

Review of: "Philosophy as a Way of Life as a Pathway to Recovery for Addicted Individuals"

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Very interesting paper, and fascinating topic! Below are some suggestions to improve the paper.

Rewrite abstract, because now, it takes a long while until I figured out what this paper was about (is it about motivation? Self-deception? LBT? Philosophy?), suggestion:

In this essay I present a case study demonstrating how philosophy as a way of life can support recovery from addiction. In this case study, a client received logic-based therapy (LBT), of which philosophy of life was a part to tackle unlogic thoughts. Philosophy of life sees philosophy as a practical skill to handle life problems. In the case study the client was advised to apply the moral philosophy of Friedrich Nietzsche's *amor fati*—embracing one's fate—as an uplifting philosophical framework to counteract his unproductive worldview and fallacious thinking, which caused his relapses. Philosophy as a way of life can be a compelling, and legitimate recovery pathway for individuals in addiction recovery, as one of many recovery pathways. Considering that there is an ostensibly low efficacy rate for the treatment of addiction, articulating the value of philosophy as a way of life as a recovery pathway provides a conceptual and methodological framework for the development of novel philosophically-based addiction treatment and recovery-oriented programs—thus expanding the treatment and recovery options available for those seeking recovery from addiction.

- Revise the title, I had to read it three times before I understood. Maybe put 'philosophy as a way of life' between ' ' . 'Philosophy as a way of life' as a pathway to recovery for people struggling with addiction.
- It's not really clear to me how the philosophy of life relates to the LBT, did you develop this method yourself?
- You mostly refer to 12-step treatments of addiction. With this, you put yourself on a certain corner, that is not always considered evidence based. You could also add reference to motivational interviewing in the section where you describe that counselors try to enhance motivation. Your therapy also shows similarities with narrative therapy, in which self-defeating scripts are rewritten (although not using philosophy), and some addiction scholars with an addiction history themselves, like Marc Lewis, also use Buddhistic elements in their counseling/writing. You describe your case study as the only example of using philosophy as a way of life in treatment. In this, you make your paper unique. However, from an evidence-based perspective, you make it suspicious. And from that perspective you could emphasise that it is more broadly used in general therapy/self help books, but has not found it's way yet to addiction treatment. But it depends on who you want your audience to be. Personally, I would remove some of the AA references. Or maybe point out at the beginning that your client was also part of a 12-step group, and that you tried to match your therapy with their philosophies.

- For a case study, there very little narrative detail about the respondent and his process. Cohen is more broadly discussed than the protagonist of the case study. Did your client read the books? Did he find it helpful? Is he abstinent now? What kind of addiction did he have? You mention alcohol and crack cocaine. How does his addiction looks like? How long? What is his substance of preference?

p.1. The notion of selfdeception is often brought up in discussions or literature about addiction and its treatment. -> add references here

p.3. What is the authors relationship to the case study? Is he a researcher? Did the client consented to the case study being published?

p.4. Please remove this sentence/paragraph, it find it a quite derogatory view on people with addictions. In my experience, most people with addiction suffered from neglect, abuse, and trauma, which resulted in very hard life circumstances later on, in which they continue to experience severe violence and mental illness, so please remove/rewrite the following sentence: 'Many addicts suffer from various degrees of pathological narcissism, which can be understood as the regression/fixation to the stage of the archaic, nuclear self. – and the rest of the paragraph' [15] Op page nine you refer again to narcissism.

I did encounter some very narcissistic individuals that were addicted, but in my view, they were a minority. Although people did describe themselves as being egoistic and selfish when they were using. But I think that is different from narcissistic pathologies, especially because the egocentric periods were interchanged with periods of severe remorse. Which I think is uncommon with narcissist.

p.8. What I found most inspiring in Nietzsche's amor fati, was – and I think it was in Zarathustra – that if a demon would give you the capability to change things, that you would refuse. Amor fati can be a kind of resignation: 'well, I can't change it, so I might as well accept it', rather than a 'I fully embrace it'. Resignation is a risk for people struggling with addiction. I also see similarities here with acceptance and commitment therapy.

- It's not really clear how the theory – for example about Nietzsche's amor fati – relates to the case study. Did you explain it to your client? Did you let him read parts of Nietzsche? How did you bring the philosophy to your client? And was this your personal knowledge of philosophy that you used? Or it there some kind of manual that you used explaining how different philosophers can help with different problems in life? I know there are many self-help books using philosophy.

p.11, typo:

(Behavioral Rule) When things do **NOT** go my way, use substances to feel better.

(Justification) Things are not going my way.

(Behavioral Prescription) Use substances to feel better.

The 'not' is missing

p.12. Willpower in addiction is a bit of a controversial topic. And in my opinion it conflicts a bit with the notions of changing beliefs and hence behavior. If you change your beliefs, no need to exercise willpower. Your premise is not: 'If things don't go your way, use willpower to not use', but 'accept that not everything can go your way'.

Conclusion

I found your paper fascinating, and nice to read, and I think your therapy is promising.

However, in the conclusion I would include a section on for which clients this therapy could be helpful. In my studies, I met a lot of people with addiction with severe cognitive deficits. Especially older, long term alcohol users could have severe brain damage. Some people dropped out of school at a very young age. Reading Nietzsche, or reading *an sich*, is not for this group. But there is also a very intellectual, cognitively strong group of users (mostly artists, writers, etc) who would might really benefit from this approach.

There are many studies on CBT wondering whether this therapy is too abstract for people with low cognitive skills. Your therapy even goes a step further in that regard. But still, that small subgroup might find it very interesting and affirmative.