recovery. In general, this treatment facility has had mixed treatment results. The program posited that participants who completed the treatment program, followed AA's 12-Steps and sought their family's involvement improved their chance of sobriety and recovery.

The following study subjects' accounts will serve to reflect those youth who were able to complete the facility's program, in contrast to those who were not able to complete the program and relapsed. These accounts will serve to highlight the need for attention to the mechanism for how youth "work the AA's 12-Steps" and how family involvement influences youth treatment completion. The data presented in these accounts also will serve to profile youth who relapsed in contrast to youth who completed their drug abuse treatment program. The following study subjects accounts may indicate possible benefits of the Twelve Steps and issues of family involvement. The significance of these issues in the youths' treatment and pursuit of sobriety are reflected in the following individual accounts and life summaries.

In this section I will describe the issues that emerge from completion of drug treatment, the role of AA 12 Steps and the family involvement requirements of the drug abuse treatment facility. These accounts reflect the questions about the AA 12 Steps requirements and family involvement that I observed, collected from interviews and received from group notes. These are condensed summaries of the larger accounts. As an exploratory study this allows me to focus on key issues that emerged from my observations, life histories and reviews of group notes and administration reports. I will now turn to those Ss who relapsed and were unable to complete treatment and maintain sobriety. Next, I will turn to those who completed treatment and through the study's data gathering process maintained their sobriety.

THREE WHO RELAPSE

All study subjects completed the Light House inpatient drug treatment six month regiment. Those who relapsed were not able to complete the next phase or solicit their families' involvement and support. The following information describes the situation of the three study subjects who relapsed.

Melinda

Melinda was 14 years old when we first met her. Her mother and father were never married. Her mother, a full blood Navajo, never knew her own parents and grew up in the foster care system. Eventually, she was adopted by a white family during her early teen years. Her father was an alcoholic who was of mixed racial ancestry: Cherokee, German, Filipino, and Guatemalan. Melinda never knew or met her biological father. When Melinda was 10, her mother married a man who became Melinda's adoptive father. Her mother and adoptive father would eventually have another child. Melinda's mother and father eventually divorced, and she and her brother remained with their mother after the divorce. Her adoptive father is a recovering alcoholic. Since the divorce her mother has battled depression. It was not uncommon for her mother to close herself off in her room for 2 to 3 days at a time. When this occurred Melinda would contact her maternal grandmother to come over and meet the needs of her and her younger brother.

Melinda's mother was upset with her being placed in drug treatment. She expressed to Melinda her disappointment, feelings of betrayal and sadness related to her drug addiction and subsequent long-term drug treatment. Melinda's mother visited her only once during her stay, spoke to her by phone only once a week, and wrote only twice during her six month stay at the treatment facility. Her adoptive father was a regular at the facility. He attended weekly family counseling sessions, participated with group counseling sessions, as well as AA meetings provided at the facility.

I remember waiting for my parents to come and see me while I was in treatment. I wanted to catch up on what was happening in the neighborhood and with the rest of the family, especially my little brother. My step father had no problem coming but my mother pretty much refused to come...She always made excuses of why she couldn't come... She came once and stayed less than an hour. She wouldn't come to family counsel-

ing sessions.

This was normal behavior for her mother because she did not want her daughter to go to drug treatment. Her father was very supportive perhaps because of his involvement with the 12 Steps program and his numerous years of sobriety and successful recovery experience. Melinda had grown estranged from her stepfather even though this was the only father she knew. She blamed him for the family demise, the depression of her mother, and to a lesser extent for her role in her drug use.

I started to use when my father left...I had no one to talk to, I felt alone...He knew that my mother's depression prevented her from being there for me and my brother.

Family therapy sessions were the designated time for treatment participants and their parents and other family members to discuss how their drug addiction affected the family and them personally. Melinda commented that her stepfather was too quick to forgive, and she did not feel that it was legitimate.

When I was telling him how sorry I was and the things I had done behind his back, he kept nodding his head back and forth and smiling. As soon as I was finished, he said he understood and said he forgave me.

Melinda asserted that he should have shown more emotion and asked questions about why she began to use and abuse drugs.

It was as if I had told him I broke a coffee mug...I was telling him I stole money from him and mom, broke into the neighbor's house and stole jewelry, and stole from stores in the mall...All while I was telling him this, he kept that stupid smile on his face...He never asked why I was doing it.

Melinda was hurt about the lack of her mother's presence during her treatment.

I wish she would have come so I could have told her I was sorry for hurting her ...My father would say that she was disappointed in me and couldn't believe that I embarrassed her and the family by being a drug addict. That really hurt me. I wanted her to come here so she could see I was really trying to make changes. By her not coming, I was never able to apologize to her. I tried to in a letter once, but it just didn't sound right, plus I wanted to tell her to her face. If she just would have come, I could have told her [sorry].

Further, Melinda was also unsuccessful in getting others she had harmed to come to the facility. She commented that she had made her list of persons to make amends to, but her father felt that it was not necessary to involve all of them. He also felt that it would be more appropriate to do so by letter or phone.

I really wanted to meet face-to-face with the people I hurt. My father stopped that. Everyone else here [at the facility] asked their family and neighbors to come. I asked why, and they said they wanted them to see how much they changed and that they also thought it would be easier to do it with other people there...I told my father and he still wouldn't approve it. After he said no, I didn't want to send out letters...I wanted to see my family and friends even if it meant me apologizing.

Melinda commented that facility residents shared that they were relieved once they attempted to make amends to those harmed.

They all said that it was cool to see people you stole from and lied to smile and say things were okay and they weren't mad at you anymore. The only person that said that to me was my father, and I don't think he meant it...He was just glad I was in treatment.

Melinda ran away from the facility during her sixth month of treatment. She walked away one night with nothing but the clothes on her back. After six months of not hearing from her, her family as well as the treatment center expected the worse. According to the Light House facility case workers, her parents notified several state and federal authorities that she was missing, but to date no one has heard from her. Authorities believe she may be dead.

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Ali

When we first met Ali, he was a 17 year old male. Ali and his family moved to the United States from Jordan when he was 4 years old. Ali's parents became financially successful in America owning bakeries, restaurants, and a dry cleaners. This success allowed Ali to live in the comforts of the suburbs and in some ways distance himself from the stigma of being from the Middle East. Ali encountered drugs in the 9th grade; and to his own admission, he enjoyed the escape the drugs provided. Illicit drug use and partying were his way of being like the other American youth. Race issues and discrimination would eventually confront Ali and he did not know how to respond. He would turn to drugs to comfort him. Peers who once called him derogatory names introduce him to drugs. He admitted to using the following drugs: acid, cocaine, crank, crystal methane, and crack cocaine.

Ali's parents were in denial and disbelief when they discovered his drug problem. His stealing from family members was frequent due to his addiction to crack cocaine. After he robbed his parents and an uncle, they filed charges in an attempt to recoup their losses from their insurance. The charges led to Ali's being tried and sentenced. He was placed in state custody and sentenced to drug treatment. His criminal behavior against his family led him into drug treatment.

My mother, father, brother, and sister started out coming here [the rehab facility] for the family counseling. After two sessions, my father, brother, and sister made excuses as to why they couldn't come anymore. I would call them the day before to make sure they were coming, and they would tell me 'yeah,' but they wouldn't show. My mother said my father was ashamed of me. No one in the family had ever had a child with a drug problem or who stole from their parents or aunts and uncles.

Ali's father remained attached to the customs and ways of the Jordanian people. Drug addiction and stealing were foreign to him. He thought that shaming and rejecting Ali would change his son's behavior. He was also embarrassed that he was the first one in the family that had a child imitate negative American behavior.

My father said one time that I was acting like Americans...Stealing, lying, and drugs are common with American kids. You are the first one that I know of from our country that has become so American. You want to be an American so bad that you pick all the bad things that Americans do.

Ali's mother was his rock. She visited weekly regardless of the opinion of her husband and children. She oftentimes attended family counseling sessions alone and promised to work on the other family members to attend the upcoming week. She believed that Ali was trying to change and wanted to support his efforts.

My mother said she believed that I wanted to change and she didn't believe I would steal from them again. I just wish my father, brother, and sister felt the same way... When I visited on a weekend pass, I heard my father, brother, and sister reminding each other that I was home and to hide their money and jewelry...I approached them, telling them that I heard them, and they just said it was the truth...They didn't believe I was trying to change.

This experience hurt Ali, and he stated when he returned to the facility that he probably would not go on any more weekend passes for a while. Ali feels that his attempts to make amends to his family were not going well. In a family counseling session he shared that his family continue to see him as a drug addict and a criminal and that no amount of evidence or proof would change their minds about him.

During one of the family counseling sessions, I tried to explain that the person that stole from them while addicted to drugs don't exist anymore...I told them that I am over my drug problem, and I am the son and brother they knew before drugs. But I could tell things would never be the same. They said they didn't know me anymore...They have difficulty believing me, trusting me, and wanting to be around me. This hurt me. I became upset and started crying and started yelling at them about being stupid and closed minded...After that session, all four never showed up together again. They wouldn't accept me again no matter what I did.

Ali's mother continued to try and get the family to return. She understood that counseling sessions were to help Ali as well as the family as a whole. She convinced his aunt and uncle from whom he had stole from to come to a family session. Ali had written them numerous times and sought their forgiveness for breaking into their home and stealing from them.

I couldn't believe mom got them to come. They just showed up, she didn't tell me they were coming. That was the most difficult thing I ever had to do. They were trying to understand my drug problem and how it related to me breaking in their house, but I don't think they ever got it. They both kept asking me why did I do it? What did they do to deserve such treatment? They said that they don't know if they will ever have me over to their house again...Before they left, I kept telling them I was sorry and that I would make it up to them when I got out. I planned to work for my father in the bakery and repay them all...No one believed me.

Ali's relationship with his family deteriorated more during his stay but he completed the treatment program. His mother remained a strong supporter and believed in him but his father and siblings slowly separated from him.

When I started back taking the weekend passes and went home, my father, brother, and sister had little to do with me. They avoided me when possible...Even while at home, I tried to approach them about my past behavior, but they just ignored me or played like they were too busy to talk to me ...I knew then they would never forget what I had done to them and the family and that no amount of apologizing or explaining would change anything.

Ali was committed to AA and the 12 steps when he left treatment. However, again, the lure of women and the promises of fast money attracted Ali back into drugs and drug sales. Ali was caught and sentenced to prison. His family, even his mother, refused to visit him during his subsequent incarceration.

Anthony

Anthony is an 18 year-old African-American male. His mother and father, who were

never married, had four other children besides Anthony. Anthony's parents relationship was unstable at most. The father oftentimes left their home for weeks and months on end. Anthony speculated that he had other women and maybe even another family. Both Anthony's father and mother seldom worked. but together they managed to get by and provide a decent home and lifestyle for the family. It was when his mother and father decided to permanently end their relationship that Anthony and his family began to experience economic and family hardship. His mother lost their home and moved into lowincome housing. Not only did his mother acquire a drug habit during this time but so did two older siblings. Anthony learned quickly about drugs and drug dealing from his family and the community. At 17, Anthony's drugand-alcohol-related felony convictions led him into treatment.

Anthony was placed in the custody of the state due to his criminal behavior. Like his mother, Anthony was in denial about his addiction. They both felt that his behavior, both criminal and drug induced was similar to that demonstrated by the youth in their community. Anthony dropped out of high school and never was employed. He eventually recognized his drug dependence and need to make changes. His mother would sporadically attend family counseling sessions. Occasionally, she visited him, especially when she was pressured by Anthony to come. His grandmother came once, and his two siblings visited him three times.

I always tried to get my mother and my brothers and sisters to come see me. They kinda always blew me off. They always laughed about me being in drug treatment and would say stuff like 'if I hadn't got caught stealing I would still be getting high'. I never knew how much of a drug problem I had until I came in here and couldn't get any...I smoked weed everyday, used crack on weekends, and drank almost everyday too...This is what all my friends done everyday.

Anthony shared that when he made comments to his mother about his drug use and hers' she oftentimes became upset. He was aware that his mother drank more than she should and got high on occasion. When he would share information from the treatment center with her, she would react negatively.

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I remember once she said, 'Boy you the one in treatment. Don't try and tell us how to live ...You wouldn't be saying nothing if you hadn't got caught. In fact, you would be high right now.' The sad thing is she was telling the truth.

Anthony oftentimes admitted to counselors that he was afraid of going home and seeing his friends and family. They were not supportive of his decision to become sober. They thought he was going through the motions until he got out, and then he would resume his old behavior following treatment.

I remember my mother and brother saying at one of my weekend passes, 'We don't want to hear about that drug treatment stuff ...Did they brainwash you or something? You at home with family now, nobody is judging you...If you want to drink a little or get high that's on you. We ain't going to stop you.'

This carefree approach to his treatment was even more evident at his graduation party from the drug treatment program when his family served food, alcohol and illicit drugs to welcome him home.

Anthony's mother and siblings always made excuses for not visiting him while in treatment. His two older brothers stated that they would feel like hypocrites for participating in his treatment because they were using, selling, or both. His younger two siblings stated that they left the facility feeling depressed for him and they did not like talking about their feelings. Anthony was able to experience the encounter and amends stages with family members he felt he had harmed. He thought they went too easy on him.

I don't think my family took my apology serious...They were laughing and wouldn't look at me when I was trying to explain to them the reason why I needed to talk to them in person...The only one who got it was grandma. She asked questions and told me she believed me when I said I was sorry and that I wouldn't steal from her again. My mother, brothers, and sisters kept saying stuff like you're putting on an act to get out of here. They didn't think I was serious or for real.

Anthony asserted that his apologies and attempts to seek forgiveness went in vain. His mother, who had been struggling with addiction for a number of years, was no stranger to the 12 Steps program. More than the others in the family, she was aware of what Anthony was doing. Part of her agreement to keep coming for visits was for him to stop the amends process of his treatment. She informed Anthony that his apologies and attempts to seek forgiveness were getting tiresome and it was making the family uncomfortable. She also requested that he stop trying to convert them and to leave all that he had learned while in treatment at the doorstep of the facility while on weekend passes. She also refused to contact others on his amends list. She stated that this was his treatment and it was not necessary to inconvenience others.

Anthony graduated from the center, and the counselors had high hopes for his recovery. Going back home and into a neighborhood that condones underage drinking and drug use, Anthony was able to maintain his sobriety for only one month. Anthony was arrested for drug trafficking and numerous other charges six months after leaving drug abuse treatment. For these offenses, he was sentenced to 15 years in state prison.

The study subjects' accounts of those who relapsed were most similar in their discussions of their inability to get their families to participate and invest in their treatment and recovery process. They felt their families did not fully support them in their efforts to achieve sobriety. Further they related their parents unwillingness to come to the treatment facility and involve themselves in their treatment. The encounter and amends stages of the treatment were not fully developed or explored due to the lack of attendance and participation of their families. We now will turn to four study subjects who completed treatment and maintained their sobriety.

FOUR WHO REMAINED SOBER

Like the three participants who relapsed, the four who completed all phases of the treatment program and whose families' involvement complied with the program requisite of families involvement indicated that they, too, encountered similar obstacles to those who relapsed. Unlike those who relapsed, these study subjects recounted that their families involvement were positive and sustaining.

Here we see that in these study subjects the AA's 12 Steps, particularly Steps 8, and 9 were keys to their completing the Light House treatment program. Treatment program participants developed plans to address those that they had harmed, and seeking encounters to make amends to them. Subsequently, as their families engaged with their treatment process, these youth were afforded opportunities to make amends. For these youths, the amends process was acknowledged and the family reciprocated by providing support for their completing treatment and in some instances in their return to home and friends. Their individual accounts reveal that the acceptance, forgiveness and support of the people they harmed by their addiction and criminal behavior made the recovery process less difficult.

Jessica

Jessica was a 15 year-old female when we first met her. A Euro-American, she was one of two children born to her mother and father. Her father, who worked in the oil fields. died of a heart attack when she was 11. Her father was also an alcoholic and served time in prison. Her mother worked in the banking industry and would later remarry a man who had three children of his own. According to Jessica, this blended family experience led her to alcohol and drug use. She credits her father's death and her unhappiness with her mother's new marriage as the catalyst for her experimentation with alcohol and eventual use of crank, acid, ecstasy, PCP, and crack cocaine.

Her mother would eventually divorce her second husband. This did not change Jessica's destructive behavior. Jessica had overdosed twice on drugs and suffered blackouts during her drinking binges. She was gang raped by eight adult men who were later arrested for having sex with a minor. This treatment center was her third attempt at sobriety. Her mother and family members agreed that they would fully participate in her treatment this time. They would avail themselves of whatever requirements that would benefit Jessica in her treatment.

My mother came to see me without fail. I could set my watch by her. The staff said

that she deserves a medal for her efforts in my treatment...She'd driven over 50 miles one way weekly to come to the family and group therapy sessions...She said that her love for me grew more while I was in treatment...We really got a chance to talk and get to really know each other during the counseling sessions...It surprised me when she said she wanted me to quit using, but if this treatment didn't work, she would find me another...She wasn't mad like she usually was when she talked about me relapsing. I think she finally understood that I was really trying, and I wanted to stop using.

Jessica's mother was able to convince her younger brother and other family members to come to the encounter and amends meetings. Over the course of her treatment her mother was able to get two adult neighbors and three of her high school friends to come to a meeting.

After I apologized to my mother the others were easy. My neighbors said they knew that I was the one who broke into their homes and they accepted my apology...They said the reason why they came so far to see me is that they wanted me to know they forgave me and there wasn't any hard feelings...My friends were just as cool. We kind of laughed a lot during my apology. They all said they knew I was stealing from them, and they knew of my drug and alcohol problems so they chalked it up to that. They said that the person they knew wouldn't have been stealing and trading sex for drugs if they were not hooked. Like my neighbors they said we were still cool and they couldn't wait until I came home. I was so relieved from all of their responses. Even the people I wrote and apologized to, some of them wrote back and said everything was cool.

Jessica graduated from the treatment facility and was able to get back into school and continue with her education. Her story was so compelling that the school district allowed her to conduct "speak outs" regarding the dangers of drug use. She quickly became recognized by the school district and the community for her willingness to speak to children and youth about the effects of drugs. Jessica speaks fondly of her return back home once discharged from treatment.

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My mother and family arranged a party for me, inviting all my old friends. She made it like a picnic so people could come and go...! was able to talk to some of the people that I had written to and told them in person that I was sorry...Their just being there meant a lot...My friends, family and the whole town accepted me back.

John

John a Euro-American male was 18 at the time we met him. He experienced numerous tragedies and deaths in his short life. His mother died when he was six. He then went to live with a grandmother who died shortly after he was placed with her. He later stayed with a grandfather who was too old and unhealthy to care for him properly. Given his grandfather's health status, he was only able to keep John for a short while. John eventually met his grandmother's next door neighbor who would become his legal guardian.

Throughout his teen years John had runins with the criminal justice system. He was an admitted gang member and was entrenched in the life that went with it. He was arrested for destruction of public property, car theft, assault and battery, theft, and petty larceny. His convictions led him to drug treatment. When I encountered John, he was undergoing his third attempt at sobriety through drug treatment. Like his other attempts, this one was court ordered. John's legal guardian supported him through his troubles with gangs, drugs, and the criminal justice system. John admits that his guardian's commitment to him probably saved his life as well as led to his recovery.

I remember him coming to visit me while I was in treatment...He would always ask, how I was doing, and if the center was meeting my needs...I asked him 'What if I said no?' He looked at me and said that we would start over and find you a new treatment center...He was like that, always more concerned about me than I was about myself. He came to the treatment center two times a week directly from work, hungry, tired and most times not feeling good. He always supported and encouraged me. I'll never forget that.

John sought former gang members, past neighbors and extended family members

that he had harmed when he made his list of persons to make amends. He was not successful in contacting a great number of the gang members but to those he was able to locate he wrote long letters expressing his life change. In these letters and subsequent discussions he expressed his new found religious convictions, and the regret he felt about his past behavior. He located a few gang member friends of his through the state corrections department. He wrote to them and asked for forgiveness for leading them into criminal behavior. He admitted that oftentimes he was the instigator of most of the gang's criminal behavior and episodes. He received two letters back from former gang members. Besides catching up with old times, they wrote back that there were no hard feelings and that they had been in contact with some of the others gang members whom they told about his letters. Furthermore, they sent word back that they were not upset with him and all was forgiven.

John's legal guardian delivered a message from two neighbors from whom he had stolen and who indicated that they wished him well in treatment and that they were no longer upset with him. According to John, he was hesitant at first in regards to the acceptance by those he had harmed by either his addiction issues or his criminal behavior. His legal guardian had notified friends, family and community members by formal announcement of his graduation, his return home, and his future plans. John stated laughingly that some of the people who received notices sent gifts as if he was graduating from high school or college. He was very pleased by the reception of his church. and Christian community regarding to his recovery progress.

On weekend passes, I would attend church and the minister would call me up for special prayer...After church, so many people would come up and say they were praying for me and that God had already forgiven me. All these people who knew of my past, were supporting me and saying they believed in me. I knew I couldn't go back to drugs and disappoint so many people.

However, John had a few set backs after returning home, but he refrained from using drugs. His faith was tested when he discovered his fiancée had become pregnant by another man. During that time, the same people that supported him during his treatment were there for that traumatic experience as well. John dropped out of college and worked odd jobs to earn a living. Today, his legal guardian continues to support his efforts in all walks of his life and especially in his recovery.

Mick

At the time of the interview Mick was an 18 year-old Euro-American male. He was the younger of two boys born to working class parents. Mick's mother and father were not strangers to substance use and abuse. His father was a heavy drinker with a bad temper. It was not uncommon for him to unleash his anger on Mick and his brother as well as on their mother. Mick started using drugs when he was 12, usually getting the drugs from his father's "stash." Mick eventually joined a gang and began a life of crime. Mick was arrested for robbery, breaking and entering, drug sales, and drug possession. He dropped out of school during his 10th grade year. Due to failure to comply with treatment rules, he was suspended from the juvenile facility and transferred to the adult inpatient program. There he learned to take his treatment and recovery seriously. Mick admits that he was not taking his treatment seriously when he was at the juvenile treatment facility.

Those young kids were making me crazy... The reasons they were using drugs were stupid to me...No one likes me, I was trying to fit in, I wanted to be popular. They were making me mad every time they opened their stupid mouths. I couldn't take the treatment seriously because I couldn't take the residents seriously.

Mick admitted he was afraid to go to the adult treatment center as young as he was. The adult facility administrator shared that he would be the youngest by far at the facility and questioned his decision to transfer and succeed. Unbeknownst to the administrator was the fact that, if Mick had been expelled from the treatment center, he would have to go back to court and face criminal charges. He had escaped adult sentencing from his charges by agreeing to drug treatment.

Mick expounded on how the encounter and amends process aided his sobriety and re-

covery.

The best thing that could have happened to me was going to treatment with the grownups. They were serious about the steps and doing all of them right. I was able to see how to really make amends to people you did stuff to...These people were crying for forgiveness from their wives and husbands, their kids, and other family...I used to think you would only make amends to people you really did bad...Man they had such long list. They were apologizing to everybody.

Mick admitted that after observing the degree to which the adults went to make amends, he decided to do the same.

I had a long conversation with my father talking about how we used to fight and how I disrespected him...We would go at it, and I always got the upper hand because he was always drunk. I would attack him with all my might. Sometimes he would bleed, get black eyes, and bruises...I apologized to him for not treating him like my father ... Because he had been in recovery before and in 12 steps, he knew what I was doing...He also apologized for the hurt he caused me and the family. After that, I called up so many people. It felt good to tell the truth after all this time...Some accepted the apology and others told me to go to hell. I figure they will get over it eventually.

Mick had the support of all those he considered important to his life. His probation officer had taken a strong interest in his life and sobriety and arranged for him to enroll in a junior college. Mick shared that he had to also make things right with his probation officer as well. He admitted to criminal behavior that he was not sentenced for and that he was suspended from the treatment center due to a failed drug test.

That was hard to do because he had such hope for me...I didn't want him to find out after the fact. I think I owed him that for all he was doing for me...He said he was proud of me for telling him the truth and he accepted my apology.

Mick realized that most of the people he harmed were willing to accept his request

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for forgiveness, but they also expected sincere changes from him.

One time at a family dinner when I was on a weekend pass, they all said that they were going to forget and forgive one time; and if I started using and stealing again, they were going to kill me...I know they won't kill me but I knew they were trying to say they didn't want to go through this again...I really hurt them.

Mick and his family were able to build a stable and supportive relationship with one another. They were all participating in a 12 step program and frequently attended AA/NA (Narcotics Anonymous) meetings. Mick has been able to remain sober and refrain from further criminal behavior. He maintains a job and continues to strive for a college education. He was released from court appointed supervision and moved in with his grandmother.

Lisa

When we first met Lisa, a Euro-American female, she was 16 years-old. She was the oldest of three girls. Her mother and father abused drugs: heroin was their drug of choice. Her father, also an alcoholic, was very abusive, oftentimes beating the mother in front of Lisa and her younger sisters. They would sometimes have to move into a battered women's shelter due to the severity of the beatings and death threats inflicted by her father. The beatings and drug use alerted child protective services. Lisa and her sisters were placed in the custody of the state and assigned to foster care. Her mother and father eventually separated, largely due to both being sentenced to prison for selling drugs. Lisa started using drugs at the age of 11. Her first high came from sniffing gasoline. She moved on to harder drugs, eventually ending in drug treatment after a near heroin overdose. Lisa recounted that she had a tragic upbringing. She was an active gang member, had been raped, and had endured three abortions. She recounted that her drug use and abuse as being closely associated with these life-marking events.

My mother and sisters would come see me on a regular basis, especially my mother. She was trying to get an understanding of why all of us were drug addicts. My two

sisters use drugs like I do and have been in outpatient drug centers. Our whole family is drug addicts. It was not until one of the family sessions that I really realized it...One day here, I was able to talk with my father about how his beating mom and us and his drug using hurt our family...But I couldn't all the way blame him because I was sort of responsible too. That was my best family session. I was able to tell him and mom I was sorry and they apologized to me too. I was so scared to tell him to his face how mad I was at him for destroying our family and probably me and my sisters...We can't go back in time, but I think him and mom ruined our family.

Also, Lisa was able to get other family members to come to the facility to visit. She admitted to thinking that all the adults in her family blamed her mother and father for her own addiction.

During the family sessions, my grandparents, aunts, and uncles would say stuff like they didn't blame us for using drugs and that our mom and dad probably drove us to use...Even when I was apologizing to them for what I had done to myself due to drugs and to them while using they just overlooked it and continued to say that they weren't mad at me and it was my parents fault.

Lisa felt that her family sincerely accepted her apology as well as forgave her. On her weekend passes, they would make certain to visit her, make sure she did not need anything, and made themselves available to her.

My family was never really close, but after those meetings at the treatment center, we had actually became closer...We never said we loved each, kissed each other when we were leaving, hugged or none of that...I think it was because for the first time, all the family got to get stuff off their chest and it made us like each other more.

Lisa was also successful in getting a few friends and their parents to come to one meeting. At the meeting she shared that she cared about their friendship and discussed her inappropriate behavior towards them.

Most of my friends' parents thought they were bringing them to help me with my treat-

ment, and they were surprised when I told them about the things I did to them...One of the parents was shocked when I told her I was the one who had stolen her diamond ring...My friends didn't know how much I had lied to them and stole from them; their mouths dropped when I started telling them what I had done...Before they left, I asked, 'Are we still friends?' and they said yes and the parents said I would be welcome back in their homes.

Lisa went back to public school once she was discharged from the treatment center. Concerned about her returning cravings for drugs she moved into a half-way house. Eventually, she quit school and decided to work. She remains sober and attends AA/NA meetings weekly.

John, Mick, Jessica, and Lisa were able to have face-to-face encounters and to make amends to persons that they viewed as important in their lives. Parents, grandparents, siblings, and other extended family members of those who remain sober were willing to come to the facility at least once to address how the youths' drug and/or alcohol addiction and criminal behavior had affected them. All four recount to being surprised how those meetings impacted their lives and their decisions to become sober. Each discussed the hurt and pain they had caused, the feelings of quilt and shame arising from their group sessions re-counts, and later the feelings of selfishness for their past actions and behaviors. All four also reached out beyond family and sought forgiveness from friends, peers, and neighbors. The persuasion of parents and legal guardians convinced some neighbors to come to the facility and sit through an encounter and amends session. In these sessions they could see for themselves the changes in the lives of these study subjects. These efforts made the transition from the treatment center back to the community or neighborhood less stressful for these substance abusing youth.

CONCLUSIONS AND RECOMMENDATIONS

Although "successful graduates" of the drug treatment program have sought the forgiveness of the people that they harmed, after they formally apologized for their wrongdoings, they also expected to return as full members of their respective families, communities, and society. Participant interviews reveal that the completion of the encounter and amends stages were the catalyst for their sobriety. For most, this was the first time they had to confront their parents, siblings, extended family members and the community at large for their past behavior. During these steps, all they had harmed were invited to come to the rehabilitation facility and address the results (injustices) or their experiences while the youth was under the influence of drugs and alcohol.

Restorative justice principles guided the healing of the research participant's and the people they harmed. Public acknowledgment that the families and friends of the research participant's were harmed and affected by their criminal and drug abusing behavior were the first step in rebuilding and restoring these youths. Communicating their injustices and apologizing and seeking forgiveness were acts that seemed to cleanse the research participants. The agreement by all harmed to meet and address their pain and suffering related to the research participant's criminal and drug abusing behavior seemed to re-connect them with parents, family, and peers.

All research participants had to come face-to-face with their parents, siblings and other extended family members, and close friends who they had harmed. These faceto-face encounters were conducted in family aroup settings under the direction of the House of Light treatment staff. The research participants had to meet with those they had harmed and ask forgiveness. The victim or person harmed was able to express clearly how they were harmed and the impact of the injustice affected their lives. During the family group session an amends was agreed upon and they discussed how to move forward as a family or how to restore damaged relationships with peers and neighbors. The majority of the research participants offered to make reparations or pay restitution for material losses that they were responsible for which was the result of their theft or damage and destruction. The parents, family members, and friends of the research participants asserted that they were satisfied with their apology and that they forgave them, and more importantly, wanted to restore their relationships. The forgiveness seemed to be easier to give the research participants due to their current sobriety and promises to continue with AA, the 12-Steps, and aftercare treatment services.

It became evident that for all these youth the working of AA 12 Steps, relationships with their families and some efforts to making amends were posited as being keys to maintaining one's sobriety. The subsequent sobriety for those who were able to remain sober was attributed to their being more successful in managing their new identities and status vis-à-vis their parents, siblings, and friends. Success was also more likely when amends were made and those amends were accepted. The three that failed to maintain their sobriety recounted that they were not able to secure their families' involvement and support regarding their treatment. This may suggest to those in the study that failed that family support is one of several important factors determining successful recovery. During the admission process, all families were made to understand by the facility treatment team the importance of their role and their participation in the treatment of their children. Melinda, Ali, and Anthony were aware of the philosophy of the facility on "working the 12 steps" and the view of how critical the amends process was to their success. After making their list of those to make amends to, they were unable to convince the people on their lists to fully participate or take the process seriously.

These three were told, influenced, or persuaded by parents or other family members not to pursue all those they had harmed, hurt or treated unjust. Their families cited embarrassment, family shame, and the old adage 'let sleeping dogs lie' when the subject of approaching family and neighbors arose to address their past behavior. Even when the families were made aware of the possible benefit to their child's amends efforts, the family members remained steadfast in objecting to the face-to-face meetings or the passing on letters outlining their past injustice to other family members, neighbors, or friends. These three were not able or willing to complete all phases of the Light House treatment regimen.

Those who were able to remain "clean and sober" were able to get support from family, friends and the community. According to John, Mick, Jessica, and Lisa, they were able to pick up their lives with little or no problem after leaving treatment; this was evidenced by their return home. Each recounted that they believe the reason for such support once arriving home was due to the work their parents or legal guardian performed while they were in treatment. Their parents were active in their treatment. Also, they took the suggestions and recommendations of the facility seriously. When the facility hinted that a supportive home and community were indicators of successful recovery, they made certain that once their children were discharged from treatment, they would help in meeting obstacles and challenges that may cause setbacks or relapse. Those parents made certain the school, neighbors, and others deemed necessary to know were aware of the study subjects return.

Those who relapsed did not build a strong relationship with the sponsor they were assigned while in treatment. The sponsors made themselves available day or night to the residents and offered support and guidance during recovery. The three that relapsed were initially apprehensive about the sponsors or mentors and had difficulty developing a relationship. Ali, Melinda, and Anthony had difficulty communicating with their sponsors and the center staff attributed it to cultural differences because the sponsors were white. Jessica, Lisa, Mick, and John credited their sponsors from the center as being influential in their decision not to use. They mentioned their sponsors when discussing people they would hurt or cause pain if they relapsed.

Strong support and faith in the recovery from those closest to these adolescents were recounted as significant factors in determining a successful treatment and maintenance of their sobriety. The successful study subjects hold that this can only occur if parents, family, peers, and the community of adolescent substance abusers accept the apology for the past harm and pain caused by the addict; forgive the abuser; and recognize the need for the study subjects' attempts to make things right or make reparation. From the parent to significant community members, the accounts also underscore the importance of the communities' reaction to the study subjects' amends, redress, and actions. In all these accounts, the youth's passage through the criminal justice and drug treatment system was held as a way to seek out communal and societal approbations to making amends and changes for their previous involvement with drugs and crime.

In the case of the seven study subjects, the community at large was involved with the injustices of the participants by way of the court system, law enforcement, and drug treatment. The parents and families of those harmed by the drug addiction and criminal behavior were satisfied that the "community system" was involved as a remedy and as an agency of social control. Restorative justice principles and the 12 Steps program complement each other in that they see the need for societal involvement in achieving sobriety and recovery. The amends and encounter process of both the AA and restorative justice programs were key to getting community and societal involvement in helping reintegrate these youths. The result of making amends is the receipt of forgiveness from those harmed by their careers in drug use and abuse.

Although these observations were drawn from a small number of study subjects, these accounts allow for development of synthesizing concepts and patterns that need to be pursued in future studies. Do these concepts apply to youth whose drug involvement are short term or of longer duration? Do these concepts apply to specialized drug using types and patterns (inhalant users, crack users, meth users)? Do these patterns arise in youth in state run youth detention institutions? While the essay's findings are tentative and limited by sample size, the study subjects accounts provide rich and important data that future studies need to consider and explore.

REFERENCES

- Bogdan R. & S. Biklen. 1982. Qualitative Research for Education: An Introduction to Theory and Methods. Boston, MA: Allyn and Bacon.
- Braithwaite J. 2001. Restorative justice and a new criminal law of substance abuse. *Youth & Society* 33:27-248.
- Burnside J. & N. Baker. 1994. *Relational Justice: Repairing the Breach*. Winchester, UK: Waterside Press.
- DeSena J. 2003. Overcoming Your Alcohol, Drug & Recovery Habits. Tucson, AZ: See Sharp Press.
- Emerson R., R. Fretz, & L. Shaw. 1995. Writing Ethnographic Fieldnotes. Chicago: U Chicago Press.
- Fetterman D. 1998. *Ethnography (2nd ed.)*. Thousand Oaks, CA: Sage Publications.
- Moore J.W. 1978. *Homeboys*. Philadelphia, PA: Temple U Press.
- Morris R. 1994. A Practical Path to Restorative

Justice. Toronto: Rittenhouse.

- Peele S. & C. Bufe. 2000. Resisting 12-step coercion: how to fight forced participation in AA, NA, or 12 step treatment. *Contemporary Drug Problems* 27 669-675.
- Schwebel R. & J. Zaslaw. 2002. Substance abuse treatment and restorative justice practices. *Perspectives* 26 20-24.
- Shenk B.T. & H. Zehr. 2001. Restorative justice and substance abuse: the path ahead. *Youth & Society* 33 314-328.
- Sullivan D. & L. Tifft. 2001. Restorative Justice: Healing the Foundations of our Everyday Lives. Monsey, NY: Willow Tree Press.

Free Inquiry In Creative Sociology

- Tavuchis N. 1991. Mea Culpa: The Sociology of Apology and Reconciliation. Stanford, CA: Stanford U Press.
- Trimpey J. 1996. Rational Recovery: The New Cure for Substance Addiction. NY: Pocket Press.
- Van Ness D.W. & K. Heetderks Strong. 2000. *Restoring Justice* (2nd ed,). Cincinnati, OH: Anderson.
- Zehr H. & H. Mika. 1998. Fundamental concepts of restorative justice. *Contemporary Justice Review* 1 47-55.

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