



LIBRARY COPYRIGHT NOTICE

www.huc.edu/libraries

Regulated Warning

See Code of Federal Regulations, Title 37, Volume 1, Section 201.14:

The copyright law of the United States (title 17, United States Code) governs the making of photocopies or other reproductions of copyrighted material.

Under certain conditions specified in the law, libraries and archives are authorized to furnish a photocopy or other reproduction. One of these specific conditions is that the photocopy or reproduction is not to be “used for any purpose other than private study, scholarship, or research.” If a user makes a request for, or later uses, a photocopy or reproduction for purposes in excess of “fair use,” that user may be liable for copyright infringement.

This institution reserves the right to refuse to accept a copying order if, in its judgment, fulfillment of the order would involve violation of copyright law.

A Quantitative Pilot Study of Perception of Alcohol Abuse in Nigerian Culture

Very Rev. Alexander Nweke Udekwe Agbata

The Interfaith Doctor of Ministry Program, New York University

Hebrew Union College – Jewish Institute of Religion

Demonstration Project as partial fulfillment for

The Doctor of Ministry Degree

Dr. Jessica Mitchell and Rabbi Seth Bernstein

April, 2022

Contents

Introduction: -----	Page 3
Abstract: -----	Page 3
Authors' acknowledgement: -----	Page 4
Statement of the problem: -----	Page 7
Where is the need? -----	Page 10
History of the Subject: -----	Page 12
Literature Review: -----	Page 29
Clinical: -----	Page 29
Theological: -----	Page 42
Survey: -----	Page 97
Methodology: -----	Page 97
Results: -----	Page 100
Discussion: -----	Page 118
References: -----	Page 119
Appendices: -----	Page 139
Appendix A: Invitation to Participate -----	Page 139
Appendix B: The Consent Agreement Introduction -----	Page 140
Appendix C: The Survey (Questionnaires) -----	Page 141

Abstract

The primary concerns derived from a survey of the community for this study are that: we found support for the experience of alcohol use across the studied community and in some cases, this appeared to lead to problem drinking. Those most afflicted with a drinking problem were family members, most notably cousins, and the respondents' fathers and other male members of the family cohort. Regarding behavior when drinking alcohol: behavior when drinking varies. The most common behavior reported was spending money recklessly, followed by use of abusive words, loss of memory, and inability to work. Alcohol abuse did not appear to change a family member's relationship to God. This study suggests there is strong support for greater involvement of religious organizations to counter alcohol abuse and use. Despite the strong support for community involvement, only one respondent acknowledged the possibility of having an alcohol problem.

While this study points to a serious problem with alcohol abuse by individuals and their family members, it may be worthwhile to see if similar behavior occurs in other closely knit communities of varied ethnic origins. No respondents reported having sought out support for the alcohol abuse that they had identified, such as Alcoholics Anonymous (AA), or Al-Anon (AL). The lack of engagement with supportive services may be attributed to the community's historic origins where no support had been available.

Author's Acknowledgements

This project marks the three-year study of the theory and practice of pastoral care within the Hebrew Union College Interfaith Doctor of Ministry Program, New York University. I am most grateful to Mr. George John Kazanjian and his wife Dolores Acejo Kazanjian for their financial support without which my participation in this program wouldn't have happened in the first place. Their patience, encouragement and friendship in the process has been awesome.

I would like to express heartfelt gratitude to Dr. Jennifer Harper and the entire Doctor of Ministry faculty for their generosity of time, space, and guidance. Specifically, I would like to express my appreciation to this project's primary mentor, Jessica Mitchell, Ph.D., for her hours of advice and counseling. Dr. Jessica Mitchell has been a strong pillar that helped to actualize this project by her words of encouragement and useful professional assistance.

The author equally conveys special appreciation to other mentors on this Project, namely, Rabbi Seth Bernstein, and Dr. Wynd Harris. Their advice and counsel have helped to develop this Project to the required standard. I am grateful to both of them for their keen support of the subject matter of this Project and for their passionate recommendation for more reading in related areas. The fact that both are graduates of the Doctor of Ministry made the author's engagement with them especially, meaningful. Each in their own way, are prodigious and extraordinary role models of original leaders.

In fact, this acknowledgement will not be complete without mentioning the following librarians who provided the necessary sources for this project. They are, Eli Lieberman of the HUC-JIR library and Guy Burak of the NYU library. Hearty thanks to you both.

As a Nigerian immigrant, I cannot help mentioning the great work done by David Pryor and his wife, Kate Mooney Prior. It is their compassionate effort that has entitled this author to

remain in the United States until today. David Pryor has also helped in proofreading the early draft of this Demonstration Project. I remain very appreciative of them both.

The author is most thankful to the Nigerian Roman Catholic Community in New York City and also to Fr. Luke Ibeh, a fellow priest and a friend. In a particular way, I would love to mention another brother priests, Fr. Hyacinth Ifeanyi Jemigbola and his pastor, Rev. Mike Maffeo who had worked very hard to help see that this Project materialized. Fr. Hyacinth, and Fr. Mike, I remain grateful to you, thank you.

I would not conclude this section without mentioning the following community and individuals who generously provided the space and resources that were very consequential to the realization of this project. Among these good people I include the Alexian Brothers community with their apt leader, Brother Richard Lowe and his brilliant Secretary, Barbara Gagliardi. The adept pastor, Very Rev. Theophilus Ebulueme, and his agile secretary, Renee Szeftcyk, and the large-hearted Pastor, Very Rev. Martin Orjianoike. Others include the indefatigable ladies, Shelly Muniz, for her generosity, and Barbara Hessler who proofread the early draft of the literature review. Mention also should be made of Mr. Charlie McCloy and his wife Wanda McCloy for their magnanimity and support. To all of these good friends, I remain very grateful.

Finally, I want to acknowledge the overwhelming support, and blessings gotten from my family, especially from my loving and caring mom, Maria Nwando Agbata. To her and my numerous siblings, I remain indebted.

In conclusion, I cannot over emphasize the supportive blessings from God Almighty who provided the initiative to take up this useful study to begin with. Most of His blessing flow to this author through the pastoral caring of my Archbishop, Most Rev. Dr. Valerian Maduka Okeke,

the Archbishop of Onitsha in southeastern Nigeria. Your Grace, I want to acknowledge your significant motivation that has pushed this project to the finish line.

Statement of the Problem

My interest in this topic began with my own personal and family history of growing up as a child with a parent with the problem of alcohol abuse. My father, a WWII veteran, was a binge drinker. The same alcohol problem is found in my mother's family as reported by my 82year old mother. According to her, her first cousin was a worse problem drinker than my father. Thus, both my mother's family and my father's family spoke of problematic drinking of alcohol consumed by my family members. My father and his younger brother, my uncle, engaged in alcohol abuse which resulted in episodic violence in our family due to their binge drinking. Throughout my childhood, my siblings and I were traumatized as a result of the episodic violence in our household because of our dad's binge drinking.

While alcohol has a history in my family of origin, the origin of statements about alcohol begins in scripture. Scripture has some beautiful words for alcohol. The Psalmist expressed the fact that God gave us wine (alcohol) to make us feel happy and joyful (Ps. 104:15). In the book of Genesis, we are introduced to wine with the story of Noah. There is some biblical interpretation of the story that suggests that the vine was among the first trees planted by Noah after the deluge. Eventually, some biblical commentary considered grape wine "the king of the trees" (Mauro, 2011, p. 22; Gen. 9:20). Alcohol is as old in recorded human history as Noah and its consumption has been considered normal, particularly when consumed in moderation.

Alcohol consumption has occurred for thousands of years. In many parts of the world drinking alcoholic beverages has been a regular feature of social gathering. Christ's first miracle was to convert water into wine for the entertainment of the wedding guests at Cana in Galilee (John. 2:7-9).

Even though alcohol use appears in many cultures and societies, the risk of abuse continues to exist. In the same book of Genesis, in addition to Noah's drunkenness and resultant nakedness, we read about the incest committed by Lot and his daughters influenced by the appearance of alcohol abuse (Gen. 19:30-38). While there are scriptural references to alcohol consumption and abuse, this paper focuses primarily on alcohol consumption and abuse in Nigeria.

Nigeria being a patriarchal society exalts men in many instances while women experience subordination, and too often, marginalization. "One of the ways patriarchal relations are manifested is in the male presumption of their right to consume alcohol" (Dumbili, 2013, p. 3). In Nigeria, it is mainly males who drink and get drunk because in traditional Nigerian society, alcohol consumption is gender and age based. "It (alcohol) is mainly consumed by adult males" (Dumbili, 2013, p. 21). My dad fell into this category. Furthermore, the recent studies done on alcohol use among Nigerian male undergraduate students by Chikere and Mayowa (2011), shows a number of reasons males get into drinking: About 24.4% of the respondents said that it makes them feel high (on top of the world); 6.6% claimed that it makes them belong to the group of "most happening guys" on campus; 52.6% said it makes them feel relaxed, helps in cooling off stress; while the remaining 16.4% of the respondents said they indulge in the act of drinking because their best friends drink it (p. 2).

Comparatively speaking, the burden of taboo against a woman's alcohol use has been so pervasive that stigmatization and shame result from a woman's alcohol abuse and even extended beyond the woman herself. Ikusan (1994), suggests that if a woman is known to consume alcohol heavily or inappropriately, her sisters' chances of getting married will be highly impeded.

Alcohol abuse is a common problem, a paradoxically accepted or normalized problem in Nigerian culture, resulting in considerable suffering and family instability (Esan et al., 2013). In Nigeria, psychoactive substance misuse, particularly alcohol, has for many years been a problem of increasing health and social significance. Despite the prevalence of the problem, there is no remedy for those who abuse alcohol, no rehabilitation, and limited social perception of the alcohol abuse, (Chikere & Mayowa, 2011; Dumbili, 2013; Okonkwo, 2017). As a former pastor in Nigeria back from 2000 to 2008, I lost two male parishioners to alcohol-related diseases and death. In addition to my own father's drinking, abuse and death, those alcohol deaths of Nigerian parishioners all showed the Church and Nigerian society that scant attention was paid to alcoholism and alcohol-related deaths in Nigeria. It is due to those deaths that I wanted to bring the subject of alcoholism in Nigeria to the fore. Both the Church and the entire Nigerian society have experienced and are still experiencing, the loss and pain that were perpetuated by alcohol abuse.

So, in summary, the problems are:

1. Deliberate normalization of problem drinking in the Nigerian culture.
2. Inadequate or lack of proper attention to alcohol-related deaths in Nigeria.
3. Family instability caused by problem drinking in Nigeria.
4. Limited social perception of alcohol abuse in Nigerian society.
5. For all of these, there are no mitigation facilities like the availability of self-help groups such as AA, with its twelve-step program, especially for the addicts themselves. In addition, there are no such groups as Al-Anon, Alateen, Ala-Tot, for the family members, spouses or partners of the addicts.

I want to bring these problems to the attention of Nigerian society in this project.

Where is the Need?

The need for this study is in five areas. Firstly, there is the need for the individual Nigerian alcoholic to get the help the person needs. Secondly, there is the need for the person's loved ones to receive the help, as potential co-dependents. Thirdly, there is the need in the alcoholic's recovery and in the recovery of the one afflicted with this disease of alcoholism. Fourthly, the need to educate Church leaders and clergy about the problem of alcoholism. And fifthly, there is the need for the Church itself to be aware such that the clergy and the laity should create a program to help eliminate excessive alcohol consumption and abuse. Since I am living in the United States, I used native Nigerians living in the USA, as my immediate audience. Most of these Nigerians have double domicile or double citizenship. This means they have USA citizenship as well as Nigerian citizenship. Among all Nigerians living in the USA, I focused on a group of Nigerian Catholics for the purposes of this study.

I also explored how family or parental drinking problems affect the social status, that is, the public image, of the non-drinking members of the family. Problem drinking is one of the contributing factors of domestic violence in human society, family break-up, divorce, loss of income, incarceration, and even death.

Problem drinking has existed for decades. Unfortunately, in the absence of any governmental policy, private action by businesses in Nigeria, has made the case worse. Presently, there is nothing that might mitigate alcohol consumption by Nigerians (Dumbili, 2016). Even though ten essential principal strategies were adopted in May 2008 by the World Health Organization, Nigeria has not formulated any policy to control alcohol use and misuse. Instead, it has continued to depend on self-regulation as advocated by alcohol producers who sell their alcoholic beverages through their knowledge of fashion and culture while at the same time

supplanting stringent policies from being pursued (Babor & Winstanley, 2008; Casswell, 2011; Dumbili, 2013).

Thus, there is an increasing need for this study to be undertaken to document the ongoing problem so that remedies could be sought by the Church in Nigeria. Therefore, it was primarily to increase the awareness of the problem of how alcohol abuse impacted the individual, the individual's family, and the society was what this project did.

History of Alcohol Consumption in the World:

A Brief World History and American History of Alcohol Consumption, Enlarged with

Regard to Africa, in General, but Mostly Focusing on Nigeria.

Obviously, alcohol has been one of the essential stimulants used by humans. Thus, Bryceson (2002a) observed: “Alcohol has been one of the most widely used intoxicants throughout human history” (p. 10). However, the word alcohol itself was developed only in the 1500s BCE from the Arabic for “kohl,” the fine black powder used to enhance the eyes. The definition changed from denoting the chemical process for making kohl (or “al-kuhul” in Andalusian Arabic¹) from mineral ore to the analogous process of distillation that creates strong (liquid) alcoholic spirits. Ancient civilizations across the World, except North and South America, made alcohol in diverse forms without distillation. From at least 6000 BCE – 3000 BCE, there was selective cultivation of grape vines to make wine in the mountains between the Black and Caspian Seas of modern Armenia. Records show its widespread use by 3000 to 2000 BCE for medicinal, social, religious, or recreational purposes (Rose & Cherpitel, 2011, p. 9; Morewood, 2013).

A brief timeline of discovery and use of alcohol throughout recorded history may be found in Courtright, (2001); Walton and Glover (1999); Sherratt (1995); Escobedo (1999); McCarthy (1963). In ancient Mesopotamia, the Sumerians worshipped Geshin, a goddess and protector of wine.

In the thousand years from 3000 BCE – 2000 BCE, wine production and trade became an important part of Mediterranean commerce and culture. Ships carried large quantities between

¹ Andalusian Arabic, was a variety or a collection of varieties of Arabic spoken in Al – Andalus, the regions of Iberian Peninsula (modern Spain and Portugal) under Muslim rule (and for some time after) from the 9th century CE., to the 17th century CE.

coastal cities and seaports. From 3000 BCE – 500 BCE, the Egyptian god Osiris was worshiped as the god of wine and the lord of the dead. Chinese legend recounts that Emperor Yu the Great (ca. 2000 BCE) discovered rice wine and subsequently prohibited its use. The Greeks worshipped Dionysus as the god of wine, honoring him annually with a four-day feast consisting of intoxication, sobering up, and atonement, and then the celebration of Dionysus's return (Rose & Cherpitel, 2011; Morewood, 2013).

From 2200 BCE, Babylonian cuneiform tablets recommended beer as a tonic for lactating women. In 1800 BCE, beer was produced in abundance in Northern Syria. In 1500 BCE, wine was produced commercially in the Levant and Aegean (Eastern Mediterranean). From 900 BCE – 800 BCE., extensive, large-scale vineyards in Assyria (modern Iraq) began producing large quantities of wine. In 800 BCE, barley and rice beer brewing began in India (Rose & Cherpitel, 2011).

In 500 CE., winemaking from grapes reached China along the Silk Road trade route. The first specific reference to hops in beer was recorded in 765 CE., in France. In 1100 CE., the distillation of alcohol was first documented by the medical school at Salerno, Italy, and is named “spirits” from its being the extracted spirit of the wine. Alcohol was used as an anesthetic and a painkiller during and after surgery. From pre-history through 1599, alcoholic beverages were derived by fermentation and consist of wines and beers containing 14% alcohol at the most. Beverages were used, both in ceremonies and to replace other beverages believed unsafe to drink, such as water from public wells (Rose & Cherpitel, 2011; Morewood, 2013).

In 1516 CE., the German Beer Purity Law (*Reinheitsgebot*) made it illegal to produce beer with anything except barley, hops, and pure water (Morewood, 2013). These were the efforts the government put in place so alcoholic beverages were free from germs for the drinkers.

History of Alcohol Consumption in Colonial America

Colonizers from Europe brought alcohol to the New World when they first arrived in 1492, and with it the attitudes they held toward alcohol and its use. It was regarded as the “Good Creature of God,” a gift from the Almighty that was consolidated into most aspects of colonial life (Rose & Cherpitel, 2011, p. 13). Adult men, women, and children drank alcohol everyday not just for intoxicating effect but also for its nutritious value (White, 1999). Alcohol was used not for intoxicating purposes but just to quench the thirst in those days. Moreover, water was not necessarily portable then, especially aboard ship; This further encouraged the drinking of alcohol.

Alcohol Consumption and Abuse in Colonial America

Rose and Cherpitel (2011) noted: “From 1550 – 1575 CE., widespread drunkenness was described in England, and it was mentioned for the first time as a crime. Thus, reaction to the perceived dangers of alcohol multiplied” (p. 11). From 1710 – 1750 C.E., England experienced the “gin epidemic” prompted in part by low cereal prices and an unfavorable trade balance that pushed the nation’s production of cheap gin. By the 1740s, the long-term effects of this widespread excessive alcohol use was seen as contributing to declining birth rates and an astronomical incidence of malformed and retarded children, catalyzing social protest. In 1751, the British parliament increased taxes on distilled spirits and limited the number of places it could be sold (Morewood, 2013).

Lack of portable water earned alcohol its nomination as *aqua vitae*, the water of life (Vallee, B. 1998). Nevertheless, individuals as young as infant-age were allowed to drink warmed alcohol with bread or other food, and young boys were permitted to enter taverns to be taught by their fathers the art of telling story and the consumption of alcohol (Rorabaugh, 1979;

Steinsapir, 1983). To demonstrate how important alcohol was in those early days, Lender and Martin (1987) put it in this way: “To make matters worse, passengers and crew were almost out of beer. ...Even in the midst of their other difficulties, no one took the beer situation lightly. It was a time that considered alcohol safer than water” (p.2). The wisdom of the day was that alcohol was indispensable for good health. For instance, a stiff drink warmed a person on cold nights and kept off chills and fevers; a few glasses made hard work easier to bear, it aided digestion, and in general, helped sustain the constitution. In this period and with this understanding, temperance invited trouble, and some people considered nondrinkers as abnormal. Furthermore, liquor kept well at sea as opposed to water which was believed to foul in its wooden barrels. This was a crucial point for colonials, who both mistrusted water and knew any supplies from Europe had to last over a long voyage (Lender & Martin, 1987).

Nonetheless, as people continued to consume alcohol primarily because of the benefits discussed above, many drinkers in this era began to abuse alcohol. Even though alcohol was valued in Colonial America, abuse was condemned as a sinful misuse of this gift from God. That was why Mancall, (2004) observed:

During the colonial period, the average consumption of distilled beverages was [sic] approximately seven shots per day, abusive drinking was typically linked to moral failings: drunkenness scorned in the Bible, was a sign of degeneration and savagery. Those who could not control their desires were denied entry into public houses, thereby not only losing the opportunity for tippling² but also forfeiting the personal and political relationships that so often formed in such building. (p.95).

² Habitual drinking of alcohol

But like any widely used illegal substance, (unlike Nigeria where even the colonial administration not only promoted the production but also engaged in the importation of alcohol beverages for commercial purposes) alcohol continued to be sold and consumed by many and this created an underground black market. There were speakeasies all over the country; their number increasing each year. Thus, Lender & Martin, (1987), assert: “One surveying party in North Carolina reported finding rum everywhere in 1728 – people even cooked bacon in it” (p.34). The brewing of hard cider or wine was legal, but with limits on quantity that most people significantly disobeyed. Prohibition (1920-33) took advantage of the impoverished masses when they had limited financial resources. It led to an increase in alcohol poisoning cases because much of the alcohol being distributed was not properly produced in distilleries and was often adulterated with chemicals to give it an extra punch. Reckless consumption of alcohol practically became an epidemic. The problem was evidently only growing in the country in this period, despite futile attempts to keep it under control. Whenever one illegal drinking establishment would be shuttered, it seemed ten others sprang up in its place. Visitors to the Western areas of Virginia, New York, Pennsylvania, South Carolina, and some of the more remote parts of New England found intoxication quite common (Lender & Martin, 1987, p.34).

Alcohol Consumption in Modern America

In the Colonial era and up to the Prohibition, cider, beer, and wine were the preferred alcoholic beverages. As mentioned above, the Puritans believed alcohol was God’s gift to man – but it was also a test of his soul and fortitude. This attitude is reflected in the sermons of some Puritan leaders of that era, promoting this belief mainly for reasons of health. They proclaimed that alcohol was safer to drink in this era than water which might as well be unsafe. So, people were of the view that drink itself is a good creation of God, and people should be grateful to God

for the gift, but abusing it, is the work of devil. Wine, they say, is a precious gift from God but getting drunk is the work of the evil one (Increase Mather, 1673).

This view speaks to the tenor of Christian beliefs in American communities in those days. People couldn't see any reason why an individual could not exercise a sense of balance that leads to problem drinking. In Puritans' eyes, the lack of self-control for alcohol consumption was attributed to the influence of Satan. "Even today, alcohol with an "extra punch" is still produced in America, "fortified alcohol", the aim of which unfortunately, is to increase addiction" (Rabbi Seth, B., personal communication, June 26, 2021). 15% of all those who drink alcohol will develop an addiction to alcohol. Therefore, around 15 million Americans struggle with alcoholism now and it remains a serious threat in the society today, because in American culture, alcohol is used for celebration and commiseration alike (Rose & Cherpitel, 2011: Lender, & Martin, 1987). So, the American alcohol problem became a problem that needs far more attention and resources to help all who are affected by problem drinking.

Ever since people have been consuming alcohol, there have always been problem drinkers and people who are able to drink moderately. At the same time, some people stayed away from drinking altogether. Scientists aren't quite sure what is at the core of alcoholism, but there are a few factors which can lead one toward alcoholism, as identified by medical professionals. These factors include long-term drinking, depression or anxiety, a history of alcoholism in the family and social acceptance of drinking. Nevertheless, not every person with a combination of these factors becomes an alcoholic. It is therefore apparent much further investigation is needed (Rose & Cherpitel, 2011).

History of Alcohol Consumption in the Continent of Africa

Africa includes such a vast area with ever changing countries, and so, all Africa cannot be discussed in this study. Africa is considered to be among the oldest inhabited territory on earth, with the human species originating from the continent, thus the name, “Mother Continent”. Nevertheless, since a human skull recently discovered in China predates African finds, I could now say that both Africa and China share the title: “Mother continents.” During the middle of 20th century, anthropologists have discovered evidence of human occupation perhaps as early as 7 million years ago. And according to Rose and Cherpitile (2011): “Alcohol has been one of the most widely used intoxicants throughout human history” (p. 9.) Generally, academic investigation on alcohol use in Africa has been confined primarily to anthropologists until lately. Africans used alcohol for a variety of purposes. Its use is part of the culture.

In Africa, alcohol is part of everyday life, especially in the countryside where its production and distribution are interwoven with consumption. It’s a means of communication with the ancestors, and so, it has had a central place in African Traditional Religion. In urban and rural areas alike, drinking provides a hub for relaxation and socializing (Bryceson, 2002a, Okonkwo, 2017).

Africans have made and consumed alcohol beverages from a wide array of trees, fruits, grains and other natural substances for as long as historical record exists. Trees that are used as vital staple food got the first priority in the production of alcohol. (Dumbili, 2015a; Okonkwo, 2017).

In Africa, alcohol is considered to be both nutritious and a stimulant from the scientific standpoint. Fermented drinks are a source of vital nutrients. So, “Drinking occasions can be used to construct an ideal, ordered world in which people are seen to symbolically accept their place

in a social environment. Nonetheless, such occasions can have embedded within them the antithesis to the ideal, local people's own construction of why the ideal is so difficult to attain in daily life" (Karp 1980, p. 6).

In the time of slave trade, the importation of distilled alcohol (rum, but most importantly, gin) further reinforced the affinity between social distinction and access to alcohol, and also became integral to religious practice. Three religious systems ran across Africa: African Traditional Religion, Christianity – which came with the European colonization. Later, Islam came as a result of conquest by the Islamic warriors. In all these religions, alcohol is in use with the exception of Islam (e.g., Dumbili, 2013; Okonkwo, 2017). Abstention from alcohol became a crucial marker of identity amongst Muslim reformers seeking to create an alternative conception of community.

The traditional Africans use alcohol in a broad range of religious, political, economic, psychological, social, and physiological settings. In fact, alcohol is everywhere men gathered. Within the family, it is considered normal to have some alcoholic drinks readily available (Chikere & Mayowa, 2011; Dumbili, 2013). So, alcohol use among the traditional Africans is woven into the fabric of their lives. Alcohol's stimulating effect on the physical exchange has long been appreciated, especially with the oral cultural inheritance in agrarian societies throughout the continent. The stimulation encourages face-to-face social exchange.

This face-to-face exchange could sometimes become something else. "The range of human emotions kindled by alcohol, from celebratory happiness to dark despair, and from bonhomie to violent revenge, imparts drama and enigma to the comparative study of alcohol usage" (Letsela et al., 2019, p 10; Chikere & Mayowa, 2011). Colonial rule was partially justified in terms of a commitment to drive out the harmful trade in 'spirituous liquor,' the

practice which excelled in the slave trading era. Colonial regimes in British West Africa became dependent upon the revenues from Dutch imports of distilled products from Europe (Heap, 1996; Okonkwo, 2017).

In South Africa, proceeds from municipal beerhalls may have underwritten segregation and later apartheid. Black South Africans were debarred from purchasing bottled beer, wine or spirits until 1962. Coloreds in the Cape, who provided a captive source of farm labor and the largest market for wine, were specifically exempted. In this way, alcohol became a mark of racial hierarchy, as it did in the settler colonies. Bryceson (2002a) observes:

And to this alluring cocktail can be added the calculating maneuvers of the alcohol industry and state officials maximizing sales and fiscal revenue from alcohol. The study of alcohol usage strategically situates the analyst in a broad concourse of religious, political, economic, psychological, social and physical phenomena. (p.1).

So, even as alcohol has an adverse effect on the consumers, somehow due to the commercial necessities and gains that accrue from them, the government normally has looked the other way.

Alcohol locates itself at the intersection of arguments about money, morality and consumption. In fact, African alcohol consumption per capita is low by international standards, although it might represent a considerable proportion of household income (Tanzarn, 2002). Nowadays, with the prolific expansion of African cities, and the growth of a more affluent middle class, consumption styles are also changing. This is reflected in the increased consumption of wine in the oil-producing states such as Nigeria, Angola, etc., which now provides the largest market for African-made brands like Aliban De Great, Jacobs Wines Ltd, or Alentejo wines. The consumption of these African wines was the second largest category by

consumption in Nigeria and Angola outside the European Union produced liqueurs (Dumbili, 2013).

In South Africa, Blacks who have historically preferred bottled beer, have changed their drinking preferences to consumption of wine and spirits. However, the emerging style is partially offset by other factors. The push by the South Africa Breweries (SAB) across the continent, accompanied by the global restructuring of the brewing industry, is leading to ever more assertive attempts to defend the market for beer. However, the growth of the Pentecostal movement has been a revival of the fortunes of temperance across Africa (Okonkwo, 2017). As this push by the South African Breweries continued across the continent, Nigeria was especially influenced as many young Nigerians would always want to identify with foreign preferences.

The History of Alcohol Consumption in Nigeria

The history of alcohol use in Nigeria is better studied under three stages of drinking patterns, namely, Precolonial, Colonial and Postcolonial eras. This also could be said of many other African nations like Ghana, Cameroun, etc. The perception of alcohol consumption developed gradually in Nigeria inasmuch as one can contend that a precolonial drinking modality survived. Its characteristics were social, physical, and environmental constraints on alcohol consumption. The reason for this is that “alcohol was not an everyday consumption item in most people’s lives in precolonial Africa” (Bryceson, 2002b, p. 24).

The Precolonial Era

Drinking of low ethanol-content alcohol was interlinked with special communitywide ceremonies and occasions marking life-cycle passages. Alcohol was fundamentally associated with social exchange between contemporaries as well as with the ancestors that drinking alone could be considered morally wrong (Bryceson, 2002b).

Alcohol use has been accepted in the culture of Nigerians since its discovery. The importance of the exceptional drinking modality as a composite construct dimmed during the colonial period, as an array of drinking modalities began to surface. The use of alcoholic beverage became well entrenched in the culture of the peoples of Southeastern Nigeria. Nevertheless, alcohol acquired different meanings and played different socio-economic and cultural functions at different epochs. Alcohol was and still is used in ritual, marriages, oath-taking, festivals, and entertainment. It was often presented to a person as a mark of respect and honor (Okonkwo, 2017; Somé, 1997).

The Colonial Era

Lagos, the colonial capital of Nigeria, was invaded by British forces in 1851 and was formally annexed in 1865. Nigeria became a British Protectorate in 1901. The colonization lasted until 1960, when an independence movement succeeded in gaining independence. Since this annexation, prominent Nigerians had been very uncomfortable with these uninvited visitors and were looking for a way to free themselves and gain their independence. Part of the inspiration for this struggle was the desire to gain back their lost heritage and their sense of pride. Conton (1965), beautifully puts it in this way:

History in West Africa since 1957 has been a cavalcade of independence. But impressive and colorful as this movement has been, we shall not fully understand it unless we realize that behind the demand of the peoples of modern Nigeria...for their independence lied their shared memory of the greatness of ancient ...Benin. This memory is kept alive by our folk tales and songs, and by our splendid heritage of art. (Preface to revised edition, 1st paragraph, p. 1).

The process of colonization led to the temporary loss of the core values and culture of this great nation. But in the independence period, these values and cultural heritage were being regained gradually (Conton, 1965; Okonkwo, 2017).

The century spanning the colonial and early postcolonial period saw an escalation in the variety, scale, rate and reliability of alcohol production and ethanol strength. Accordingly, home-based production of alcohol is subject to constant investigation. (Dumbili, 2015a; Okonkwo, 2017). As brewing became more commercialized, this efficiency offered brewers better business prospects. Women producers were at the center of the growth of alcohol as a cottage industry, first in urban areas and later throughout rural Nigeria, (Hellman, 1948; Nelson, 1982). Nigerian

women were more involved because of the fact that at this early stage of alcohol production, it was a business or manufacturing activity carried on in a family home. And it was on an economic level of subsistence.

The abolition of the Atlantic slave trade and subsequent transition to commodity trade, set the stage for major political and economic transformations in what became Nigeria. For one thing, it led to the increasing political and economic interest in, and the subsequent colonization of, Nigeria. Because of the intense rivalry and competition among the European powers for domains of influence in Africa, a development resulted mainly from the economic recession in Europe during the second half of 19th century, the European powers deemed it necessary to come to terms on how to divide Africa among themselves, (Dumbili, 2014b; Okonkwo, 2017). This occurred at the time Britain was the leading industrial nation. Other European nations equally sought to meet the expanding need of raw materials for their industries. Thus, there arose an acute competition among the European countries to find new sources of raw material and even a market for the manufactured goods, especially alcoholic drinks.

The Berlin West African Conference in 1884 and 1885 resolved the issues about the scramble for African territories. Because of this, colonialism as a political, economic, and cultural domination of “weaker peoples” was implemented in Nigeria, (Olaniyan, 1982, p. 76). Hence, 19th century capitalism³ in Europe had reasonably led to imperialism⁴. In fact, it was stated that several parts of what became Nigeria were already part of an expanding British Empire. A decade earlier, southeastern Nigeria was only incorporated into the British Empire as the drive for imperial possessions increased in the last years of the 19th century (Okonkwo, 2017,

³ An economic and political system in which a country’s trade and industry are controlled by private owners for profit, rather than by the state.

⁴ A policy of extending a country’s power and influence through diplomacy or military force.

Dumbili, 2014b). Before the coming of Western imperialism and the peripheral incorporation of Nigerian economy into the global capitalist system, alcohol was already familiar to the generations of the people who made use of their indigenous product. These indigenous drinks did not disappear with the importation and the introduction of the foreign spirits but rather they came to be consumed side by side with these imported spirituous liquors (Heap, 1999). With the imposition of colonial rule on the people of southeastern Nigeria, the tendency came to be that both indigenous drinks and the foreign liquor came to complement and to compete with each other.

The imported liquor aroused ferocious argument; namely, there was disagreement as to whether alcohol was associated with the development or deterioration of Nigerian society. Therefore, the liquor trade was captured between two opposing colonial perspectives in Nigerian economic development. To be sure that more economic benefits accrued to the colonial administration through the importation of liquor, they made sure that all came in through particular coastal ports. Simon Heap (1996) puts it succinctly: “The colonial authorities got virtually all of Nigeria’s imported liquor to enter through its regular coastal ports, so a tally of the trade could be made, and the correct customs duties calculated and levied” (p. 70). So, the concern of the colonial authorities was mainly on economic gains from alcohol rather than on the availability of alcohol beverages among the populace which could lead to alcohol abuse and even to alcohol addiction. To get a sense of how some politicians think about liquors, a US congressman was once asked by a constituent to explain his attitude toward whisky:

If you mean the demon drink that poisons the mind, pollutes the body, desecrates family life, and inflames sinners, then I’m against it. But if you mean the elixir of Christmas cheer, the shield against winter chill, the taxable portion that put the needed funds into

public coffers to comfort little crippled children, then I'm for it. This is my position, and I will not compromise. (Lender & Martin, 1987, p. 169).

Therefore, humanitarian concerns and economic interest became intertwined. Also in Nigeria, positive views of the liquor trade asserted its necessity in developing the Nigerian economy.

Although some admitted that the trade formed a necessary evil, they did not succeed in persuading the colonial government to ban the trade such that the emphasis could be placed on cash crops for export, like cocoa, groundnuts, palm oil, palm kernel, iron ore, and other non-alcoholic commodities. On the other hand, tradesmen saw commerce as a great civilizing agent, with the liquor trade as its most important component, in as much as alcohol was a desirable product among those with money to spend. Furthermore, liquor trade critics now used the temperance equation to facilitate their principle, namely, that drinking alcohol was bad; abstinence was good. Contending that the imposition of "a Rum and Gin Civilization" would be "a hydra that devours the natives," halting useful commerce and hindering economic development. They agitated for prohibition and complete restructuring of the colonial economy along alcohol-free lines, (Heap, 1994 – 95).

Most tragically, the one group in Nigeria who never questioned the morality or utility of the liquor trade was the colonial administration. Perpetually, colonial government in Nigeria discovered that taxing the trade was the quickest way of creating wealth for their administration, since they were unable to call on metropolitan taxpayers to fund the colonial government. According to Simon Heap, (1996) Bishop Herbert Tugwell, the greatest critic of the liquor trade admitted as much in 1911:

It is a very easy cheap way of raising revenue. A vessel comes into Lagos and deposits 10,000 cases on a wharf. ...All that the government has to do is to send down a clerk and

have the cases counted, and on each case to charge 5s, which practically means realizing 2,500 pounds. (p.70).

The above evidence demonstrates how the colonial government chose an easy way of raising revenue through the importation of alcoholic beverages without giving a thought to the health of Nigerian consumers, too many of whom became addicted to alcohol.

Postcolonial Era

After the Nigerian-Biafra civil war, 1966-1970, just like the colonial administration after the WWII, 1939-1945, the Nigerian government still believed that “alcohol was an ideal commodity for import substitution, given its assured consumer demand and its not overly demanding technical production requirements. Unhesitatingly, the government permitted the construction of Nigeria’s modern brewery” (Heap, 2002, p. 154). Lager beer manufacturing in Nigeria was started off by foreign trading firms to protect and promote their interests in the growing domestic market. The trading in alcohol “tradition” was handed over to the Nigerian government by the colonial administration and the Nigerian government ignored social, moral, and medical consequences of a population with increasing alcohol consumption.

Just two years after independence (1962), the Nigerian government established more breweries. Beer manufacturing facilities in Nigeria increased from 7 in 1977 to 34 in 1985. In addition to beer breweries, there were four distilleries and nine wine producing centers as the volume of wine and the imported spirits increased from 1.0 million hector-liters in 1982 to 3.9 million hector-liters in 1983 (Odejide, 1993).

The growth of alcohol industries was partly sustained by the economic boom of the 1970s, including the sophisticated marketing that promoted industry-produced beer and wine as desirable status symbols among the upper and middle classes. In this process, the traditional

alcoholic beverages were minimized (Demehin, 1984). This indicated a new fashion in alcohol consumption in Nigeria. Now alcohol availability was no longer considered a problem by many; and the citizens were drinking and getting drunk. For instance, there were alcohol contests among youths (boys) in bars, restaurants, drinking joints, hotel and nightclubs which were tactically located near various schools in Nigeria. The winner was judged based on two levels, namely, the ability to drink large quantity without conveying a sign of intoxication, and secondly, the ability to drink faster than the opponent. A large amount of money put up by these competitors or alcohol marketers was awarded to the fastest drinker or the alcohol *macho* (Dumbili, 2013).

The reason for this was that major brewers have nurtured a loyal following, ensuring that their products became household names. Consumption was no longer solely regulated by custom and tradition of the people, and it was no longer reserved for social gathering or entertainment of the guest alone. Styles of use, the users and the reasons for consumption were changing rapidly, especially among young drinkers (Demehin, 1984). Such was the case in the early 1980s and continued to this day (Okonkwo, 2017; Dumbili, 2013)

Another recent development is increased drinking among youths (15-24 years old). In the traditional era youths were restricted from drinking by community norms and limited to festive days, during which youths were guided by an adult (Obot, 2000). But this has changed in the 21st century CE. Even though the minimum drinking age remains 18 years, young people aged 15-17 years of age now buy and drink alcohol freely in public places. Governmental loopholes allowed for many other ways of promoting alcohol consumption to advance (Obot, 2000).

Literature Review: Clinical Aspect of Alcohol Consumption

Psychological Overview

Alcohol Abuse

Alcohol abuse is considered a serious disorder and a significant risk factor for mortality and morbidity. The etiology of alcohol abuse is understood to be unresolved pre-oedipal issues, a vulnerability to overwhelming traumatic events which the victims of trauma are unable to cope with or overcome, and according to American Society of Addiction Medicine, there is also a “genetic factor” to the development of alcohol abuse (Chirpitel & Rose, 2011, p. 43). Individuals are understood to resort to alcohol abuse to refrain from experiencing the distressing feelings associated with their traumatic history (Canary-Digironimo, N. (2019).

Alcohol addiction does not just happen, there is a genetic factor, environmental factor, a social factor, such as male peer pressure, as well as the psychological events such as, trauma, and dissociation that could lead some individuals to alcohol addiction. Trauma and dissociation will be discussed in detail in the subsequent pages to get a sense of how it can lead to alcohol addiction. Moreover, Paul Steinberg (2014) puts it succinctly:

Even though addiction is a spiritual malady, we can unhesitatingly affirm that it is also rooted in biology. Understanding addiction as a genetically influenced disease, 60 percent genetic, 40 percent environmental, centered in the brain provides us with yet more tools and leverage to achieve healing and wholeness. Moreover, understanding the brain science of addiction removes the moral stigma associated with it, as we learn that drinking and using are not merely the result of a “bad person” making a “bad choice.” Addiction is a physiological response. Therefore, combining spiritual and medical treatment may offer a powerful antidote to the disease. (p. 8).

Alcohol addiction is a complex disorder characterized by compulsive alcohol seeking and consumption that also is impacted by related psychiatric states. Individuals with a substance addiction, manifest behaviors that include being unable to control their substance use, compulsive substance use, continued substance use despite hurt, and yearnings and cravings for the substance (Ling & Smith, 2005).

Furthermore, both environmental and genetic factors influence alcohol drinking styles and may increase susceptibility to the development of addiction. That is why alcohol use is seen in the context of both the user's internal psychodynamics and external environment (Moonat & Pandey, 2012; Rothschild, 2010). Individuals seeking to cope with overwhelming events in their life are vulnerable to succumb to drinking that can quickly become excessive (Moonat & Pandey 2012).

Psychoanalysts assume that we all have preferred defenses that have become integral to our individual styles of coping. The early ego psychologists, Anna Freud (1936) and Peter Blos, (1968) emphasized the function of defenses in dealing with anxiety. Later, object relations theorists, John Bowlby (1958), Melanie Klein (1932), Donald Winnicott (1945), and others focused their attention on inner objects, early attachment, loss, separation, and introduced to us the understanding that defenses operate against grief as well. Later still, self-psychologists and relational theorists, Daniel Stern (1989), Heinz Kohut (1966/1978) stressed the role defenses play in the effort to maintain a strong, consistent, positively valued sense of self. Many theorists observe that a chemical like alcohol is often employed to alter one's consciousness and numb painful or shameful experiences (Freud, A., 1936; McWilliams, 2020; Holms & Slade, 2018; Pine, 1990; Tagney & Dearing, 2004).

In alcohol abuse and other addictive behaviors, one sees the presence or development of comorbid stress-related psychiatric disorders, which typically are characterized by features such as altered mood and anxiety. This often has been associated with an increased disposition for alcoholism. More specifically, alcohol consumption is thought to reduce negative symptoms like depressed mood and anxiety linked with stress-related disorders, which ultimately leads to self-medication and excessive drinking (Badenoch, 2008). Thus, the adverse effects of alcohol abuse are a profound social, economic, and health burden that not only impacts the concerned participants but also the society that surrounds them. Furthermore, the negative results of alcohol abuse include incidences of emergency visits, accidental injuries, family and domestic violence, psychopathic disorders, and sometimes death (Moonat & Pandey, 2012; Canary-Digironimo, 2019).

However, those addicted still need our compassion, “for when we are exiled from ourselves, shame-based, and sustaining buried pain, the psyche instinctively looks for healing. Addiction is a misguided attempt to attain that healing through external means” (Lloyd, 2015 p. 29). Lloyd (2015) continues to describe how the addictive individual is bound by the need to find the way out of a journey begun as a traumatized child. Essentially, addiction becomes a striving to use external self-soothing to overcome the pain of the original wounds. Thus, the use of addictive substances becomes an attempt:

...to jump across the fault line that was set in when trauma left us disconnected from our reality, and to free ourselves from the misinterpreted belief in our own defectiveness.

Addiction is therefore compelled by the necessity to become who and what we really are; it is a strive to overcome our thwarted compulsion to actualize our potential. It is a strive to find unity, to return from exile. The greater our internal disconnection, the greater our

need for something external to bridge the internal fault line. Whatever appears to restore that feeling of unity will become the object of obsession, and its attainment, the means of compulsion. (Lloyd, 2015, p. 29).

This citation is simply saying that the object of addiction is seen by the individual as a means of getting himself or herself back to being whole as the individual was before the traumatic event happened in the individual's life. But unfortunately, the addiction takes the individual to another plane of existence.

Addiction

While considering the underlying psychological issues that may contribute to alcohol abuse, not ignoring the role of oedipal factors and the role of social variables and constitutional vulnerabilities, some authors conclude that the fundamental wound of the addict's ego is caused by early preoedipal, early attachment damage to the personality, (Akhtar, 2018, Bowlby, 1958, Kalsched, 2013, Simmel, 1948). Several other theorists view addiction as "a primary psychopathology" (Akhtar, S. 2018, p. 4). For example, Sandor Rado (1933) suggested that addiction might be the cause of psychopathology rather than its result. However, Norman Zimberg (1975) contended that the psychic attributes of addicts are often the result of chronic social alienation and restricted ego autonomy.

From the early drive theory perspective, addiction is correlated with oral dependency and a regression from genital to masturbatory pleasure (Freud S, 1905a; Abraham, 1908; Fenichel, 1945). From the ego psychology perspective, primitive affect, and the ego's susceptibility to regressive primitive defenses, are solutions that utilized the use of denial, and a lack of self-governance, (Freud A., 1936; Abraham, 1908; Krystal & Raskin, 1970; Rado, 1926). From the object relation viewpoint, vulnerability to addiction is considered the consequence of early

attachment issues, loss of transitional relatedness, and the result of borderline character organization (Bowlby, 1958; Mahler, 1968; Klein, 1932; Kernberg, 1967, Waska, 2006). Finally, from the self-psychology and relational perspective, addiction is seen as a failure of self-regulation (Kohut, 1971; Levin, 1987).

Nonetheless, individuals struggling with substance abuse disorders are often notoriously manipulative and exploitative, since the addictive substance becomes more important to them than human relationships or personal integrity (McWilliams, 2011). Betty Joseph (1982) sees addictive behavior as “a malignant form of self-destructiveness that can manifest as compulsive experiences such as over-working, sleep deprivation, avoidance of eating properly or secret overeating, drinking excessively, compounded by the withdrawing from relationships” (p. 449).

Shame and Addiction in the Context of Alcohol Abuse

Shame is one of the various reasons why individuals drink alcohol. Some drink it to excess and get drunk in order to avoid the uncomfortable feelings of shame. By drinking to excess on many occasions people might get addicted.

Bruce Lloyd in an interview with Daniela Sieff (2015) discusses the experience of shame as an important component of the addictive experience. Shame is compassionately defined as:

An all pervasive, embodied sense of being fundamentally defective as a human being.

Shame distorts and poisons our relationships with ourselves and others. In a misguided attempt to alleviate the suffering born of dissociation, self-alienation, and shame, we look outside of ourselves for healing. Whatever appears to offer us respite risks becoming the subject of an “addiction”. Nevertheless, the relief is an illusion. In our inner world, nothing has changed. Rather our misguided attempt to heal exacerbates dissociation, deepens shame and intensifies self-alienation (p. 15).

In addressing the issue of recovery from alcohol addiction and repair, Lloyd further suggests that the individual needs to forge an authentic way to reconnect to oneself through introspection. Lloyd implies that we must come to know our shame from:

..inside our embodied experience, engage with our pain and acknowledge our fear. We must discover how we abandoned ourselves, dismantle our old defenses and build a life that is rooted in our internal reality – a reality that includes the legacy of our woundedness. The feelings involved in this process can be strong, deep, and, at times, overwhelming. Frightened by those feelings, we look for easier options. However, if we aspire to recover from our trauma, and to embrace the life that is authentically and uniquely ours, then we have no choice but to undertake this challenging inner work (p. 25).

Tangney and Dearing (2004) further elaborate eloquently as to the terrain of shame: Shame is an extremely painful and ugly feeling that has a negative impact on interpersonal behavior. Shame-prone individuals appear relatively more likely to blame others (as well as themselves) for negative events, more prone to a seething, bitter, resentful kind of anger and hostility, and less able to empathize with others in general (p. 3).

These authors observe that shame can lead to the experience of denial, defensive anger and aggression. “Shame can trigger regret, and feeling you have done something wrong, that is in contradiction to morals or beliefs - resulting in feeling guilty” (Tangney & Dearing, 2004, p. 10).

Trauma

The word “trauma” is used in various ways to refer to different kinds of experiences including early trauma and later trauma, cumulative trauma, psychological trauma, relational

trauma, and developmental trauma. Historically, trauma has been considered both rare and infrequent - an undeniable fact of our lives. Yet, for many individuals, war combatants, battered women and abused children, trauma can be an experience of daily life (Brown, 1991; Howell & Itzkowitz, 2016, p. 33; Shapiro, 2001). Daniel Spiegel (1990), suggests that:

Trauma can be understood as the experience of being made into an object; the victim of someone else's rage, of nature's indifference, or of one's own physical and psychological limitations. ...A realization that one's own will and wishes would become irrelevant to the course of events, leaving a view of the self that is damaged, contaminated by the humiliation, pain, and fear that the event imposed; or a fragmented sense of self. (Spiegel, 1990, p. 25).

Bessel Van der Kolk (1996) interestingly describes trauma as: "An inescapably stressful event that overwhelms people's existing coping mechanisms, then it refers to events that were too overwhelming to be assimilated" (p. 279). Nonetheless, Howell and Itzkowitz (2016) further asserts:

If the overwhelming traumatic event cannot be taken in and integrated with the rest of experience, it is dissociated. Experience that is too overwhelming to be assimilated will cause a division of experiencing and knowledge. Parts of self-experience will be separated or split off from one another, and one part will not know of other parts of ourselves. The result of trauma is dissociation. (p. 35).

Furthermore, Philip Bromberg (2011) compellingly tells us that developmental trauma, "the kind of trauma that affects the developing child, is ubiquitous" (pp. 32-33). While Donald Kalsched (2013) compassionately communicates that:

Trauma constitutes an interruption of the normal processes through which an embodied, true self comes into being. The early trauma is a relational trauma because it occurs in the earliest attachment relationship between the infant and his or her mother. When things are bad enough in this primal relationship, the infant dissociates, and this effectively interrupts the normal process through which the infant is coming-into-being in dialogue with reality's otherness. (p.19).

Kalsched (2013) continues by depicting the impact of early relational trauma as resulting from the fact that we are often given more to experience in life than we can bear to experience intentionally:

This trouble has been around since the time began, but it is especially severe in the early childhood, where because of the crudity of the psyche and /or brain, we are ill equipped to digest our experience. An infant or young child who is abused, violated or seriously neglected by a caretaking adult is overwhelmed by intolerable affects that are impossible for it to take in, much less understand or even consider. A shock to the psychosomatic unity of the personality intimidates the child to its very core—threatens to extinguish that “vital spark” of the person so crucial for the experience of aliveness and so central to the later experience of “feeling real.” (p. 10).

Judith Herman (1992) speaks eloquently about traumatic experience. She reminds us that the collective psyche consequentially wants us to forget painful experiences and fall into denial, recognition of the truth is hard to win:

The ordinary response to atrocities is to banish them from consciousness. Certain violations of social compact are too terrible to utter aloud. So, the conflict between the

will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma (p. 1).

Atrocities nonetheless, refuse to be concealed. Equally as powerful as the desire to repudiate atrocities is the conviction that denial does not work. Folk wisdom is filled with phantoms who refuse to repose in their graves until their stories are told. Recalling and telling the truth about terrible events are prerequisites both for the repair of the social order and for the relief of individual victims. People who have survived cruel acts often tell their stories in a highly emotional, antithetical, and fragmented manner which erodes their credibility and so serves the twin imperatives of telling of truth-telling and secrecy. When the truth is finally acknowledged, survivors can begin to start their recovery. But far too often secrecy triumphs, and the story of the traumatic event surfaces not as a verbal narrative but as a symptom (Herman, 1992).

Finally, Judith Herman (1992) famously reminds us that the psychological distress experienced by traumatized individuals should call our awareness to the existence of an unspeakable secret, and the desire to deflect attention from it. This is most apparent in the way traumatized people alternate between feeling numb and reliving the event. “The dialectic of trauma gives rise to complicated, sometimes uncanny alterations of consciousness, which mental health professionals, searching for a calm, precise language, call ‘dissociation’” (p. 4).

Therefore, from the foregone descriptions and explanations of trauma, it can be summarized as an emotional reaction to a catastrophe like an accident, war, rape or natural calamity. Following the event, shock and denial are typical. Longer term responses include unpredictable emotions, like flash backs, strained relationships and even physical symptoms like headaches or nausea. What takes most people to drinking is the issue of flashbacks. Those

individuals drink to avoid reliving the terrible experience. And by doing so, they put themselves at the risk of alcohol abuse or addiction.

Dissociation in the Context of Alcohol Abuse

There are so many reasons why individuals drink alcohol. But people drink some times to forget their problems. In fact, some individuals engage in alcohol consumption to dissociate themselves from their current painful situations and experiences.

Dissociation is a defensive mental mechanism originally described by Pierre Janet in 1889. Janet initially used the term “dissociation” interchangeably with “disaggregation.” Janet employed the term in the context of constitutionally predisposed individuals who were severely traumatized. Dissociation referred to the keeping apart of psychic clusters, often with the aid of amnesic barrier for the purposes of avoiding mental distress. Sigmund Freud (1893a) incorporated Janet’s ideas into his description of the “splitting of consciousness.” Dissociation also refers to the experience of unconscious segregation of any group of mental or behavioral procedures from the rest of the individual’s psychic activity, including numbing out, depersonalization and derealization that can exist, in degree, on a continuum (Putnam, 1997).

Fonagy and Target (1995), the psychoanalysts and researchers in the field of developmental psychology and attachment theory, found that over 90% of dissociative disorders have etiology in disorganized attachment and childhood abuse. More still, Philip Bromberg (1998) writes about the adaptive function of dissociative procedures in maintaining self-continuity and self-organization. Bromberg’s work describes how the individual who has developed a dissociative mental structure in response to trauma diminishes or can completely sacrifice the capacity for conflict, intersubjectivity and mentalization.

Elizabeth Howell (2005) asserts: “Dissociation is a human solution to the terror of dissolution of selfhood. The result of trauma is dissociation” (p. vii). Brenner (1994) speaks of “dissociative character” to highlight the fact that dissociation is a defensively altered state of consciousness that might lie at the core of certain character organizations. Most individuals with this type of character have been severely traumatized, and their psychic and, at times, physical survival depended upon the development and maintenance of isolated pockets of psychological experience. In Brenner’s view, there might be a hierarchical continuum of such dissociative character pathology. Dramatic forms of “multiple personality,” dissociative identity disorder in current psychiatric terminology, might represent one pole, and seemingly minor lapses of attention, unexplained sleepiness, and puzzling gaps in memory in the setting of an otherwise consolidated ego might represent the other pole of this psychological continuum. Intermediate forms might exist with disturbances of “object constancy” and temporal continuity of the self-experience (Akhtar, 2018, p. 83; Melanie Klein, 1930).

For Donald Kalsched (2013) the occurrence of dissociative defense is due to the action of an intrapsychic psychological, “the self-care system” activated in the event of trauma to safeguard the self:

Dissociation is an unconscious process that goes on outside awareness. It seems to be a hard-wired capacity in the human psyche, like the circuit breaker installed in the electrical panel of a house. If too much current comes in (trauma), then the circuit breaker trips. (p. 12).

Howell and Itzikowtiz (2016) delineates efforts to the individual towards resilience:

The dissociation model also helps us to understand how mitigating circumstances contribute to resilience. These often have to do with availability of another person with

whom to communicate about one's experiences, such as grandparent, another trusted attachment figure, or close friend who may offer comfort and understanding, helping the traumatized person to link the earlier overwhelming experience with current safety, so that it is not overwhelming. Such interpersonal relational forms of relatedness make it easier to tolerate and assimilate frightening experience, thus lessening the need for dissociation (p. 35).

Jean Petrucelli (2016) discusses dissociation in the context of her writing about her clinical work with addictive eating disorder, focusses on the adaptive function of dissociative processes in "maintaining self-continuity and self-organization and show how someone who has developed a dissociative mental structure in response to trauma diminishes, or sometimes completely sacrifices, the capacity for conflict, intersubjectivity and mentalization" (p. 167). We can, in part, imagine and recognize the symptoms of bulimia, binge eating, as well as conditions of malnourishment through anorexia, as an outcome of dissociation as well as indication of dissociation in the self-state of the symptom itself. Petrucelli (2016) emphatically states:

The dissociated self-state that is in the throes of bingeing and purging has limited agency and a narrowed cognitive field that necessarily limits choices. In those symptomatic moments, the eating disordered patient does not have access to other aspects of her or his reality, self-expression, or other modes of relatedness. Therefore, the body speaks when the mind cannot through the acts (p. 167).

Dodi Goldman (2016) observes that while Winnicott discusses the positive uses of dissociation when employed in the service of creativity, when dissociation is utilized in a response to trauma, dissociative processes can be triggered with deadening effect into a structured disposition as a defense against unimaginable arousal:

This use of dissociation is brought by the overpowering effect of emotions occasioned by a traumatic event or as defense against those emotions. Whichever the case, unlike depression, dissociation does not simply restrict access to potentially threatening feelings, thoughts and memories. Instead, it is akin to a “quasi death,” an obliteration of the self to whom trauma might occur (p. 98).

In concluding this psychological perspective, I wish to state that the most appealing psychological theories with regard to this project are the attachment and object-relation psychological theories. The individual who is drinking alcohol saw some value in the object (alcohol) and got attached to it or begin to relate to it.

Attachment is an emotional bond with the other person. For John Bowlby, (1958) the earliest bonds formed by children with their care givers have a huge influence that continues for life. He proposed that the attachment also helps to keep the infant close to the mother, thus improving the child’s chances of survival. In the like manner, those who drink, got drunk and worse become addicted believe that their chances of survival as authentic human being, depends in the drinking of alcohol.

Furthermore, object-relation theory in psychoanalytic psychology is the process of developing a psyche in relation to other individuals in the childhood environment. Applying this theory to this project one can infer that the thought of alcohol would become very stimulating to the alcoholics since it is already in their psyche. Therefore, the individual must go for it no matter what. As we have seen in the responses from the interview, the alcoholics can borrow money or even still money to satisfy their thirst for alcohol. In conclusion therefore, it is the attachment theory and object relations theory that appeal to me as it concerns this project.

A Theological Perspective on Alcohol Consumption and Abuse

An Introduction

The theological focus of this work centers on Christian theology among Nigerian people. I will begin this section discussing theological aspects relating to alcohol use in the African Traditional Religion (ATR). This will be followed by theological aspects of alcohol use in the three major monotheistic religions of the world: Judaism, Islam and finally Christianity, the religion of my primary focus.

So, when this researcher talks about a theological perspective on alcohol, I am talking about how alcohol consumption has been used by the people of faith in their religion. This involves the principles that are pertinent to alcohol use in the religious practices of the faithful. And such practices go back far in religious history. In ancient Egypt and Mesopotamia, female brewers were socially sanctioned but were protected by female deities specifically, *Ninkasi*, who covered the production of beer, *Siris*, who was used in a metonymic way to refer to beer, and *Siduri*, who was associated with the enjoyment of beer (Morewood, 2013).

The Egyptian god, *Osiris*, was worshipped as the god of wine and the lord of the dead from 3000 BCE to 500 BCE. In Mesopotamia, the Sumerians worshipped *Gestin*, a goddess and protector of wine. Later, the Greeks worshipped their god, *Dionysius*, as the god of wine. Dionysius was a focus of their yearly celebration that was marked by a four-day feast comprised of intoxication, sobering up, and atonement, and then celebration of Dionysius's return (Rose & Cherpitel, 2011).

African Traditional Religion (ATR):***A Synopsis***

A diversity of Traditional African Cultural Forms (TACF) came out throughout Western Africa that gave rise to African Traditional Religion. According to Thomas (2015):

All religions are connected to a particular people who venerate their culture as sacred.

For example, Islam has its origins within Arabic cultural forms that emerged from ideals within their tradition. These values were articulated in the Koran and elevated to the status of sacred. Christianity has its roots in Alexandria, Egypt, but in the fourth century was taken over by Constantine. From that point until today, Christianity has been articulated through a European cultural lens. We can speak of Christianity as a religion dominated by men, who have elevated European cultural forms to the status of sacred. They developed their concept of deity from their cultural myths⁵ and those proselytes who have adopted these religions are, in fact, participating in the veneration of Arab and European cultural forms. (p. 17).

In like manner, African spirituality is entrenched in the traditional African way of being. Those adherents of traditional African cultural forms have also raised their value system to the sacred realm.

Some African intellectuals gave, in a nutshell, what African traditional religion is. For instance, Thomas (2015) stresses:

African Traditional Religion is a compilation of the cultural practices of indigenous

African people. It is not a religion in the common sense of the word. African traditional

⁵ A myth connotes a creative story which dates back to time immemorial, calculated to explain an inexplicable phenomenon or a reality in human life that is prehistoric. So, myth does not fall within the category of truthfulness or falsehood even though it always appears vivid and realistic.

religion is a way of being in the world. It is how one perceives him or herself as an entity connected to mother earth. African religion is comprised of several traditional African cultural forms. It is eclectic and embrative of divergent views. It is a nature religion and views all things including human beings as an integral part of this sacred force. The vital force and its derivates are the primary focus of TACF (Traditional African Cultural Form). As one maintains right-relationship with these forces they are able to live in harmony with their neighbors and all things in existence. (pp. 154-155).

The close relationship between the physical and spiritual world is the most important aspect of traditional African culture. Most Africans held the traditional African cultural forms as their religion before the Arab and later, European invasions.

All over the various cultural forms followed by those who venerate the Traditional African Cultural Form (TACF), there exists a common tradition practiced even by those spread over a wide geographical area. According to Thomas (2015):

The Yoruba have customs and beliefs similar to those practiced among the Dagara of Burkina Faso and the Fon of Benin. One of the most common ideals held by traditional Africans is the notion that human destiny is predestined. One's vocation should be in harmony with their life choices, to maintain communal stability. Traditional Africans once accepted such ideas as a reality and many still believe that each human being has a unique path on which to journey. Many cultural groups in Africa and throughout the black Atlantic participate in common rituals that aim at maintaining balance between the existent and the life-forces that protect one's destiny. (p. 99).

Furthermore:

The *Abakuá* Society of Cuba has its root in the *Ejagham* and *Efik* cultural groups of southern Nigeria. The *Ejagham* and *Efik* people gave rise to this ancient secret society that entered the Americas when enslaved Africans arrived in Cuba. The word *Abakuá* may be a Creolized version of “*Abakpa*,” which is the West African community that honored this sacred tradition. Africans from southeastern Nigeria and southwestern Cameroon gave rise to an African cultural form that in many ways serves at the center of African theology in the New World. (Thomas, 2015, p. 233; Thompson, 1983, p. 227).

All these references go to illustrate that African Traditional Religion is continued to be practiced by Africans wherever they found themselves. In Nigeria, “*Ejagham* and *Efik* regions were once viewed as the land of secret societies. The *Ejagham* elites used *Nsibidi*⁶ to communicate, decorate clothing and pottery, and for initiation rituals into their secret society. *Nsibidi* was everywhere and only the initiated could decode its powerful messages” (Thomas, 2015, p. 233).

According to Kasomo (2010), p. 35:

African religions have no written scriptures: on the contrary the whole religious heritage is passed on orally and in deeds, that is by concrete living. Secondly, African Traditional Religions are ethnic in nature, and as such, religion and ethnicity are inseparable.

This quotation shows that ATR is anti-missionary since it is tied to the culture of the people. This implies that ATR adherents cannot go out of their way to win converts even though it remains open to other religions. Proving the reality of ATR and its openness to other religions, Pope John Paul II (1994) remarks:

⁶ *Nsibidi* is an ancient African hieroglyph or ideographic writing system that was brought to the New World by Africans. *Nsibidi* signs embody many powers, including the essence of all that is valiant, just and ordered. Those who mastered this sacred art form received much respect for their knowledge of this mysterious communication system. *Nsibidi* was also used by those wielding power to enforce societal laws and norms.

It seems that those who practice them are particularly close to Christianity, and among them, the Church's missionaries also find it easier to speak, a common language. Is there, perhaps, in this veneration of ancestors a kind of preparation for the Christian faith in the communion of Saints... There is nothing strange, then, that the African and Asian animists would become believers in Christ more easily than followers of the great religions of the Far East. (p. 82).

Thus, African Traditional Religion is real and experiential. The Pope not only affirms the reality and the influence of the African Traditional Religion but also emphasizes the similarity between ancestor veneration and the communion of Saints. Spirit arbitration and Ancestor reverence are the two principal pillars of African Traditional Religion.

The Concept of Spirit in African Traditional Religion.

The fact is that the spirits are the fundamental part of the religious heritage of Africa. People are strongly aware of the spirit world, and this consciousness affects their outlook and experiences in life for better and for worse. In the African understanding of the universe, the spirits occupy the area between God and man. No matter what the people may do to the spirits, and whatsoever the spirits may do to the people, African Religion would have weakened its followers if it had given no place for nature spirits and human spirits. One and the other seem to be unavoidable and rational in the thinking and experiences of African peoples. (Mbiti, J.S. 1991, Abioje, P. O. 2019, Kasomo, D. W. 2010).

In the African worldview, God is the creator of all spirits just as He is the creator of all things in the universe. There are so many attributes among different tribes in Africa indicating this belief. For instance, the Igbo tribe in the southeast of Nigeria calls God *Chukwu* (which means the greatest Deity or the Supreme Spirit), the Yoruba – *A dani wa ye* (The one who

created us and put us on this planet), or *Olorun/Oladumare* (Supreme God or Supreme Being), and in Ghana, God is called *Nyame* (He who knows and sees everything), (Idowu, E. B. 1996; Oso, S. O. 1979).

The spirits having been created by God are inferior to him and are dependent on him, and some of them may be used by God to do certain things. There are different types of spirits, namely: God, the Supreme Spirit; nature spirits which includes the sky spirits, and the earth spirits; the human spirits which also includes recently dead (living dead), and the long dead (ghosts) (Mbiti, 1991). In the next paragraph the nature spirits and human spirits will be discussed briefly for better understanding.

The Nature Spirits in ATR

The nature spirits are those which people connect specifically with natural objects and forces. Some are thought to have been created by God in the beginning as spirits; others are said to have been human beings of ancient times. The spirits breed among themselves, and their population is increasing exponentially (Kasomo, 2010; Mbiti, 1991; Abioje, 2019).

Some of the nature spirits are linked with objects and forces in the sky. These are: the sun, the moon, stars, rainbows, rain, storms, wind, thunder and lightning. Individuals believe either that such objects and forces are themselves spirits or that there are spirits inhabiting and controlling them. It is believed also that there are major spirits in charge of stronger forces of the sky. These are described as divinities or deities. Deities are concerned with matters affecting large communities instead of single individuals. More often than not, people make sacrifices and offerings to the divinities or deities, asking them to help or pass on their requests to God. Nonetheless, people may also ignore them and approach God directly. This practice is often

experienced by Africans from Nigeria, Ghana, and Uganda (Arinze, F. A. 1970; Mbiti, 1991; Ezeanya, S. N. 1979; Ejizu, C. I. 1994).

Just as there are spirits associated with the things and forces of the sky, so there are those associated with the things and forces of the earth. These are the forces and things closest to human life. African peoples believe that there are many of such spirits and that they are connected with: the earth, hills, mountains, boulders and rocks, forests and trees, water in various forms (like lakes, pond, rivers, waterfalls and rapids, lagoons and river banks), metals, different animals and insects, and some diseases like lunacy, small pox, and so on. Africans believe that certain spirits inhabit and control them and that some of the spirits are of higher status than others and so may be regarded as deities or divinities. These may include for instance, the spirit of the sea, the earth, the forest, the lake. Earth deity is called by the word for earth, *Ilè* in Yoruba, *Ala* in Igbo (Abioje, 2019, Mbiti, 1991; Thomas, D. E. 2015).

Moreover, Oso, (1979) offers the reason why the Earth (*Ala*) is regarded as deity by the Igbo tribe of southeastern Nigeria:

Ala is a female goddess except probably among the *Ika* where she is considered to be androgenous (having both sexes) with reference to her relationship to *Chukwu*; some say she is the wife of the Deity by whom she became the mother of mankind and of all things animate and inanimate which are the fullness of the earth. (p. 6).

The earth is regarded as mother because all living things survive by what the earth provides, when God allows rain to fall on it. Believe it or not the inanimate things rest their bodies on earth also. That is the scope to which the earth is indispensable. Therefore, the nature spirits are considered by Africans as being very close to them and should not be ignored altogether as some are very useful to their survival in existence.

The Human Spirits in ATR

Although nature spirits have no direct physical relatedness with people, human spirits are those that once were humans. Belief in the existence of these spirits is common throughout Africa. It is the natural result of strong belief in African Traditional Religion that human life is not brought to an end at the death of the individual, but it continues beyond death (Ejizu, C. I. 1994; Mbiti, 1991).

Spirits of those who die long time ago are no longer remembered in their human form by anybody. Africans still believe that such spirits must exist in the invisible world. Most of them are recollected through myths and legends as tribal, national or clan founders, and in recounting one's genealogies. Also, many of them appear in folk stories like *Onoja Oboli*, *Emeka Mbanugo*, etc., in Aguleri folklore. When remembered or featured in folk stories, the spirits of the antiquity are sometimes presented in exaggerated human forms (Ezeanya, S. N. 1979; Mbiti, 1991).

The spirits of people who have died recently are commemorated by their families, relatives and friends for up to four or five generations. The spirits are called the living dead to differentiate them from the ghosts of those who died long before that. The belief in the existence of the living dead is extensive all over Africa, although it is held more strongly in some communities than others (Mbiti, 1991; Arinze F. A. 1970).

The living dead are the spirits that are preeminent on the family level. "They are considered to be still part of their families. They are believed to live close to their homes where they lived when they were human beings. They show interest in their surviving families, and in return their families remember them by pouring out parts of their drinks and leaving bits of food for them from time to time" (Mbiti, 1991, pp. 77-78).

The living dead may visit their surviving family members in dreams or visions, or in the open, and make their wishes known. When people are confronted with sickness and misfortune in the family, the cause may be attributed to the living dead, except if magic or sorcery and witchcraft are responsible. In such cases, these spirits serve as an explanation of what has made things to go wrong. To put them right, the spirits have to be satisfied by sacrifices and rituals, by following their requests, or by correcting any violations of the proper conduct towards them. Normally, the diviner or the medicine man is consulted in order to find out exactly what the alleged spirits may wish (Arinze. F. A. 1970; Somé, 1997; Mbiti, 1991). The living dead are usually regarded as ancestors and this will be discussed in full in the following section.

Ancestral Reverence in ATR

Acknowledging the high value put by the African people on their ancestors, Pope Paul VI (1968) advised:

It is for you to take your future in your own hands, and keeping faithful to your rich ancestral tradition, to build it according to your own requirements, fusing in a special way the values lived by those who have gone before you and the benefits which modern procedures can bring to you. You know that one of these essential values is respect for the family human individuals, in the legitimate and varied expressions of their ways of life.... (p. 3).

By this advice, the Holy Father has demonstrated a clear understanding that ancestors and ancestral values, the family, nuclear and extended, are very much loved by African Traditional Religion. The components of both families consist of the living, the unborn, and the deceased.

Moreover, Idowu gives us a clear explanation about who the ancestors are:

The deceased are truly members of the families on earth, but they are no longer of the same fleshly order as those who are still actually living in the flesh on earth...Because they have crossed the borderland between this world and supersensible world, entering and living in the latter, they have become freed from the restrictions imposed by the physical world. They can now come to abide with their folk on earth invisibly, to aid or hinder them...To some extent, they are intermediaries between Deity or the divinities and their own children; this is a continuation of their earthly function whereby they combined the headships of the families or communities with the office of family or community priests or priestess. (Idowu, 1975, p. 5).

In the above citation, Idowu has introduced to us exactly how African Traditional religionists hold our ancestors. Furthermore, according to Kasomo (2010):

In regions of Africa with an agricultural system the first fruits of the harvest are offered to ancestors. Ancestors, who have a prominent place in the life of Africans, can only be appreciated vis-à-vis the African's concept of family life and community. Because of the continuing relationship between the ancestors and the living, death is not a traumatic event to Africans. At death one joins the ancestors and continues to live. (Pp. 57-58).

This shows that African Traditional Religion (ATR), believes in the afterlife. ATR maintains that life is a continuum.

In a nutshell, Kasomo (2010), pages 67-68 compared and contrasted ATR ancestor reverence and Catholic remembrance of the dead:

TRADITIONAL

CHRISTIAN

a. Addressee of ritual:

Ancestor.

God the Father, the Almighty Jesus, the Great Ancestor of the new people of God, risen as the first born among the dead and their head.

The communion of saints and departed close to God, but in vital fellowship with the living (“church triumphant”) the just departed.

b. Purpose of ritual:

To appease in order not to be troubled by the anger of the dead.

If “in purgatory stage” for forgiveness of their sins to reach God and communion of Saints.

To ask for favors and protection.

If “in heaven”: to intercede with God for the strugglers on earth still on the way.

To keep alive the clan and tribal solidarity.

c. Motivation of ritual:

Insecurity and fear.

Care for the departed’s eternal salvation

Need of help and protection.

experiencing communion of the Body of

Surviving union of the family.

Christ: Pilgrim and triumphant church.

d. Means of rituals:

Prayer to spirits.	prayer to God through the risen Jesus
Libations thought to be shared with the dead.	mediating. Invocation of the dead as intercessors e.g., litany of the Saints.
Self-discipline, e.g., sexual abstinence.	Remembrance in Eucharist offered for them especially on memorial days.
	Symbolic actions like sprinkling of holy Water, praying at grave.

e. Agents believed efficacious:

The dead themselves	God the Almighty and His Son our Savior
believed to be powerful	exclusively. The Saints' mediating
for good or evil.	intercession reinforcing the prayer of the living. Helpful: Our prayer for them and their prayer for us.

f. Missing:

No prayer for their salvation.	(Ideally:) no fear of the dead's evil influence
No attribution of living	upon the misfortune's causation to them but
	for their accommodation into spirits' community. No attribution of misfortune's causation to them.
No knowledge of "heaven" as the risen Jesus and his saints' everlasting joyful companionship with them.	

What is most significant here is that both the ATR adherents and Christians have favorable rituals for their dead loved ones.

The Worship of God in ATR

There is no house or building dedicated to God the most high in African Traditional Religion. This is because “in the African thought, we cannot liken God to anything, secondly, people do not build temples for God’s worship because they think of God as omnipresent, and since he is everywhere, He cannot be localized” (Dopamu, 2000, p. 29). So, God cannot be confined to a particular place because He is everywhere. In the like manner Mbiti (1997) emphasizes:

There is no limit to where and when African peoples perform one or more acts of worship. God is omnipresent. He is reachable at any time and place, and moreover, people worship Him where and whenever the need arises. (p. 53).

Thus, for traditional Africans, it is a waste of resources to construct buildings or temples for the worship of the Supreme God since He is present everywhere. Unlike many other religions, African Traditional Religion is:

An experiential-based and not an abstract phenomenon focusing on theological abstractions that lead to nowhere but more conjecture. One would think that such questions are designed to distract one from dealing with concrete issues that affect people on daily basis. The European has a preference for such preoccupations because, in so doing, he does not have to confront the horrors he creates throughout the world. (Thomas, 2015, p. 157).

Among the horrors created by the Europeans in the world include their blatant deadly grip over African continent. Apart from holding-back the entire African continent since the Berlin

Conference of 1884, till date, the recent unjust war going on in Ukraine is also among the horrors created by the Europeans in the world⁷.

The Concept of Salvation in African Traditional Religion

African redemptive culture repudiates utopianism as a form of salvation and is centered upon this world. In line with this Mbiti (1988/1989) remarks:

Salvation in African Religion has to do with physical and immediate dangers that threaten individual or community survival, good health and general prosperity or safety.

Salvation is not just an abstraction, nor is salvation in African Religion something to be realized at the end of time. It has been experienced in the past, and it is being experienced in the present. (pp. 59-60).

Salvation in the African Traditional perspective concentrates in the here and now. The anxieties that people experience due to life's contingencies, or from the vagaries of nature, from bad luck, from malevolent spirits, witches and sorcerers, the African Traditional Religions have outlined a variety of protective rites and rituals whose function it is to inoculate potential victims against all these evils.

Salvation occurs now. "It is a now event or otherwise it is a fantasy. For one to be "saved" or to become self-aware is one of the primary aims of African Religion. TACF are not fixated upon ideological abstraction that will take one to the kingdom of nowhere...Rituals and sacrifices are designed to bring one face to face with the world as it truly exists" (Thomas, 2015, p. 158). That is why some religious rites have evolved to keep the angry ancestors happy whenever it is discovered that they are offended, and to petition them to support and to protect

⁷ Since February 24 2022, Russia had been bombing and shelling Ukraine which culminated in the invasion of the entire country. The world is today witnessing untold human suffering created simply for sheer power display by Putin, the current leader of Russia.

their descendants. There are also purificatory rites to cleanse those who are defiled so as to avoid the impending destruction of the individual concerned as well as the threatening of one's corporate existence. For example, Sawyer (1969) pp. 58-65, observes:

In some cases, when a child, or family member is ill, an offering might be prescribed by a diviner in the form of a cock, hen, sheep, or head of cattle. The victim is offered in sacrifice after the sick and close relative have laid their hands on it. The victim so offered is regarded as having been given in exchange for the life of the person who is ill, now that the wrathful spirits, an ancestor or even witches responsible for the illness have been appeased. But the most common sacrifices in the form of food and libations are those offered to the living-dead (ancestors).

These rituals and sacrifices were strongly believed in by the African Traditionalists. It is part and parcel of the tradition.

African Traditional Religion have defined and understood human problems and needs in terms of individual and communal ills and misfortunes. Therefore, it is able to prescribe appropriate ceremonies and rites aimed at helping them to cope effectively with the ills of this worldly life. This is "a conclusive evidence of the fact that African Traditional Religions were and still are able to meet the real needs of Africans by procuring meaningful salvation (relief) for their problems" (McVeigh, 1974, p. 174). African Traditional Religion is one that speaks to the heart of the African in such a way that nothing else does. Any religious teaching of salvation which is preoccupied with the salvation of soul from the pangs of hell and eternal damnation, as Christian faith often appears to be, will remain inadequate to meet the needs of the African world, mostly if that salvation does not hold promise also for happiness and prosperity here and now.

In line with this, Thomas (2015) p.158 argues:

The main focus of TACF is to provide people with knowledge of self and knowledge on one's enemies. This knowledge is not of things separate from oneself, nor can it be acquired by learning about things outside of oneself. True liberation cannot happen by looking outside of oneself and expecting another to save you. The traditional focus was on self-knowing.

The phenomenon of self-knowledge will enable one to understand the kind of relationship he has with his neighbor and the community. Whether he is keeping up with his social and personal obligations to his family and the society, and if not, to make amend to avoid personal catastrophe.

Finally, the unwillingness of Africans to break ties with the African Traditional Religion resides in the fact that they are wedded to an African world-view in which salvation means relief or help in times of trouble in this life. Salvation thus indicates healing, driving away evil spirits, empowerment of the individual self, the promotion of fertility and success in life ventures for African traditional religion practitioners.

Wine and Alcohol Use in African Traditional Religion

Alcohol consumption has a long history, especially among the groups that were not prohibited by their religion. Alcohol and *kola* nuts⁸ (*kola* nuts are high in caffeine but are not in the same category as alcohol in terms of addiction or lethal implications of addiction) were consumed mainly during rituals, marriage ceremonies, burials, and funerals. In those instances, palm wine and hot drinks were precisely used in pouring libations and offering prayers while

⁸ In Nigeria, *Kola* nut is an important cultural symbol for many ethnic groups, it is given to guests at weddings, funerals, and naming ceremonies, and it is used in medicine. Ceremonial breaking of the kola nut is important for making people feel welcome in a village or gathering.

announcing the events (Somé, M. P., 1997; Nwagu E. N., et al., 2017). In African religion, alcohol is a means for communication with ancestors, so it is a main part of African religious practice. There is a diversity of rituals in African Religion. Some treat the life of the individual from birth to death. There are rituals which are performed occasionally, as when there is a war, raid, a locust infestation, or a natural disaster. It gives rise to a sense of certainty and familiarity. Rituals provide endurance and unity among those who perform or attend them (Mbiti, J. S., 2017; Basden, G. T., 2005).

Through the ritual action and word, people feel qualified to exercise a certain amount of control over the invisible world and the forces of nature. As a result, as human beings we see ourselves using everything at our disposal as a creative agent in the universe and not just as a passive creature. On grounds of ritual, he uses almost everything at his disposal, including symbols and colors, incantations, and oral formulas. Homestead rituals cover the building of new houses and barns for storing food, the fencing of cattle sheds, entering a new house, showing hospitality to guests and visitors, the departure and return of family members when they go away from home, including rituals regarding major changes in the family like birth, marriage and death (Somé, 1997). African people have rituals for all these features of home life. “The rituals are intended to bring blessings upon the homestead, to remove the impurities of sickness, to strengthen social ties...and to make the life of the homestead run smoothly” (Mbiti, 2015, p. 140).

Just like so many religions, ritual is part of African Religion. The need to placate the powers that operate outside the sphere of human control is a dominant feature in Igbo life [Igbo are the tribal people who still occupy the southeastern part of Nigeria]. To pacify these spirits, the people turn to sacrifice, and sacrifice is always at the center of ritual. Fear is the propulsion;

the sacrifices do not originate from any inherent desire to give, nor from any unconstrained love to render honor or worship (Mbiti, 2015, Arinze. F. A. 1970). Sacrifices provide the only way for people to escape from harm and the activities of malignant spirits. Neglecting to perform propitiatory sacrifices would make life insupportable, e.g., every member of the family or each member of the clan would labor under imminent threat of possible disaster. Every adult man must fulfill his obligation on behalf of himself and his family. Even in societies heavily influenced by Islam or Christianity, alcohol's role in traditional ritual inevitably comes up (Somé, 1997; Basden, 2005,).

Alcohol was basically associated with social exchange between peers as well as with the ancestors that drinking alone could be considered morally wrong. Beer brewing is likened to a child about to be born. This association with fertility is also evident in the stages of brewing the beer. Women brew for rituals in their marital house as wives, and also in their natal homes as daughters. Most of the beer brewed in the context of annual rituals is prepared by wives, whereas funeral beers demand substantial brewing activity by sisters of the house. Alcohol beverages were central to a set of traditional religious practices (Dumbili, 2013; Mbiti, 2015; Esan, O., et al., 2013).

Wine and alcohol in Judaism

Wine, the vineyard, the vine and grapes all have played a prominent part in Jewish culture, as can be seen in the major texts. To consider all the passages in the Bible and other holy texts which refer to these components, the result would be a long list of examples. Thus, I have chosen a few subjects which best illustrate the theological and symbolic importance of wine in Jewish tradition. And as for wine, “it gladdens the human heart” (Ps. 104:15). Even with the modern aspects of dealing with Jewish problem drinkers and alcohol abuse, wine is associated positively with all Sabbath and festival celebration, as well as brit milah (circumcision and weddings). Hence, it is an important substance of ritual, even if grape juice is substituted for the wine for children and for those who suffer from addiction.

Furthermore, wine is associated with major Jewish festivals like Sukkot, Passover, Shavuot, Rosh Hashanah, and the Sabbath. According to Rabbi Bernstein: “In Jewish tradition, wine is associated with sacred occasions (Sabbath, holiday, and life cycle events). Hence in Judaism wine is not sacred but is associated with sacred moments in time” (Rabbi Bernstein, personal communication, June 8, 2021).

In the Hebrew Bible, wine has a twofold significance: it is presented and elevated as a positive element given to humans by God, but at the same time it is surrounded with prohibitions outlined to regulate its use and discourage excessive consumption which could lead humans to “stray” from God (Manaresi, 2011; Is 5:11-22; Hos 4:11; Amos, 2:8; Gen. 9:20-21).

In the Hebrew tradition, a moderate use of wine has always been permitted, but excess is severely disfavored. For Hebrews, and later Jews, excessive wine consumption began with Noah’s drunkenness and nakedness. The vineyard has always played an important role in Hebrew culture, so much so that in religious terms it is the very image of Israel (Isaiah, the song

of the vineyard 5: 1-7). Furthermore, a bunch of grapes (as depicted in Numbers 13:23) is often to be seen in the art and architecture of the Synagogue (Maier J., & Schäfer, P., 1985).

Different words were used to denote wine in the Torah, but the term which occurs most frequently for wine is *yayin* (Serfass, C., 1909; Durand, O., 2001). This term is used for the first time in the Book of Genesis, 9: 20-27, the passages which narrate the drunkenness of Noah. “The term used to denote the vineyard is *kerem*, a word which carries a sense of nobility, from which we may infer that for the Jews, the vine is the most noble plants” (Volney, C. F. 1792, p. 23).

Nevertheless, the word for wine arose for the first time in the Book of Genesis 9: 20-27, there is actually a reference to it, although not explicit, at the beginning of the book:

And the Lord God commanded man, saying, “Of every tree of the garden you may freely eat. But of the tree of knowledge of good and evil you shall not eat, for on the day that you eat thereof, you shall surely die”. ...And the serpent said to the woman, “You will surely not die. For God knows that on the day that you eat thereof, your eyes will be opened, and you will be like the angels, knowing good and evil. (Gen. 2: 16-17; 3: 1-5).

The passage does not specify clearly which fruit was the one forbidden, and it was this lack of precision which gave rise to the development of exegetic literature dedicated to the study and analysis of these few lines, in an attempt to understand the nature of the Tree of Knowledge in the Garden of Eden. According to Manaresi (2011): “It was argued that the forbidden fruit was apple, but the verses from Genesis cited above made no reference to an apple” (p. 23). I do not really envisage that this is the suitable place to begin tracing the beginning of this argument, but I think it is necessary to quote at least some of the conjectures adjoining it. The debate that developed about the interpretation of Genesis, 3: 1-5 saw the great teachers of the 2nd century

C.E., and the 20th century in conflict, each suggesting a possible solution to the confusion (Manaresi, 2011).

The Talmud (the basic compendium of Jewish oral law, religious thought and philosophy) cites three opinions: Rabbi Zalman Nechemia (1931-2020), for example, held that the forbidden fruit was the fig, because Adam and Eve, once aware of their nakedness, used fig leaves to cover themselves (Gen. 3: 7), and it was rational to suppose that they used the leaves of the tree whose fruit they had just eaten. Rabbi Meir (2nd century CE), on the other hand, alluding to the episode concerning Noah in Genesis 9: 20-27, maintained that it was a vine, *gafen*, since the thing that most caused wailing to a man is wine, as it says, “and he drank of the wine and was drunken” (Gen. 9:21). Again, that the [forbidden] tree from which Adam ate was a vine, for nothing else but wine brings woe to man. Furthermore, Rabbi Judah says it was actually wheat stalks. He bases his contention on the fact that “a child knows not how to call out to his father and mother until he has tasted grain.” As such the tree of knowledge was actually grain. Yet another theory holds that the Bible deliberately refrained from specifying the tree referred to, so that humans would not feel hatred for the tree which had caused Adam and Eve to be banished from Eden (Silberberg N. June 24, 2021; Manaresi, M. 2011). “In Jewish tradition and even today, just like in Christianity, it has remained an unspecified fruit” (Rabbi, Seth, personal communication, May 19, 2021).

The Symbolic Importance of Vine and Wine

Since ancient times, the vine and the wine that is produced from it, have played a significant role in daily Jewish life and in Hebrew religious tradition. It is fascinating to observe that in sacred texts wine always has had a threefold sense: on the one hand, it is praised and exalted as a noble component capable of instilling joy in the hearts of human beings. It is used in

their rituals, e.g., in weddings, lifecycle events, etc. On the other hand, excessive and improper use is looked down upon due to destructive effects that result from alcohol abuse.

The Drunkenness of Noah.

The grapevine and the wine first appear in Genesis 9: 20-27 in the story of the drunkenness of Noah referred to previously:

When he drank some of the wine, he became drunk and lay naked inside his tent. Ham the father of Canaan, saw his father's nakedness.... Shem and Japhet, however, took a robe, and holding it on their backs, they walked backward and covered their father's nakedness.... When Noah woke up from his drunkenness and learnt what his youngest son had done to him, he said: "Cursed be Canaan"! (Gen. 9: 20-27).

Noah, a righteous man in the sight of God and worthy to be saved from the flood, wishing to thank the Lord God first offers a sacrifice and then plants a vine from which he obtains wine, and with this wine he became intoxicated. This was certainly most unfortunate beginning for vine and wine. However, the choice of the vine as the first plant to be grown after the flood might lead one to assume that the vine had a more exalted ranking than other plants in the hierarchy of the vegetable world, and that the wine produced with its fruit was not a forbidden drink but held, on the contrary, an important job and position (Manaresi, 2011).

The teachers knew well the difficulties which could arise from excessive consumption of wine, and that same story of the drunkenness of Noah is used to illustrate its negative effects, such as the threat to dignity and the inevitable sexual license which drunkenness brings with it (Busi, G., 1999). A legendary narrative was given in Midrash *Tanhuma*⁹ about the conversation Noah had with Satan while planting the vine:

⁹ *Tanhuma* is a midrash or legendary text of around 5th to 7th centuries C.E. The work quotes people who lived as early as 3rd century, but many authorities date the work around 6th century C.E.

While Noah was planting the vineyard, Satan appeared before him and asked: “What are you planting?” He answered: “A vineyard”. “What is it?” inquired Satan. “Its fruits are sweet, whether moist or dry”, he answered, “and from them one produces a wine that causes the heart of man to rejoice, as it is written: and wine to gladden our hearts” (Psalm 104:15; Manaresi, 2011, p. 27).

Noah was so large-hearted as to accommodate Satan in a deliberation about his viticulture.

The conversation in the *Tanhuma* continued: Satan suggested: “Come, let us be partners in this vineyard”. And Noah replied: “Certainly”. What did Satan do? First, he obtained a lamb and slaughtered it beneath the vineyard. Then, he took a lion and slaughtered it there, and after that he obtained a pig and an ape and slaughtered them in the same place. Their blood seeped into the earth, watering the vineyard. He did this to demonstrate to Noah that before drinking, man is as innocent as a sheep: Like a sheep that before her shearers is dumb (Isaiah, 53:7). But after he drinks a moderate amount of wine, he believes himself to be as strong as a lion, boasting that no one in all the world is his equal. When he drinks more than he should, he behaves like a pig, wallowing about in urine and performing other base acts. After he becomes completely intoxicated, he behaves like an ape, dancing about, laughing hysterically, prattling foolishly, and is completely unaware of what he is doing (Midrash Tanhuma, Noach 13; Manaresi, 2011).

According to the midrash or Jewish legend, all this happened to the righteous Noah. If the righteous Noah, whom the Holy One, blessed, could behave in such a fashion, how much the more so could any other man behave. The drunkenness of Noah is severely criticized in the Midrash also because wine has separated Noah from his sons, and even condemning his youngest son to servitude (Gen. 9:25).

Lot and His Daughters

Prior to the writing of *Midrash Tanhuma*, the Apocryphal book of Judith tells us of Judith overindulging Holofernes with wine and cheese. Holofernes wanted to sexually abuse Judith, but the wine put him into an alcoholic stupor and before he could act, she then beheaded him. This Apocryphal account regarding Judith suggests the Genesis account about Lot and his daughters, a controversial incident in which, once more, wine took on a negative undertone. The older sister said to the younger:

Our father is getting old, and there is not a man on earth to unite with us as was the custom everywhere. Come let us ply our father with wine and then lie with him, that we may have offspring by our father. (Genesis 19: 31-38).

As the story goes, that night they gave their dad wine, and the older one went in and laid with her father; but he was not aware of her lying down or her getting up. The next day the older one advised the younger to go to their father after they had wine him. Thus, he was not aware of her lying down or her getting up. As a result of this, both of Lot's daughters became pregnant by their father. The older one gave birth to a son whom she named Moab, saying, "from my father." The younger one, too, gave birth to a son, and she named him Ammon, saying, "The son of my kin." He became the ancestor of the ancient Ammonites. Wine is the negative substance in this instance, that led to the drunkenness of Lot, and later, to committing incest with his daughters, as well as the "birth" of peoples, like Moabites and Ammonites with whom the Hebrews had most problematic relationships.

Nevertheless, some ancient Jewish interpretations of this passage give an importance to the actions of Lot's daughters which is not entirely negative. The daughters believed they and their father were the only survivors of the destruction of Sodom, and thus saw no other way to

produce descendants, as they felt obliged to do. But notwithstanding, the end may be considered positive, the act which was the means to this end was by no means positive, since Lot's daughters made him drunk in order to commit incest with him. The negative significance of wine in this tale is pointed out also in Midrash, where it's written: "wine parted Lot from his daughters through incest, as it is written, and they made their father drink wine that night, the result of which was that both the daughters of Lot were with child by their father" (Midrash Leviticus Rabbah XII, 1 lev 153. See also Midrash Esther Rabbah V, 1, lev 66, in Manaresi, 2011, p. 28).

Alcohol, Wine, and the Nazarites

This is an instance of asceticism that impacts later developments in both Christianity and Islam. Chapter 6 of the Book of Numbers deals with the Nazarite vow, a special type of vow which had a time limit and was therefore only temporary, with the exception Samson¹⁰, as others might have been, who was a Nazarite from birth. Those who took the Nazarite vow undertook among other things, not to drink wine and not to cut their hair. The Book of Numbers states:

...When a man (or a woman) solemnly takes the Nazarite vow to the Lord, he shall abstain from wine and strong drink, he may neither drink wine vinegar... no razor shall touch his hair. Until the period of his dedication to the Lord is over, he shall be sacred, and shall let the hair of his head grow freely. (Num. 6:2b – 5).

This actually demonstrates that God prefers that those who are dedicated to him should stay away from alcohol. At least, this was the view of Old Testament since Christ the initiator of the New Testament made wine part and parcel of the religion he started as we shall see in the 'alcohol, wine and Christianity.'

¹⁰ Samson was a Nazir from birth: A man dedicated to God and entrusted with the task of freeing Israel from the Philistines. His superhuman strength derives from his strict observation of all points of the vow binding him, until Delilah instructed a man servant to cut off his hair and he loses all his strength. (Judges 13-16).

On the other hand, the Nazarite vow foresees that at the end of the period specified, the Nazarite must offer a sacrifice to the Lord God in atonement, since by his abstinence from wine he has sinned (Cohen, A. 2005). This is very interesting! Thus, for the Jews, complete abstinence was not considered a virtue, because it implied renouncing the pleasures of God's world. The Talmud itself reinforces this when it reads: "There is no joy without wine" (Ps. 104:15; Talmud Pesachim 109a;).

The Vine as a Symbol of Fertility

The resemblance of a vine heavy with fruit is used to signify fertility and abundance, as is related in the book of Numbers where explorers returning from the valley of Eshkol narrated of seeing a land so fertile that the fruit grown there requires two people to carry a bunch of grapes:

They also reached Wadi Eshkol, where they cut down a branch with a single cluster of grapes on it, which two of them carried on a pole, as well as some pomegranates and figs.

It was because of the cluster the Israelites cut there that they called the place Wadi Eshkol. (Numbers 13: 23-24).

Therefore, in the life of Israelites a heavy bunch of vine grapes signifies fertility of the land and of the people.

Wine as Happiness and Sorrow for Humankind

No one can deny that wine has been associated with soothing the sorrows of humans and cheering their hearts. Psalm 104 is the psalm celebrating the creation and in it, God, creator of the earth and all that it contains, created "wine that gladdens the heart of man" (Ps. 104: 15), because He wishes humankind to be happy.

There are also passages in which it is clear that the lack of wine can bring sadness to humankind: "in the streets they cry out for lack of wine; all joy has disappeared, and cheer has

left the land” (Isaiah 24: 11). Also, in the prophesy of Jeremiah we read: “Joy and jubilation are at an end in the fruit gardens of the land of Moab. I drain the wine from the wine vats, the treader treads no more, the vintage shout is stilled” (Jeremiah, 48: 33). Thus, even the mere presence of wine in the jars can bring joyful feelings to humans just as lack of it can bring sadness to humans.

Wine as a Medicine for Good Health

Long studies on alcohol have shown that wine in moderate quantities is good for the health (e.g., 1 Timothy, 5:23). It is good to note that already in ancient times the Jews were aware of this, as indicated in the following passages in the Talmud and the Midrash: “At the head of all medicine am I, Wine; only where there is no wine are drugs required” (Talmud Baba Bathra, 58b in Manaresi, 2011, p. 31), In these texts are found some references to the use of wine as a medicine, but it is necessary to remember that the positive effects are the outcome of moderate use, without any excess.

Rashi, Rabbi Shlomo Yitzhaki, 1040-1105 from Troyes, France, is considered the greatest Biblical and Talmudic commentator of the Middle Ages and perhaps of all time. He owned a vineyard and many of his writings make reference to wine and grape cultivation (personal communication with Rabbi Bernstein, March 15, 2022).

Moses Ben Maimon, better known as Maimonides (1135-1204) was a Jewish philosopher and doctor, very well-known and much respected since the Middle Ages. In his work, *De Regimine Sanitatis*¹¹ he cited the use of wine as a medical treatment: “wine is a nutrient. ... It generates praiseworthy blood... if mixed and left for 12 hours or more and then drunk, it is very good... and temperament improves” (Sandler, & Roger, 2003, pp. 34-35).

¹¹ A loose set of instructions provided by physicians to help a patient maintain good health (Google).

Wine and Alcohol in Islam

Nevertheless, the vine was certainly found from ancient days onwards, in the places where Islamic civilization originated as I expressed in the history of alcohol consumption. But wine was not usually drunk, on the contrary, wine was reserved for special moments, normally of a religious kind. For example, during the hajj pilgrimage to the sanctuary of Ka'ba (now the most sacred site of Islam) pilgrims were in the habit of drinking fermented drinks including *sharâb*, obtained by crushing fresh grapes; *nabîdh*, obtained from raisins steeped in water and then fermented¹², *sawîq*, made from fermented barley and honey; and *sawîq muqannad*, wine made from sugar cane (Borruso, A. 1993).

Wine was normally drunk in taverns called *hânût* that were run by Christians or Jews who came from *Al-Hira* (an ancient city in southern Iraq), and there was music, and dancing girls performed. The taverns were built of wood, the floors were covered with carpets of complicated design, and the position (bazar) were separated by curtains and lit by lamps. Sometimes, tables (called *khiwâm*) could be found, but the "Arabs, like the Greeks and Romans, were in the habit of lying down at their banquets, a custom probably introduced into Arabia through Syrian influence" (Manaresi, 2011, p. 60). The wine was served by a stewardess and drunk in goblets called *sahn*, or in cups called *qadah*. A green branch at the outer door of the tavern showed that wine was available; and "when the wine was finished the branch was removed" (Lo Jacono, C., 2000, p. 3; Lutz, H. F., 1922; p. 148).

There is a vast document bearing witness to the presence of vines and wine both in the lands where Islam began and, in the lands, conquered during the Muslim extension. "Wine is cited in the texts which characterize the original Islamic culture: poetry, the *Qur'ân* and the

¹² This term will subsequently be used to refer to wine made with dates, while wine made from grapes will be referred to as Khamr.

Sunnah. Understanding the symbolic role of wine in Islamic culture means widening our understanding of a culture very different from ours” (Manaresi, 2011, p. 60).

Wine and Alcohol in the Qu'rân and in the Sunnah

The revelation of the *Qu'rân* to Muhammad started in 610 CE., on Mount Hirâ near Mecca, and carried on until his death in 632 CE., The text was put in writing only about 650 CE., by the third caliph 'Othmân Ibn Affân (Manaresi, 2011).

Whereas we might not anticipate it to be so, the foundation and cornerstone of Qu'rânic education is the epitome of self-restraint. The standards were intended to control human emotions and behavior in order to safeguard the common good. It follows, then, that the group is placed above the single individual (*Qur'an*, 2001). This stems from the Jewish tradition where the community is also placed before the individual in most instances. It is different in Christianity where there is such emphasis on the salvation of the individual.

Alcohol is not always given a negative undertone in the *Qur'ân*, and the frame of mind towards it does not have a linear development. “From an initial positive evaluation follows a progressively more negative view, ending in condemnation” (Lutz, 1922, pp 153-154). Initially, wine and alcohol were catalogued among the good things given by Allah to Humankind, and both wine and the grapes testify to divine power and omnipresence:

And Allah has sent down rain from the sky and given life thereby to the earth after its lifelessness. Indeed, in that is a sign for a people who listen. In the cattle there is a lesson for you: We give you a drink that comes from their bellies, between their bowels and blood, pure milk, pleasant to drink; And in the fruits of the date-palm and the grape-vine

you obtain an intoxicant and good food. In this are (sic) signs for those who understand.

(*The Qur'an*, 1993; Sura 16, 65-67).¹³

Islam tried to convert the pagans, followers of Judaism and Christianity initially. Hence that might be the major factor as to why Islam and *Qur'an* had positive statements about wine consumption initially.

This parallels early New Testament statements by Paul which were more positive toward Jews and tolerant of Jewish tradition. When time passed and not all Jews accepted Jesus as the Messiah and were not baptized, Paul's statements about Jews and Judaism became more and more negative (personal communication with Rabbi Bernstein, December 31, 2021).

Perhaps the drunkenness brought about by excessive consumption of wine and of other alcoholic beverages have given rise to scandal. This disclosure was considered more of a suggestion than a serious prohibition. After a careful study of this Surah, some commentators have suggested that wine is not in itself negative, but only "contains" within it a sinful significance and is, therefore not explicitly prohibited by the *Qu'rân* (Rosenthal, F., 1975). But since people did not change their behavior, wine was disapproved of strongly, because of the negative effects which alcohol might have on the faithful, by causing them to make mistakes in their prayers:

Oh, you who believe! Wine (*Kamhr*)...idol-worshipping (*ansab*), and divination arrows (*azlam*) are an abomination (*rijs*) from among the acts of Satan. Keep away from them, so that you may prosper. Satan only wants to cause between you animosity and hatred

¹³ These verses date from the third Meccan period, which ran from 619 to 622, when Muhammad tried to convince the inhabitant of his city, Mecca, of his divine mission. Then in 622 came the Egrira, the migration of the Prophet from his city, perhaps on account of the worsening conflict between Muslims and those of their fellow-citizens who had remained pagans. The Surahs quoted in this chapter are taken from the Koran, translated by N. J. Dawood, (1993). London: Penguin Books.

among you with wine...and to divert you from remembrance of Allah and from prayer.

(Surah 5, 90-91, Manaresi, 2011, p. 69)

Hypothesis Concerning the Origin of Prohibition in Islam

The act of drinking an excess of wine is considered a wrongdoing both moral and spiritual:

A man who becomes intoxicated runs the risk of forgetting Allah, thus committing one of the worst sins a believer may commit, that of thinking only of oneself, the man who allows himself such “autonomy” commits the unpardonable sin of shirk (the sin of associating himself with God). We may therefore suppose that one of the reasons for banning wine is the state of degradation consequent to estrangement from Allah, since a human being is unable to take care of himself without doing something wrong, and so is unable to drink in moderation, without excess. (Heine, P. 1980, p. 8).

Generally, wine might thus be viewed as a substance that potentially could take the believer away from God/Allah/Father by one drinking to inebriety. This is an important point for all the three religions under consideration, Judaism, Islam, and Christianity. Theologically speaking, alcohol could be viewed as an idol, divorcing individual believer from God. Therefore, moderation should be the order of the day.

Furthermore, according to Rotty M. (1988) another possible interpretation links the origin of prohibition directly to Muhammad, suggesting that:

He forbade drinking in an attempt to make a clear demarcation between his disciples and other men, especially the disciples of Christ, for whom wine is not only tolerated but even took on the highest possible religious significance. Consequently, to label as impure

the drink which Christians considered sacred signified, for Muslims, the creation of an opposition and of the distinction which would endure eternally. (pp. 74-75).

Not only might this be associated with Christians, but also Jews who use it significantly in their religion too.

Other accounts state that the prohibition was decreed by Muhammad as a result of an incident in Medina after a supper with his disciples. It seems that one of his disciples began to recite a poem insulting to the tribe of Medina, then another disciple, who came originally from Medina, took offense and struck him with a bone on the head. The wound was small, but Muhammad was troubled by the quarrel and prayed to Allah how he could bring peace and harmony among his disciples. The reply can be found in Surah 5, 90-91. Thus, it could seem that a quarrel resulting from excessive drinking was the origin of prohibition (Johnson, H., 1990, Manaresi, 2011).

The Use of Wine as Medicine

For the purpose of proper understanding about how Muslims wrestled with the use of alcohol as medicine, it is important to bear in mind that the principles of Islam forbade even the use of wine as medicine. It was a serious struggle to devout Muslims who needed the medicine that has alcohol as part of its contents.

Forbidding the use of wine created considerable difficulties equally for those who practiced medicine at the time, in that practitioners would lose one of their main medicinal components (alcohol). The writers of Arab-Islamic medical compositions never mentioned wine, and Muslim doctors do not use medicines that contain alcohol, advising their patients to abstain from drinking it. However, there were occasions in which Arab doctors, who at the time (9th -11th centuries) were considered the avant-garde of medical practitioners, both for their mastery and

for the methods they employed¹⁴, were in the practice of using alcohol for medicinal purpose in some illnesses. “Al Rhazes (860-932), a great Arabic doctor, distilled alcohol from wine and used it to prevent infection in wounds. He was the first to use silk sutures and alcohol for hemostasis and as an antiseptic” (Sandler, M., & Roger, P. 2003, p. 35).

Furthermore, the Muslim doctors initiated and introduced new techniques of handling wounds:

Abucasis (936-1013) recommended treating wounds with cotton wool soaked in rose oil mixed with astringent wine and preventing the wound from being exposed to the air. He used tepid astringent black wine in compound abdominal wounds, irrigated infected sinuses with honey and dry wine. Haly ben Abbas, a famous Arabic physician of the tenth century, described Arabic medical practice of the time in his medical encyclopedia called *Almaleki*, which contained a section on the action of natural and artificial wines. (Sandler, & Roger, 2003, p. 35).

Moreover, Arab/Muslim doctors influenced medicine in many Jewish and Christian societies.

I conclude this section with some wise admonitions from a great Islamic medical doctor, the great Avicenna (980-1073). He made an exception to the rule, including in his work the *Canon of Medicine*, the use of wine for both the sick and the healthy: “Among beverages, wine, *nabîdh* and milk are nutrients, wine in small quantities is useful; in large quantities it is dangerous, do not get drunk as a habit; if you must, keep to once a month” (A. Borruso, 1996, p. 98). Avicenna in Islamic tradition, just as authorities in Jewish tradition, and as we will see by

¹⁴ Islamic medicine was the most advanced in the world at that time. Even after ten centuries, the achievements of Islamic medicine look amazingly modern. A thousand years ago the Muslim were the great torchbearers of international scientific research.

authorities in Christian tradition advised wine to be consumed sparingly for positive and not negative results.

Avicenna also advised that “white wine is best for those who are in a heated state, for it does not cause headache. Old red wine is best for a person with a cold, phlegmatic constitution. Wine is beneficial for persons with a predominance of bilious humor, because it gets rid of the excess of this by provoking the urine. It is good for persons of humid temperament because it brings humidity to maturity” (Gruner, O., 1930).

Wine and Alcohol in Christianity

Wine is a symbolic component central to Christianity, and the Church itself has found wine and wine-producing important because of its association with the blood of Jesus Christ.

This is an important theological distinction in Christianity from all other religions:

In the dark times of the Early Middle Ages, it was the Abbeys and the monasteries that preserved and passed on vine-growing and so ensured the survival of viticulture, which would otherwise have been lost. The agricultural lands belonging to the monasteries, often enlarged by bequests, became notable centers for vine-growing, making possible the continuation of viticulture. This was helped further by the dense network of communication among monasteries belonging to the same order, enabling a speedy exchange of any innovation in methods of cultivation and vinification. (Unwin, T., 1996, p. 75).

Apart from being used as a beverage among the various communities, wine was a necessary factor for the realization of religious services in which, until the twelfth century, dedicated bread and wine were eaten (St. Justin the Martyr, 150 CE.; Hippolytus of Rome, 236 CE)¹⁵. It was therefore necessary to obtain wine which, according to the canon law, “had to be produced only from grapes”, (Canon 924 §3). As the faithful multiplied and more people attended Holy Masses, it became burdensome to observe the Eucharistic precepts of the Holy Communion. The practice of using wine for the holy communion came to an end in 1215 CE., when the Fourth Lateran Council put forward the dogma of Transubstantiation (the real presence

¹⁵ The earliest Christian communities followed the Eucharistic precepts to the letter, drinking wine and eating bread. Both St. Justin the Martyr (150 CE) and Hippolytus of Rome (236 CE) gave detailed descriptions of the celebration during which bread and wine were distributed (using only one chalice, as tradition decreed). St John Chrysostom confirms the importance the “Blood of Christ” in one of his catechisms, and St. Ambrose and St. Augustine in their writings assert that communion under two species was the only form of communion recognized.

of Christ in the sacrament of the Eucharist, when the bread and the wine became the Body and Blood of Christ due to the consecration prayer said over the bread and the wine by the priest), and ruled out the laity from consuming wine during the Eucharistic celebration (Council of Constance, 1414-1418; Council of Trent, 1545-1563). This, however, did not mean that wine was now inconsequential for the Holy Mass.

In the New Testament, the vine and wine were mentioned frequently as subject matters, and in spite of the fact that there is very little evidence to support the theory, it is believed that Christ himself usually consumed wine when in company. For this reason, he was accused by the Pharisees of being a “glutton and a drunkard, a friend of tax collectors and sinners” (Luke 7:4). This is in contrast to John the Baptist, who was known for his asceticism (Mark, 1:6; Matthew, 3:4; 11:8). The approving attitude of Christ and of the New Testament towards wine can also be deduced from a number of narratives and parables, but also, as in Islam or Judaism, excess and drunkenness are disapproved.

Wine and the Fathers of the Church

The Fathers of the Church knew very well that in the New Testament scriptures wine gained a new significance and so its use had to be defended against those who would prohibit it and those who drank until they became intoxicated. In a fifth century Armenian text attributed to John Mandakuni, (1981), is found:

Even in the Old Testament, those who entered the Tabernacle abstained altogether from drinking wine. How much more then should we, in the New Testament, live sober, in the sight of God, if we do not wish to be overcome by the intoxication of lust and judged like sons of Aaron, who for their licentiousness were destroyed by sudden fire. (p. 331).

In the defense of wine against attacks from heterodox and orthodox Christians of the time who desired to impose temperance, John Chrysostom cited the scriptures: “And wine it says, to gladden our hearts” (Ps 104: 15). Those who misuse it brought sadness, since they who became inebriated were resentful beyond measure, and great darkness covered their thoughts. It is the best medicine when it has the best restraint to direct it (Schaff, P. 1886).

Against heretics, who spoke evil of God’s creatures, John Chrysostom argued that Paul would not have allowed it, nor would have said it was to be utilized. And not just against the heretics, but also in the case of the simple ones among us. Who when they see any individuals disgracing themselves from drunkenness, instead of reproving such a person, blame the gift from God. We should tell such people, “Let there be no drunkenness.” For wine is the function of God, but drunkenness is the operation the devil. Wine maketh no drunkenness; but intemperance produceth it. Do not blame that which is the workmanship of God but criticize the madness of fellow mortal beings (Schaff, 1886; also, Mark, 1:6; Matthew 3:4). The subject of wine is also discussed by other Fathers of the Church who finally “rescued” it from those people, both inside and outside the Church, who wished to impose sobriety.

For instance, St. Augustine following the teaching of our Lord Jesus Christ regarding vine in John 15:5, says:

Jesus Christ confirms that He is the new Church (the vine) and that mankind are the members (the branches). The vine represents the Christian community and only those who choose to be a part of it as the branch is part of the vine will be able to bear fruit; much fruit or little, it does not signify; what matters is that men must know that without the vine (that is to say, outside the Christian community) they will be unable to bear any fruit at all. (St. Augustine, 1968, pp. 1235-1245).

So, symbolically vine here has taken on a new significance where it represents Christ Himself and His community as a tree and its branches.

The Marriage at Cana

In his Gospel, the Apostle John narrates that the first miracle Christ performed happened in Cana, Galilee, while attending a wedding feast along with his mother when he changed the water into wine (John, 2: 1-11; Matthew, 14:13-21; Luke, 9:12-17). It is captivating to learn that in Christ's first miracle, wine took on a central symbolic role. The miracle happened during a wedding, the ultimate objects which characterize a wedding being wine and a banquet:

“Christ changes the water into wine, although he could just as easily have given orders to throw away the water in the jars and then have filled them with wine conjured from some mysterious source (as he will later do with the bread which fed thousands), He chose instead to reveal himself to His people by means of a gesture which would remain impressed in the memory of those who saw it and would demonstrate that he really was the long-expected Messiah, the good wine which had been awaited “until now”.

(Manaresi, 2011, p. 47).

Here the wine represented abundance (the jars), joy for the arrival of the Messiah, and quality (the best wine, because this wine was better than the one served earlier on) and it is an indication that the ancient covenant had come to pass (Manaresi, 2011).

Cautions and Banning about Wine in Christianity

Christ's good disposition towards wine meant that the first Christians had no pausing about drinking wine in accordance with local practice in Palestinian, Graeco-Roman and Jewish societies of the time. In order to control the consumption of wine so that it does not lead to intoxication, Christianity had at all times strongly condemned drunkenness. St. Paul, both in his

first letter to the Thessalonians and his letter to the Romans, gave severe warnings to the faithful: “Those who sleep go to sleep at night, and those who are drunk get drunk at night. But since we are of the day, let us be sober” (1 Thess. 5: 7-8). Continuing, St. Paul admonished the Christians: “Let us conduct ourselves properly as in the day, not in orgies and drunkenness” (Romans, 13:13), while in his more recent Epistle to the Corinthians he gave a stern admonition to the newly-converted Christians of Corinth for their attitude of excess drinking, since if they persisted in their behavior, they would lose the kingdom of God: “Do not be deceived; neither fornicators ...nor drunkards will inherit the kingdom of God” (1 Corinthians 6: 9-10), another reprimand was repeated in Galatians (5: 19).

St. Paul warned strongly against drunkenness, and also in case of the dangers, the reprehensible behavior, and in the case of excesses which may follow: “Do not get drunk on wine, in which lies debauchery” (Ephesians, 5: 18). To guarantee that drinking wine should not lead to such disgraceful behavior, St. Paul incorporated in his Epistle to the Ephesians a clear caution about excessive drinking that came close to prohibiting the consumption of wine. Actually, aware that he could not prohibit the consumption of wine altogether, since it is an important part of the Eucharist, St. Paul chose to preach restraint and prohibit excess.

The Use of Wine as a Medical Treatment

To prove the beneficial properties of wine, the New Testament gives numerous instances of its beneficent effects on health, which were already known to the medical men and women of the time. In the parable of the good Samaritan, Christ says that the Samaritan poured wine on wounds of the traveler who had been attacked by bandits, to subdue and disinfect them. “He approached the victim, poured oil and wine over his wounds and bandaged them” (Luke 10:34). While in his letter to Timothy, St. Paul wrote that wine, when drunk in a reasonable amount, is

good for the stomach: “Stop drinking only water, but have a little wine for the sake of your stomach and your frequent illnesses” (1 Timothy, 5: 23).

It is also recorded that throughout the Middle Ages, Christian monks carried on the use of wine in their curative treatments. As a confirmation that wine was used as “medicine”, we should recollect that the monks in their monasteries, and especially in their monastic libraries, protected the medical knowledge of times past. One of the eminent medical schools was without a doubt that of Salerno in the south of Italy, where the use of wine as medicine was a major factor of the teaching. Jews were also prominent in the medical school of Salerno, and especially Padua for centuries in Medieval times when Italy consisted of City States. Wine was often quoted as a therapeutic agent in the Government health service in Salerno, where it was prescribed as a nourishing element, as a tonic and as an antiseptic (Harington, J., 1920).

The Last Supper and the Rite of the Eucharist

The greatest symbolic expression of wine in the Christian religion is found in the Last Supper and in the rite of the Eucharist as recounted by St. Paul and three of the Evangelists. Their narrations differ slightly, but all concur in describing the rite of communion with bread and wine.

From the beginning the Christian church has practiced the Eucharist, even when it was not known by this name. “The term Eucharist first appears about 110 C.E., with St. Ignatius of Antioch and then about 150 C.E., with St. Justin” (Xavier, L., 1965, p. 522). According to the document of the Second Vatican Council: “The Eucharist is the source and summit of the Christian life” (LG 11). Continuing, the Catechism of the Catholic Church stipulates:

The other sacraments, and indeed all ecclesiastical ministries and works of the apostolate, are bound up with the Eucharist and are oriented toward it. For in the blessed Eucharist is

contained the whole spiritual good of the Church, namely, Christ himself, our Pasch.
(CCC #1324).

So, the holy Eucharist is the bread and the wine which are changed into the body and the blood of Christ through the consecration prayer said over them by a validly ordained Catholic priest. In summary, “the Eucharist is the sum and the conclusion of Christian faith” (CCC# 1327).

The First Letter of St. Paul to the Corinthians

The first proof of the Christian practice of commemorating the Last Supper of Christ with a ceremony is found in the first letter of St. Paul to the Corinthians.¹⁶ For instance St. Paul says:

For I received from the Lord what I also handed on to you, that the Lord Jesus, on the night he was handed over, took bread, and, after he had given thanks, broke it and said, “This is my body that is for you. Do this in remembrance of me”. In the same way also the cup, after supper, saying, “This cup is the new covenant in my blood. Do this, as often as you drink it, in remembrance of me”. (1 Corinthians, 11: 23-29; Mauro, 2011, p. 53).

When St. Paul handed the letter to the Corinthians, the letter which he had written, he also handed over what he himself had received. The reception of the Holy Communion signifies that the faithful now belongs to the Christian community. And the Church’s interpretation is that Christ now lives in the individual who receives the Holy Communion and NOT that the individual lives in Christ. We finally get to the critical idea that the wine and the blood of Christ are intrinsic and crucial to the presence of wine in Christian tradition.

The Synoptic Gospels.

In Matthew

Then Christ took a cup, gave thanks, and gave it to them, saying:

¹⁶ The text of this epistle was probably written about 52-55 CE., while St. Mark’s Gospel, the earliest of the four to be written, dates from between 65 CE., and 80 CE.

Drink from it, all of you, for this is my blood of the covenant, which will be shed on behalf of many for the forgiveness of sins. I tell you, from now on I shall not drink this fruit of the vine until the day when I drink it with you new in the kingdom of my Father. (Matthew, 26: 27-29).

In Mark

Then our Lord Jesus Christ took the cup of wine, gave thanks, and gave it to them, and they all drank from it. He said to them: “This is my blood of the covenant, which will be shed for many. Amen, I say to you, I shall not drink again the fruit of the vine until the day when I drink it new in the kingdom of God” (Mark, 14: 22-25).

In Luke

Then He took a cup of wine, gave thanks, and said: “Take this and share it among yourselves; for I tell you (that) from this time on I shall not drink of the fruit of the vine until the kingdom of God comes.” ... And likewise, the cup after they had eaten, saying: “This cup is the new covenant in my blood which will be shed for you” (Luke, 22:16-20).

In these passages, the Lord never mentioned wine by its name explicitly, but it is always referred to as “the fruit of the vine¹⁷”. “Although the Gospels give little information on the matter, it is now generally accepted that the Last Supper took place during the feast of the Passover” (Xavier, 1965, p. 308),¹⁸ just as has already been explained in the preceding pages, wine played a significant part in the Passover. Nevertheless, while it is widely believed so by many Christians, according to Rabbi Bernstein: “Scholars of the New Testaments, both Jewish

¹⁷ The “fruit of the vine” was also the expression found in the contemporaneous Jewish writing at the time of the New Testament, the Mishnah that eventually was edited in the year 200 C.E.

¹⁸ According to the synoptic Gospels, the Last Supper was unquestionably a Passover Supper, but there are varying interpretations concerning the day on which it was celebrated. Mark, Matthew, and Luke link the Last Supper with Passover but not John.

and Christian do not ‘universally’ accept that the Last Supper took place during the Passover largely due to the account of the Gospel of St. John. The synoptic Gospels have different ideas about the Last Supper coinciding with the Passover” (personal communication, July 7, 2021).

Christ chose bread and wine to mean not only his death but also his gift of himself to humankind. Wine constitutes the pleasant sides of life: “love, jubilation and celestial joy, while the cup of wine used in the rite represents the new covenant between Man and God” (Rossano, & Ravasi, 1988, pp. 524-526).

A Brief Theological Reflection on the Potential Linkage of Alcohol to Abusive Behavior

A famous Roman adage states that “virtue stands in the middle” and this means that moderation is called up especially in, eating, or drinking. From the foregone discussion on the use of alcohol, we have seen that alcohol consumption could be very healthy and nutritious if drunk with moderation (1Tim. 5:23). Many doctors as we saw above, used alcohol for treatment of diseases and curing of wounds and even prescribed it to their patients. It served as both medicine and food if drunk with restraint.

On the other hand, we have seen even in the scriptures the abusive behaviors which were attributed to the excessive consumption of alcohol. For instance, Noah cursed his younger son, Ham, because his son saw his nakedness when Noah was under the influence of alcohol (Gen. 9:20-27). Lot himself, committed incest with his two daughters when under the influence of alcohol (Gen. 19:30-38). Therefore, heavy consumption of alcohol cannot only cause sickness but can also be associated with abusive behavior, as might be the case with other factors. Hence, I offered on page 7 of this work the three hypotheses: Problem drinking is associated with domestic violence. Secondly, problem drinking causes domestic violence. And thirdly, alcohol abuse changes the participant’s relationship with God.

Since alcohol is a ubiquitous part of everyday life in many cultures and when alcohol abuse occurs, the results can range from celebratory happiness to dark despair, and from cheerful friendliness to violent revenge (Rose & Cherpitel, 2011). Both the Nigerian government and the Church in Nigeria have the obligation of developing policies that would help regulate its consumption. As a material stimulant, alcohol has a casual force that acts on people. Its psychoactive quality lends it added value and people go for this quality. The intense social nature of drinking surfaces as one of the factors that encourage drinking. Some argue that it strengthens

social ties among peers, colleagues and associates. It is used to celebrate important social occasions, rite of passages like marriage, funerals and religious rituals (Bryceson, 2002a; Somé, 1997; Okonkwo, 2017). All these are good. Nevertheless, when alcohol is consumed in excess, abusive behavior can – and too often does – result.

Still worse is the calculating maneuvers of an alcohol industry and government officials who maximize sales and fiscal revenue from alcohol. This high economic value placed on alcohol is a problem. The Church, acting as a mother, has the onus of calling the government to task by initiating a community support network of people seeking to control drinking patterns.

Succor to the Alcoholics in the Context of Religion/Spirituality

From time immemorial, problem drinking has been in the human community. At the same time, there have been human survivors. While human beings have suffered from problematic drinking, not all members of animal kingdom are afflicted with alcohol addiction. Most human sicknesses can be found in animals, but there is no proof that animals in their normal habitat develop addictive maladies. Animals whose brains have been medicated by humans with certain chemicals may eat or drink excessively. But naturally, this does not happen in animals. Seeking gratification in excesses appears to be a peculiarly human phenomenon (Twerski, 1990).

As opposed to animals, which have only physical urges and desires, humans set their hearts on spiritual fulfillment as well. When these spiritual needs are not satisfied, a human being feels indeterminately disrupted. “While the necessary objects to satisfy hunger, thirst, or sex drive are easily identified, spiritual craving is harder to recognize and fulfill” (Twerski, 1990, p. 91). Thus, humans are spiritual animals, and as such, in their problems or sicknesses, spiritual mitigation should be equally sought. This makes possible the need for self-help facilities like twelve step programs for the alcoholic addicts.

Olitzky, K. M., & Copans, S. A. (2009), articulated the 12 steps of AA in full detail:

1. We admitted we were powerless over alcohol—that our lives have become unmanageable.
2. Came to believe that a power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God as we understood Him.
4. Made a searching and fearless moral inventory of our selves.

5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of our character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as a result of these Steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs (p. xxxii).

Looking at these principles one could see that it simply involves honesty. The truth will set us free (John 8:32). These “12 steps of AA are intended to help us make the changes necessary so that we can rid ourselves of addition and discover the inherent treasure already within us” (Steinberg, P. 2014, p. 100).

From the point of view of Jewish Culture

It is believed that an addict suffers from one or more systemic splits: a crack between affect and logic or a crack between self and context. Effective treatment is understood as recovering integrity, that is restoring the splits (Blakeney, C. D., et al. 2005). Former experiences indicate that certain substances do produce a sense of gratification, addictive thinking guides the

person to try to use food or alcohol or other drugs or sex or money to extinguish this vague craving. These objects may give some relief, but they do not solve the basic problem: the individual's unmet spiritual needs. The feeling of satisfaction vanishes soon, and it is replaced with the ill-at-ease feeling (Twerski, 1990).

The question is, why is it that an individual can easily identify that food satisfies hunger and that water satisfies thirst, but does not as readily pinpoint his/her spiritual cravings?

Abraham J. Twerski, provides an answer thus:

A human being is not just another animal, differing only in degree of intelligence.

Humans, as morally free beings, can choose whether to recognize their spirituality and their unique relationship with God. (Twerski, 1990, p. 93)

Consider it this way. Human beings require certain amounts of vitamins A, B complex, C, D, E, and K to function normally. A defect of any of these vitamins will ensue specific deficiency syndromes, such as scurvy with vitamin C deficiency or beriberi with vitamin B-1 deficiency, etc. If an individual lacks vitamin B-1 and is given high doses of C, the deficiency disease will endure. Nothing is altered until the specific vitamin needed is supplied. You cannot compensate for a lack of one vitamin with high dosage of another (Twerski, 1990).

This is analogous to the blunder addicts commit. The addictive thinker considers that since alcohol or other drugs or food or sex or money have satisfied some cravings, they will equally satisfy other needs. This behavior as well helps us to understand the phenomenon of switching addictions, for instance, changing an eating disorder for compulsive gambling or changing sexual addiction for workaholism (Twerski, 1990; Joseph, B. 1982; Lloyd, 2015).

Beit T'shuvah synagogue is the only Torah (Hebrew Bible) based 12 step (that is Alcoholics Anonymous) community in the USA. This resident program houses 100 people,

about 60 in the core program, about 6 months in duration, and another 40 in sober living or independent living programs (Blackeney, et al 2005). However, Jewish Alcoholics, Chemically Dependent Persons, and Significant Others (JACS) is predominantly mutual support network for Jewish individuals and their families that are affected by drug addiction and alcoholism. In fact, “no Jewish organization has done more for alcoholics for the past 40+ years than JACS” (Personal communication with Rabbi Seth, March 28, 2022).

There is increasing credible evidence that religion/spirituality plays an important role in recovery from addiction (Miller, 1998; Moos, 2003). The reason is that, participation in religious institutions, the social and ritualistic aspects of religion, and spirituality both personal and collective prayer and a connection with the transcendent, ultimate, divine are said to enhance the likelihood of maintaining sobriety (Koenig, McCullough, & Larsen, 2001).

From the point of view of Muslim Culture

The exact number of Muslim addicts accessing treatment in Western countries, if recorded would merely be the tip of iceberg since many may never seek treatment due to the taboo of addiction in Islam (Lynne All-Northcott, 2012). Secondly, Muslims are more wary of approaching Western Services because they are afraid it could compromise their culture or religion (Arfken et al., 2009). “Many Muslims try to overcome their problems of drug abuse and addiction through the family, community, or in their family’s country of origin” (Lynne All-Northcott, 2012, p. 359).

Lynne All-Northcott (2012) illustrated the reasons why in Islamic countries there were no treatment agencies for the Muslim addicts. Apart from addiction being a taboo in Islam, Muslim caregivers will often seek help from Western treatment services after they have exhausted

everything else. These include, *du'aa* (supplication to God). Their caregivers are of the opinion that if they forebear and pray to God, at last their loved one will stop accessing substances.

“Another nonaction approach is to ignore the problem and stay in denial” (p. 359).

More often than not, “Muslims believe that they can resolve the problem within their own home, and there have been many cases of drug and alcohol users being locked up in a room. Their caregivers lack understanding about the process of addiction and see it as merely a physical problem, and that once detoxified, their loved one will be cured” (Lynne All-Northcott, 2012, p. 359). Another awkward reaction of caregivers is to arrange a marriage for the addict, presuming that by forcing responsibility upon him or her, the addict will become abstinent. Regrettably, in most cases the addiction continues and results in damaged marriages. Generally, the next to last reaction is to send their loved one to a clinic in their country of origin if they person is residing in the non-Muslim Western countries, thinking that it will better meet their loved one’s religio-cultural needs than any Western facility can. Sadly, in such cases caregivers are naïve as to what can actually happen in such clinics (Lynne All-Northcott, 2012).

The following report given by Jamal, a young Muslim addict, as recorded by Lynne All-Northcott, 2012, exposes the fact:

Most of the time I was completely out of it on sedatives. Sometimes they would wake me to throw cold water over me and tell me how much of a pig I was. I was beaten and tied to a ceiling fan. When I told my parents what was happening, they said that the doctors told them I would say such things just so that I could leave and take drugs again. When it was time to go, they said I had been uncooperative and needed further treatment just so that my parents would give them more money to keep me in longer. (Pp. 359-360).

It is only when the caregivers realized that all else has been tried and failed, that they decide to contact a Western service. This holdup can be avoided if Western services are able to establish relationship between themselves and the Muslim community and gain cultural understanding and competence to retain Muslims in treatment (Lynne All-Northcott, 2012).

From the point of view of Christian Culture

At this juncture, I want to bring to the notice of all our brothers and sisters in Nigeria and especially the Catholics entangled with problem drinking that all hope is not lost. The 12 Step and other self-help therapies are available. Self-help groups provide a vital resource for the alcoholic who is seeking support for abstinence. Self-help groups are nonprofessional organizations that are peer-operated by persons who share the same addictive disorder. Self-help groups are free and members can attend them perpetually if they want to (Humphreys K., et al. 2004).

Alcohol Anonymous (AA) is one of those self-help nonprofessional organizations. AA experience is made up of many concepts and activities. Identifying the specific aspects of AA that play the greatest role in facilitating sobriety has become the focus of intense research interest (White, W. L., & Kurtz, E., et al. 2006). Some of the reasons why it has been so useful in facilitating sobriety has been laid down by its co-founder Bill Wilson. AA is a combination of elements of medicine, psychiatry, religion, and the personal experience of its early members. Many of the essential AA principles taken from medicine and religion are in harmony with each other (Wilson, B. 1944). Among other things, the 12 steps in AA include:

1. Admission of alcoholism
2. Personality analysis and catharsis
3. Adjustment of personal relations

4. Dependence upon some Higher Power
5. Working with other alcoholics

The essential elements of recovery are symbolized by the acronym HOW, which implies:

- Honesty (with self and others),
- Open-mindedness (to explore new ways of thinking and behaving), and
- Willingness (to acquire new behaviors and thought patterns).

Honesty about one's addiction is observed at AA meetings where members introduce themselves with: "My name is Z, and I'm an alcoholic." This is done to counteract denial, which is considered the hallmark of addiction, "the disease that tells you that you don't have the disease" (Laudet, 2008, p. 71). The founders of AA being aware of the self-willed rebellious nature of the alcoholic, presented the Twelve Step program of recovery as a suggestion rather than a directive that must be adhered to (Laudet 2008).

Other professionals like Witbrodt and Kaskutas (2005), in their ingenuity developed a set of guidelines to encourage professionals in helping their clients prioritize which component of the AA program to practice at specific stages of sobriety. In early sobriety, clients should be assisted to commit to meeting attendance, obtain an AA sponsor, and form a social network that motivates sobriety such as the kind that AA can provide. Early involvement in service work also has a definite sobriety-enhancing effect. Research consensus is that the level of involvement in AA has a much more powerful effect on the achievement of abstinence and other benefits than the number of meetings attended. Another important discovery is the long-term beneficial effect of the level of AA participation because the extent of involvement at three years strongly predicts involvement at ten years.

The different components that compose AA involvement include practicing the principles of the AA program, active participation in the fellowship of AA, and presence at AA meetings (Westphal, V. K., & Tonigan, J. S. 2003).

Prayer

Faithful Christians believe in divine intervention therefore practicing the principles of AA program wouldn't be a problem. A Catholic could also invoke the intercession of the Angels and Saints especially, Venerable Matt Talbot who is the patron saint of men and women struggling with alcoholism (Costa, A. 2016). Alcohol addicts can learn from their own experiences as addicts.

Matt was born in Dublin, Ireland. He was one of thirteen children of his mother and his alcoholic father who worked on the docks. Matt was thirteen years old and had received only a few years of schooling when he obtained work as a messenger for some liquor merchants. It was during his time as a manager when he began to drink excessively. For fifteen years until he was almost thirty years old – Matt was an active alcoholic (Costa, 2016).

Even though he worked hard on the job, he also drank hard and often returned home late after being out with friends after work. He would sometimes borrow money to keep up his daily habit of drinking, even stealing money once from a friend. In speaking about his early life, Matt once said that he would occasionally think about the Mother of God, and every once in a while even pray the rosary. Perhaps these prayers to the Blessed Mother had something to do with his recovery from alcoholism. People of faith who found themselves entrapped in this unfortunate quagmire of alcoholism could look at the life history of Ven. Matt and take him as model (Costa, 2016).

Describing the frustration of the family members of an addict, Anne Costa narrated: “A friend once described the experience of loving someone who is addicted as trying to harness a hurricane” (Costa, 2016, p.16). Actually, in the midst of all the chaos, worry, and pain, one can get tossed about, and God can seem so very far away. But in reality, God is not far from people of faith but very, very near. The scripture is clear that God has the power to calm the storm of any addiction:

The reeled, staggered like drunkards; their skill was of no avail. In their distress, they cried to the LORD, who brought them out of their peril, hushed the storm to a murmur; the waves of the sea were stilled. They rejoiced that the sea grew calm, that God brought them to the harbor they longed for. (Psalm, 107: 27-30).

Therefore, for people of faith, the hope is there that God can and will calm the storm that has been caused by addiction. Even though right now one might feel no sense of hope, claim God’s grace through the intention of the will to bring about the serenity, courage, and wisdom needed to condescend to prayers for the addicts (Costa, 2016).

It’s comforting to remember that the Lord Jesus Christ is always gentle to those who are hurting! His compassion and mercy are endless. But he can intervene if he is invited. For he says: “behold, I stand at the door and knock. If anyone hears my voice and opens the door, [then] I will enter his house and dine with him, and he with me” (Rev. 3:20). This is a call to have faith in the Lord. It is a call to prayer, especially for addicts.

I will conclude this section with the following beautiful novena to Matt Talbot for the alcoholics. Costa, A. (2016) recommends it can be prayed for nine consecutive days for anyone who is addicted, whether to alcohol or other substance or behavior:

God of mercy, we bless you in the name of your Son, Jesus Christ, who ministered to all who come to Him. Give your strength to _____, who is bound by the chains of addiction. Enfold him/her in your love and restore him/her to freedom through your grace. ...Lord in your servant Venerable Matt Talbot, you have given us a wonderful example of triumph over addiction, of devotion to duty, and of lifelong reverence of the Holy Eucharist. May his life of prayer and penance give _____ the courage to take up his/her cross and follow in the footsteps of our Lord and Savior Jesus Christ. Father, we ask this through Christ our Lord. Amen. (p. 157).

Methodology

Overview

This study used a form of grounded theory to identify the primary concerns of Nigerian community living in the Bronx in New York City, of the United States. Brene' Brown (2017) describes ground theory as follows:

The goal of grounded theory is to develop theories based on people's lived experiences rather than proving or disproving existing theories. In grounded theory, researchers try to understand what we call "the main concern" of study participants. When it comes to belonging, I asked: What are people trying to achieve? What are they worried about? (p. p. 33).

The primary concerns derived from a survey of the community for this study are that: the experience of alcohol use varies across the studied community and can lead to problem drinking. A second concern was: Behavior when drinking alcohol varies across the studied community. The third concern was that: Alcohol abuse in the individual and/or a family member changes the participant's relationship with God. The fourth concern was related to the issue of support for alcohol use concerns in the community.

This study used quantitative assessment with some open-ended questions to evaluate the impact of alcohol use in Nigerian community living in the United States. Leavy (2017) observes that, "Quantitative approaches are the most commonly used in explanatory research investigating causal relationships, associations, and correlations" (p. 87). A quantitative study is uniquely well-suited to this investigation. The survey is a questionnaire that sought "...information from a sample at one point in time" (p. 101).

The Survey

The survey (see Appendix C) consisted of 48 multiple choice questions.

Participants

Participation in this study was open to email distribution list of a single Nigerian Roman Catholic congregation in the Bronx, New York. The approximate size of the congregation is 360 families. The email list was comprised of current members of the Roman Catholic community in the Bronx.

Participants' data has been kept highly secured. Consent forms linking participants' names and code numbers were stored on a separated password protected server from the password protected server containing survey results. Access to the consent forms was limited to me (the investigator) and my Faculty Advisors at Hebrew Union College, New York University.

Procedure

The questionnaire was advertised by email (see Appendix A) to the community's membership on the day that the survey opened (December 12, 2021). Any member of the community, age 13 and above, was invited to participate. In the case of households with multiple individuals who participated in the study, each individual participating in the survey was to fill out their own questionnaire. Emails included a link for participants to click on, which took them to the questionnaire at the [surveymonkey.com](https://www.surveymonkey.com), were sent out to the participants. The survey was live and available to receive responses for a period of seven days from the morning of December 12 to the evening of December 19, 2021. Participants were informed that completion of the survey monkey would take approximately ten minutes. Survey Monkey reported the average time participants required to complete the survey was 8 minutes 18 seconds.

SurveyMonkey.com is a web-based platform that allows users and subscribers to create, distribute and analyze different kinds of questionnaire data. The investigator had the option of reviewing collected results through Survey Monkey's own web-based portal or downloading of the collected data to Microsoft Excel for Mac 2019. The investigator downloaded all the collected data to Excel.

The investigator used statistical analysis to explore a relationship between the traumatic onset of problem drinking in a family and a shift in the way Nigerian Americans relate to their spiritual identity and house of worship. To reach that end, a faculty member with an expertise in analytic research methods helped perform analysis on selected subsets of the collected data. The professor provided the investigator with a distribution analysis of every survey question. He provided a multivariate correlation analysis that indicated potential positive and negative correlations on a subset of the collected data. He ran statistical correlation analysis that quantified correlation probability of positive or negative correlation of analyzed variables within the aforementioned subsets. Finally, the professor created a series of general linear models to examine potential predictors.

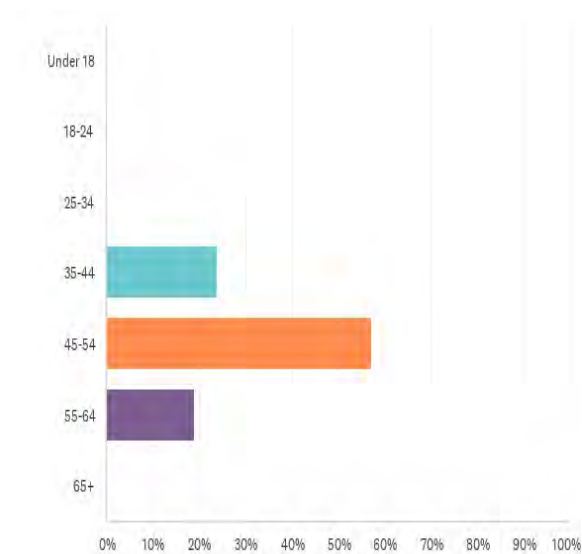
Results

The surveyed population has the following major characteristics:

Ages ranged from 35 to 64.

Q1: Please indicate your age:

Answered: 21 Skipped: 0

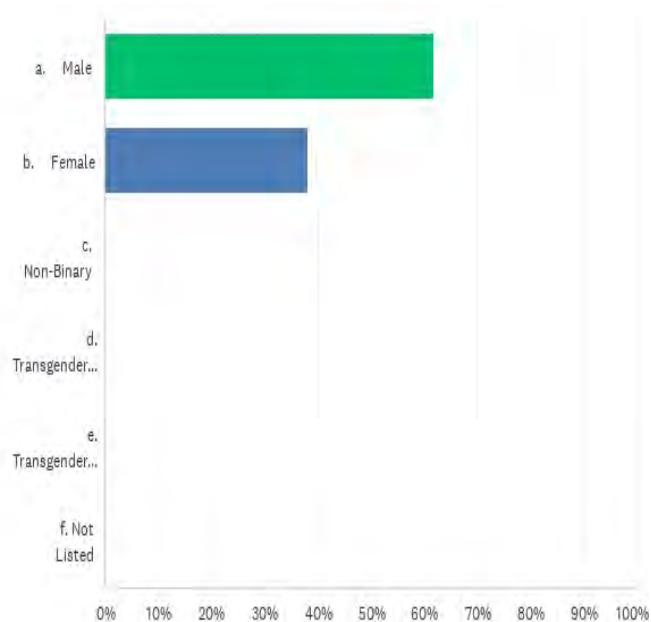


Powered by  SurveyMonkey

Gender: There were slightly more male than female respondents.

Q2: Which gender identity do you most identify:

Answered: 21 Skipped: 0

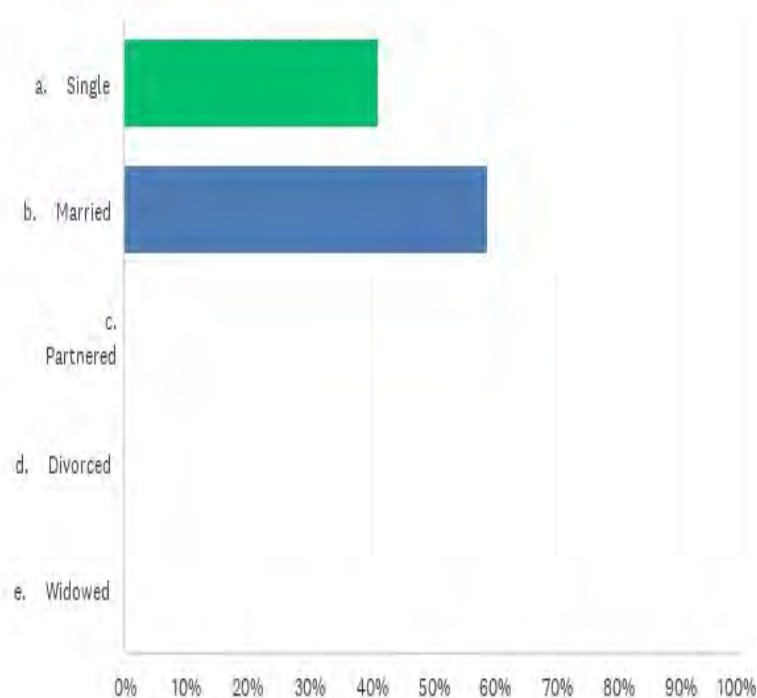


Powered by  SurveyMonkey

Relationship Status: The majority of the respondents were married.

Q3: Which of the following describes your relationship status?

Answered: 17 Skipped: 4

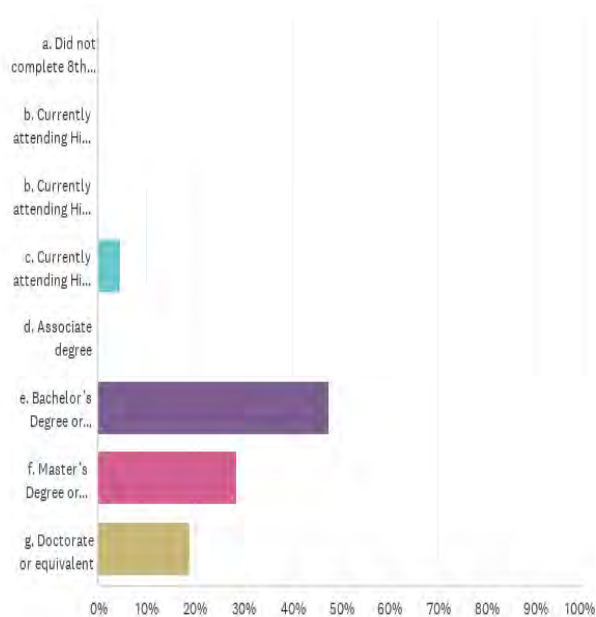


Powered by  SurveyMonkey

Education: Overall, respondents had at least a bachelor's degree from college and many also had a graduate degree.

Q4: What is the highest level of education you have completed?

Answered: 21 Skipped: 0

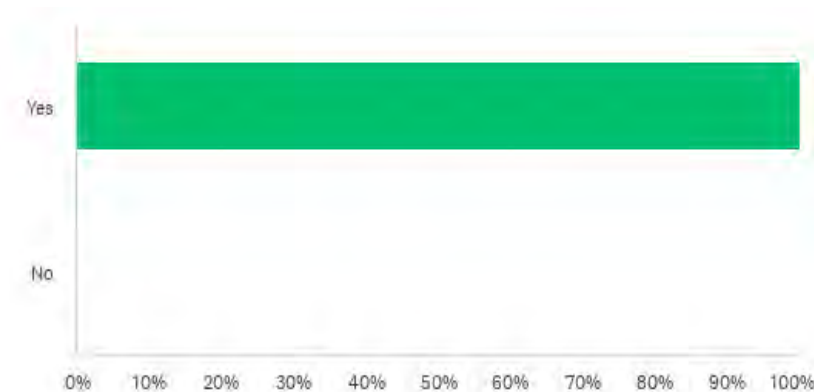


Powered by  SurveyMonkey

Religion: Everyone in the study was Catholic.

Q5: Are you a Catholic?

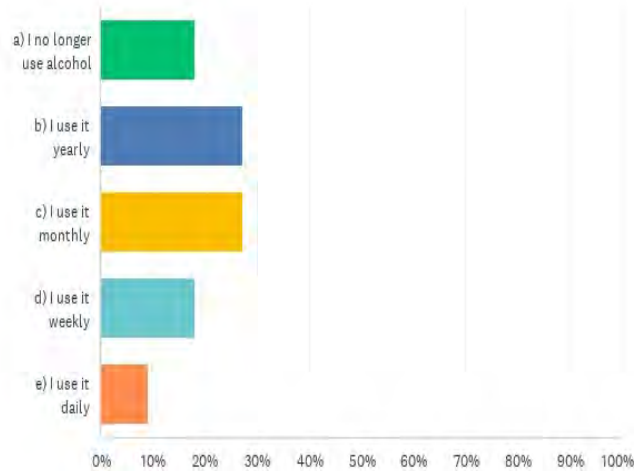
Answered: 21 Skipped: 0

Powered by  SurveyMonkey

Related to Concern One: the experience of alcohol use varies across the studied community; it was found that the amount of alcohol use varied from none to daily use. Those that use alcohol most began drinking around the age of 21 to 25 and they began drinking with a friend or others of their age. Nine reported that a family member had a drinking problem and that the most frequently mentioned members were cousins followed by the father or a brother.

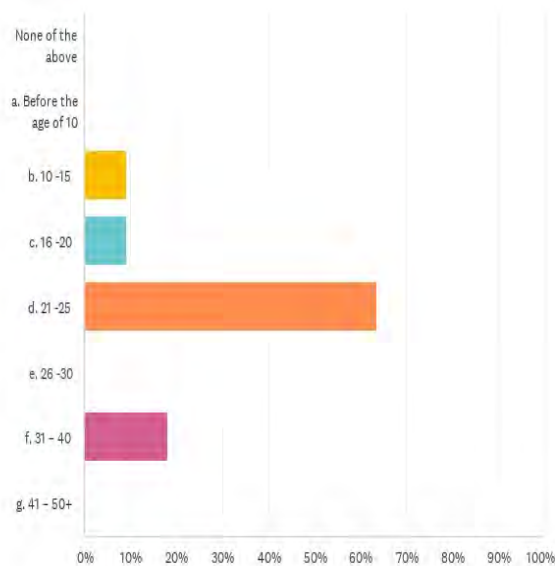
Q12: What is your history of alcohol use? Check the one that most applies:

Answered: 11 Skipped: 10



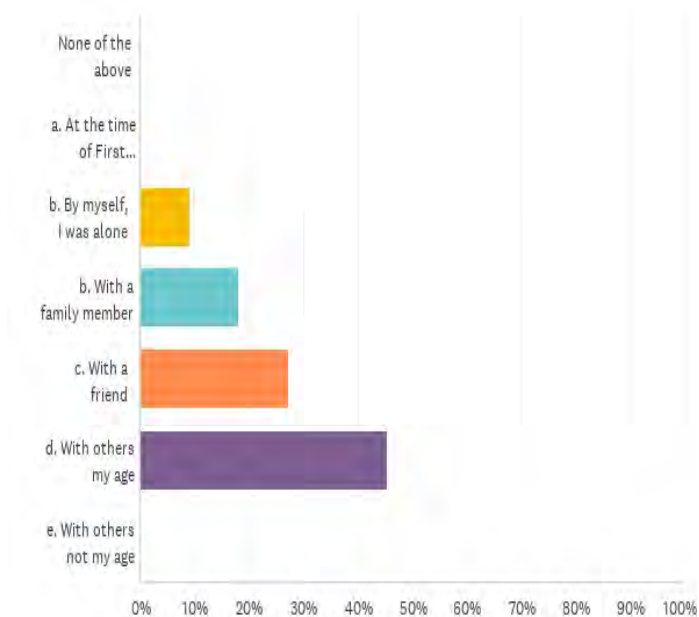
Q13: If you drink or have drunk alcohol, state at what age you began drinking?

Answered: 11 Skipped: 10



Q14: When or with whom did you have your first experience with alcohol?

Answered: 11 Skipped: 10



Q28: Does a family member have a problem with drinking? Check all that apply:

Answered: 20 Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	45.00%	9
No	60.00%	12
c. Father	0.00%	0
d. Brother	0.00%	0
f. Grandmother	0.00%	0
j. Grandfather	0.00%	0
Total Respondents: 20		

Powered by  SurveyMonkey

Q29: Which family members have a problem with drinking? Check all that apply:

Answered: 9 Skipped: 12

ANSWER CHOICES	RESPONSES	
a. Mother	11.11%	1
b. Father	33.33%	3
c. Brother	33.33%	3
d. Sister	11.11%	1
e. Uncle	22.22%	2
f. Aunt	11.11%	1
g. Cousin	77.78%	7
h. Grandmother	11.11%	1
i. Grandfather	11.11%	1
Other (please specify)	22.22%	2
Total Respondents: 9		

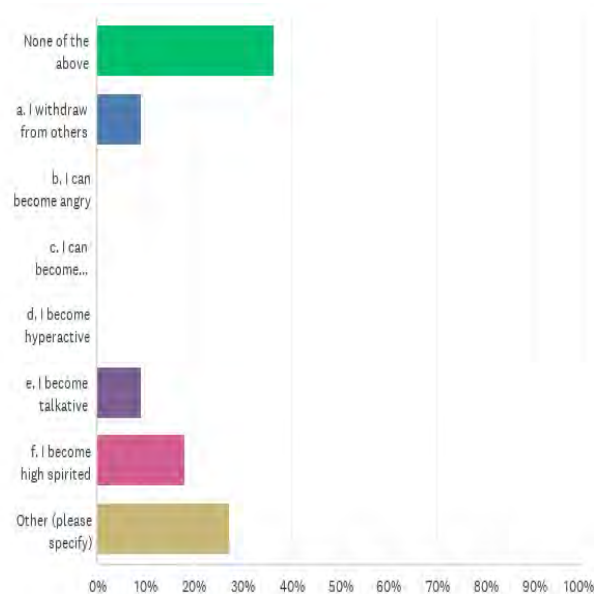
Powered by  SurveyMonkey

Related to the Second Concern: Behavior when drinking alcohol varies across the studied community. It was found that of those that use alcohol said they became talkative, high spirited, or withdrew from others. Regarding family members' behavior most often reported were that of

becoming aggressive or hyperactive. It was further reported that family members who abused alcohol would frequently spend money recklessly, not be able to work, blacked out, and/or used abusive words.

Q17: How do you behave when you are drinking? Check all that apply:

Answered: 11 Skipped: 10



Q30: How do your family members generally behave when they are drinking? Check all that apply:

Answered: 9 Skipped: 12

ANSWER CHOICES	RESPONSES	
None of the above	33.33%	3
a. They withdraw from others	11.11%	1
b. They can become angry	11.11%	1
c. They can become aggressive	44.44%	4
d. They become hyperactive	44.44%	4
Other (please specify)	0.00%	0
Total Respondents: 9		

Powered by  SurveyMonkey

Q32: When drinking or drunk has the family member who has the most serious problem with drinking ever: (check all that apply)

Answered: 9 Skipped: 12

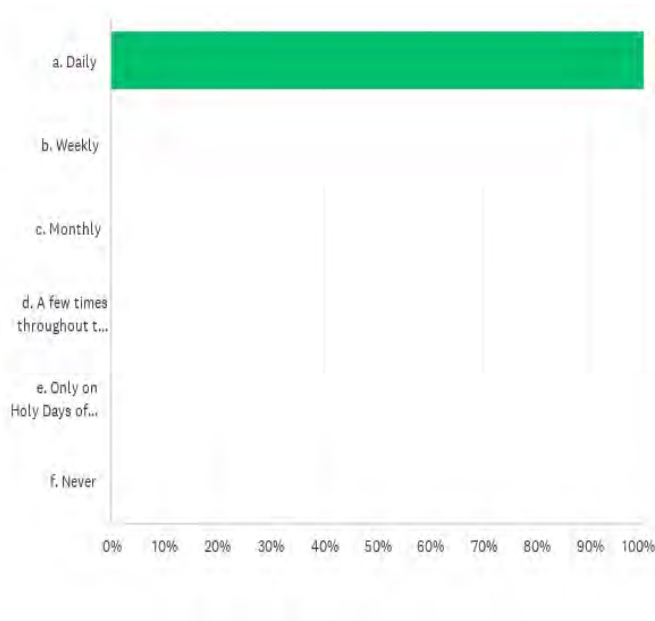
ANSWER CHOICES	RESPONSES	
None of the above	11.11%	1
a. Expressed angry feelings	11.11%	1
b. Used abusive words	0.00%	0
b. Used abusive words	33.33%	3
c. Hit others	11.11%	1
d. Lost consciousness – passed out	22.22%	2
e. Blacked out – Lost memory of time and my behavior while drinking	33.33%	3
f. Withdrawn – needed to be alone	0.00%	0
g. Spent money recklessly	44.44%	4
h. Destroyed property	11.11%	1
i. Called out sick	0.00%	0
j. Been unable to go to work	33.33%	3
k. Been unable to childcare	0.00%	0
Other (please specify)	0.00%	0
Total Respondents: 9		

Powered by  SurveyMonkey

Related to the Third Concern: Alcohol abuse in the individual/family member changes the participant's relationship with God; it was found that this was not the case. However, only one individual indicated that they probably had a drinking problem.

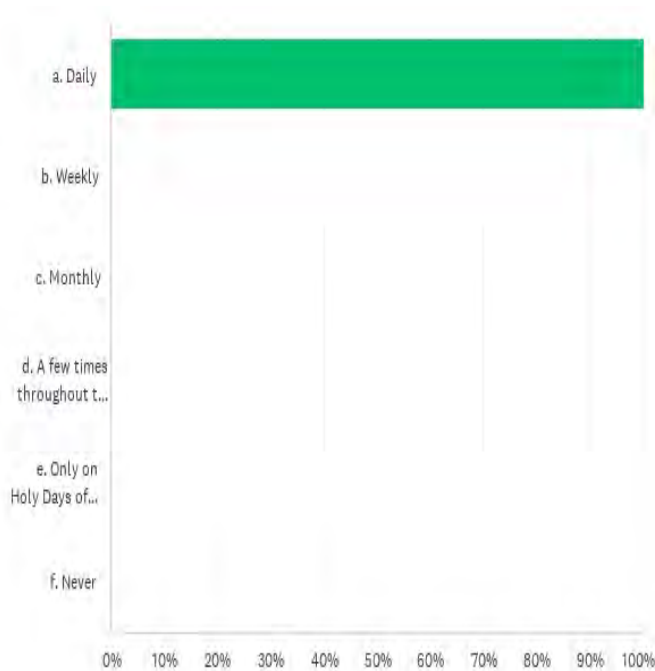
Q22: Prior to my problem with drinking my level of participation in worship services was:

Answered: 1 Skipped: 20



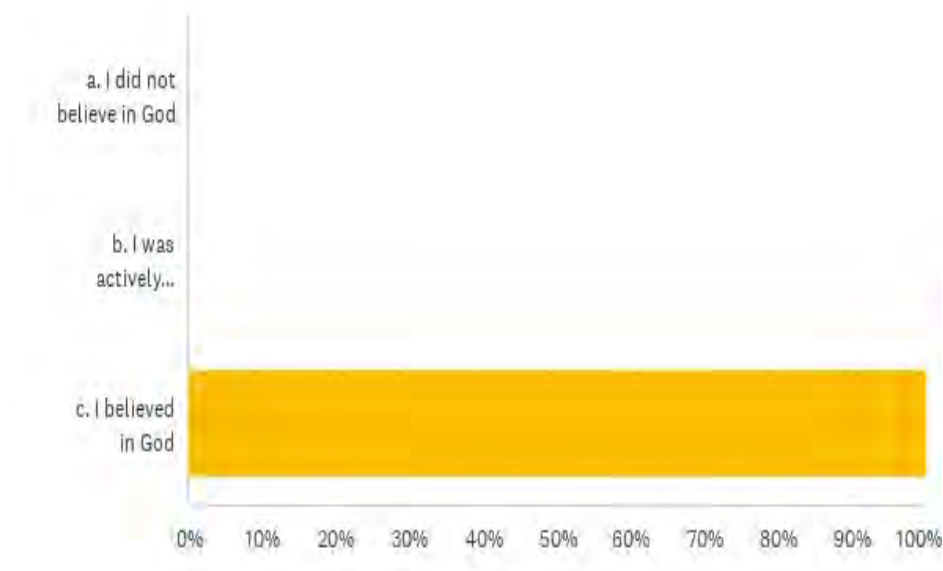
Q23: Following the onset of my problem with drinking my level of participation in worship services became:

Answered: 1 Skipped: 20



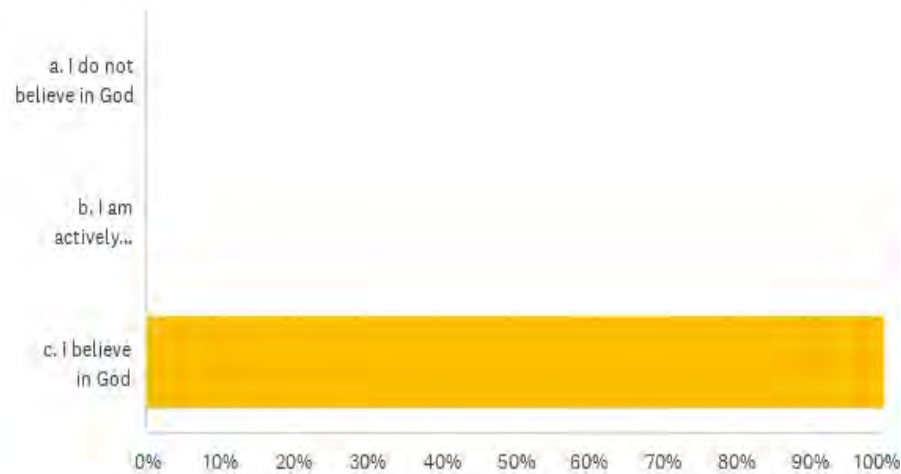
Q25: Which of the following best describes your relationship with God, prior to having a problem with drinking?

Answered: 1 Skipped: 20



Q26: Following the onset of my problem with drinking, which of the following best describes my belief in God:

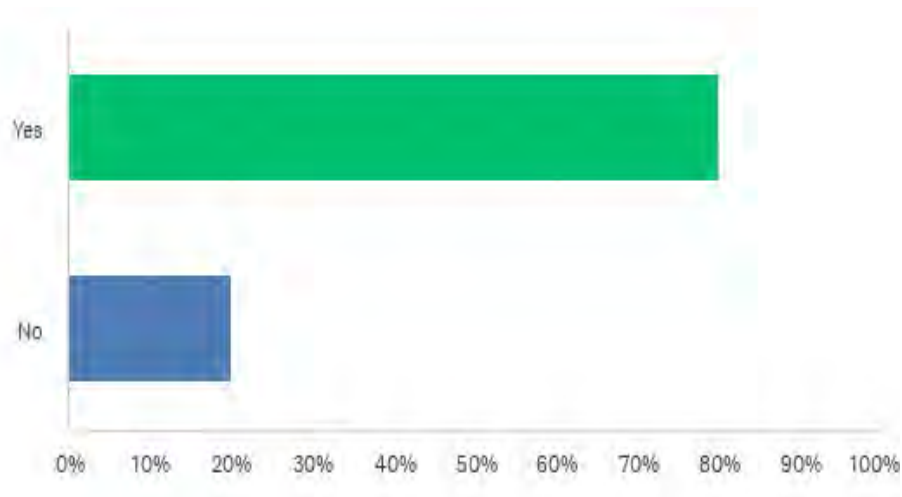
Answered: 1 Skipped: 20

Powered by  SurveyMonkey

Related to the issue of support for Alcohol Concerns in the community, it was found that the majority of the respondents believed there was an alcohol use problem in the community. However, none had used AA or Al-Anon for support. Thirty percent of the respondents had experienced a loss of connection with someone due to that person's problem with alcohol drinking. Finally, the majority of respondents expressed that they either strongly or very strongly agreed that religious institutions should play a part in helping individuals recover from alcohol abuse.

Q9: Do you believe alcohol use is a problem in your community?

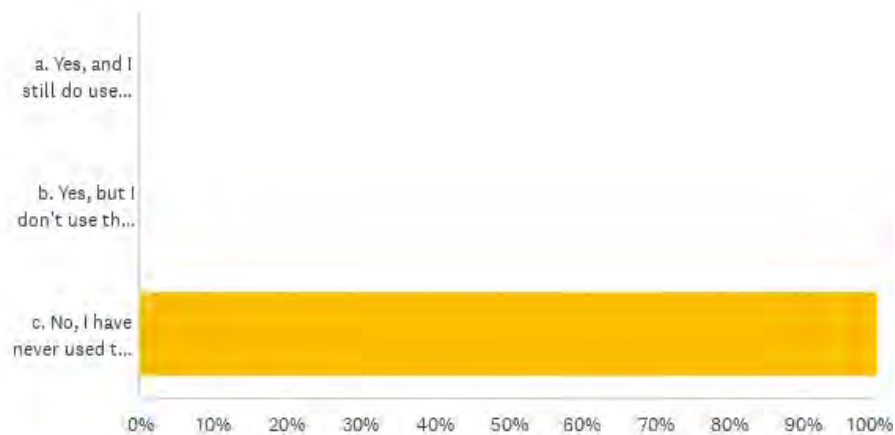
Answered: 20 Skipped: 1



Powered by  SurveyMonkey

Q11: Have you used AA or Al-Anon to help you with your use of alcohol?

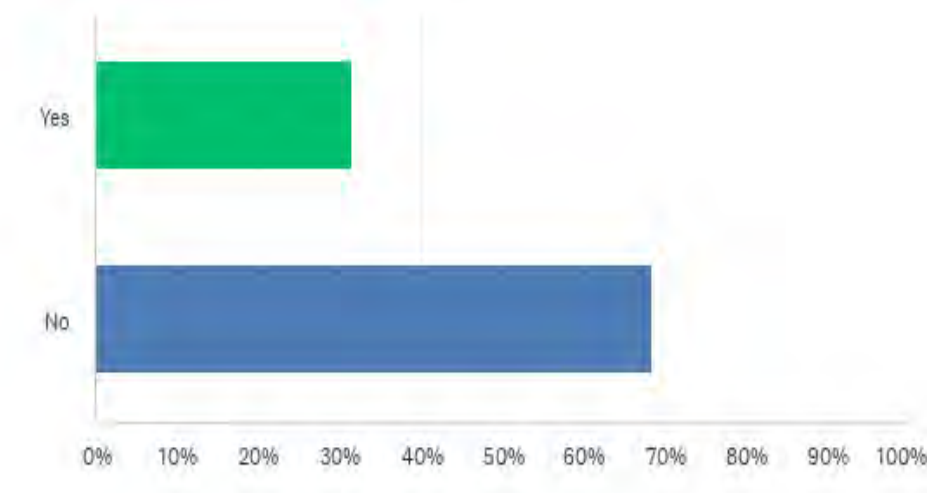
Answered: 11 Skipped: 10



Powered by  SurveyMonkey

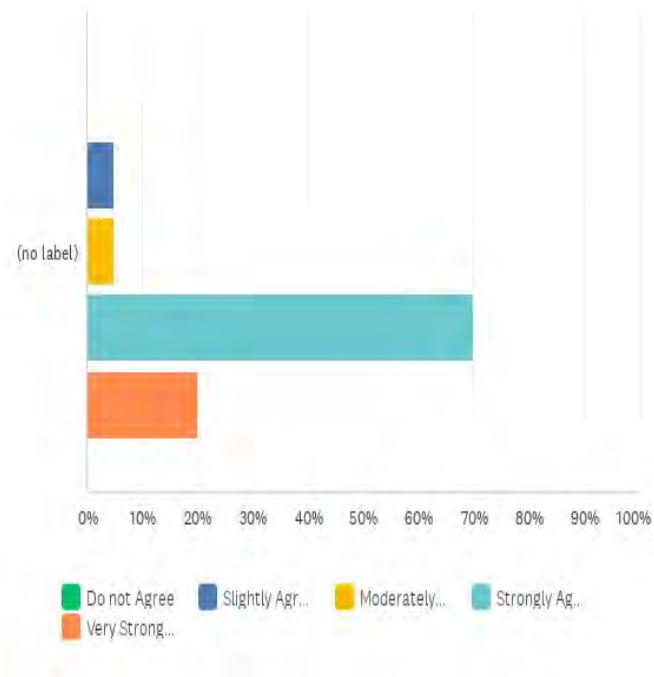
Q42: Have you experienced the loss of connection to someone other than a relative as a result of that person's problem with drinking?

Answered: 19 Skipped: 2



Q48: Should religious intuitions play a part in helping individuals recover from their problems with drinking?

Answered: 20 Skipped: 1



Discussion

The primary concerns derived from a survey of the community for this study were that: we found support for the experience of alcohol use across the studied community and in some cases, this appeared to lead to problem drinking. Those most afflicted with a drinking problem were family members, most notably cousins, and the respondents' fathers and other male members of the family cohort. Regarding behavior when drinking alcohol: behavior when drinking varies. The most common behavior reported was spending money recklessly, followed by use of abusive words, loss of memory, and inability to work. Alcohol abuse did not appear to change a family member's relationship to God. There was strong support for greater involvement of religious organizations to counter alcohol abuse and use.

Despite the strong support for community involvement, it seemed unusual that only one respondent out of twenty acknowledged the possibility of having an alcohol problem. Furthermore, despite acknowledging that there was an alcohol problem among their family members, none of the respondents reported having sought out support for the alcohol abuse that they had identified, such as Alcoholics Anonymous (AA), or Al-Anon (AL). The lack of engagement with supportive services may be attributed to the community's historic origins where no support had been available.

This study was conducted in a very close-knit community, which would limit the generality of these findings. Therefore, because this study does point to a serious problem with alcohol abuse by individuals and their family members, it may be worthwhile to see if similar behavior occurs in other closely knit communities of varied ethnic origins.

References

- Abioje, P. O. (2019). *Old and new views: African traditional religion: A handbook for researchers, teachers and students of African traditional religion and culture*. Beau Bassin, Mauritius: Lap Lambert Academic Publishing.
- Abraham, J. (2012). D. W. W.'s notes on the Vienna congress 1971: A consideration of Winnicott's theory of aggression and its clinical implications. *In Donald Winnicott today* (pp. 302-330). London: Routledge.
- Abraham, K. (1908). The psychological relations between sexuality and alcoholism. In *Selected papers on psychoanalysis* (pp. 80-89). New York, NY: Brunner/Mazel Publishing.
- Akhtar, S. (2009). *Comprehensive dictionary of psychoanalysis*. New York, NY: Routledge, Taylor & Francis Group.
- Akhtar, S. (2018). *Comprehensive dictionary of psychoanalysis*. New York, NY: Routledge.
- Alcoholics Anonymous World Service, Inc. (2001). *Alcoholics anonymous: The story of how many thousands of men and women have recovered form alcoholism*. (4th edition). New York, NY: Alcoholics Anonymous World Service INC.
- Arinze, F. A. (1970). *Sacrifice in Igbo religion*. J. S. Boston. (editor). Ibadan: Ibadan University Press.
- Avicenna. (1996). *The poem of medicine*. In A. Borruso. (editor). Turin: Zamorani. (Original work publication, n.d.).
- Badenoch, B. (2008). *Being a brain-wise therapist: A practical guide to interpersonal neurobiology*. New York, NY: W.W. Norton & Company.
- Balint, M. (1979). *The basic fault: Therapeutic aspect of regression*. Evanston, IL: Northwestern University Press.

- Basden, G. T. (2005). *Niger Ibos: A description of the primitive life, customs and animistic beliefs, &c., of the Ibo people of Nigeria by one who, for thirty-five years, enjoyed the privilege of their intimate confidence and friendship*. New York, NY: Routledge, Taylor & Francis Group.
- Berman, S. A. (1995). *Midrash Tanhuma-Yelammedenu: An English translation of Genesis and Exodus from the printed version of tanhuma-Yelammedenu with an introduction, notes, and indexes*. Hoboken, NJ: KTAV Publishing.
- Blos, P. (1968). Character formation in adolescence. *Psychoanalytic Study of the Child*. 23, 245-263.
- Borruso, A. (1993). Wine and ferments in Arabic-Islamic culture. *History of Islam and civilization*, (volume 42). (Place of publication unknown)
- Bowlby, J. (1958). The nature of child's tie to his mother. *International Journal of Psychoanalysis*, 39, 350-373.
- Bradshaw, J. (1988). *Healing the shame that binds you*. Florida: Health Communications, Inc.
- Brenner, I. (1994). The dissociative character: A reconsideration of 'multiple personality'. *Journal of the American Psychoanalytic Association*, 42, 819-846.
- Brenner, I. (2001). *Dissociation of trauma: Theory, phenomenology, and technique*. Madison, CT: International University Press.
- Bromberg, P.M. (1998). *Standing in the spaces*. Hillsdale, NJ: Analytic Press.
- Bromberg, P. M. (2011). *In the shadow of the tsunami*. New York, NY: Taylor & Francis.
- Brown, Brené. (2017) Braving the Wilderness. Random House Publishing Group.
- Brown, L. S. (1991). Not outside the range: One feminist perspective on psychic trauma. *American Imago*, 48, 119-133.

- Bryceson, D. F. (2002a). Alcohol in Africa: Substance, stimulus, and society. In D. F. Bryceson, (editor). *Alcohol in Africa: Mixing business, pleasure, and politics*. Portsmouth, NH: Heinemann.
- Bryceson, D. F. (2002b). Changing modalities of alcohol use. In D. F. Bryceson, (editor). *Alcohol in Africa: Mixing business, pleasure, and politics*. Portsmouth, NH: Heinemann.
- Busi, G. (1999). *The symbol of the Hebrew thought*. Turin: Giulio Einaudi, Publishing.
- Canary-Digironimo, N. (2019). Whether the perception of psychologists on psychoanalysis approaches to limit or facilitate their use in managing substance use disorders? A cross-sectional analysis. *Clinical and Experimental Psychology*, 5(1).
- Chikere, E. I. & Mayowa, M. O. (2011). Prevalence and perceived health effect of alcohol use among male undergraduate students in Owerri, South-East Nigeria: A descriptive cross-sectional study. *BMC Public Health*. <http://www.biomedcentral.com/1471-2458/11/118>.
- Cohen, A. (2005). *The Talmud*. Laterza, Italy: Bari Publishing Co.
- Conton, W. F. (1965). *West African history*. (Fifth Impression. Volume one). USA: Monee, IL.
- Corbett, L. (1999). *The religious function of the psyche*. New York, NY: Routledge, Tailor & Francis Group.
- Courtright, D. T. (2001). *Forces of habit*. Cambridge, MA: Harvard University Press.
- Demehin, A. (1984). Drug abuse and its social impacts in Nigeria. *Public Health*, 98, 109-116.
- Director, L. (2002). The value of relational psychoanalysis in the treatment of chronic drug and alcohol use. *Psychoanalytic Dialogue*, 12(4), 551-571. Doi: 10.1080/10481881209348689 <https://doi.org/10.1080/10481881209348689>
- Dogmatic Constitution on the church: Vatican II, lumen gentium (LG), November, 21 1964. In Austin Flannery, general editor. (1988). *Vatican Council II: The conciliar and post*

- conciliar documents*. (Revised edition, Vatican Collection, vol.,1). Dublin, Republic of Ireland: Dominican Publications.
- Dopamu, P. A. (2000). *Èsù: The invisible foe of man: A comparative study of Satan in the Christianity, Islam and Yorùbá religion*. Ijebu-Ode, Nigeria: Shebiotimo Publications.
- Dumbili, E. W. (2013). Changing patterns of alcohol consumption in Nigeria: An exploration of responsible factors and consequences. *Medical Sociology Online*, 7, 20 – 33.
- Dumbili, E. W. (2014b). The politics of alcohol policy in Nigeria: A critical analysis of how and why brewers use strategic ambiguity to supplant policy initiatives. *Journal of Asia and African Studies*, 49, 473-487.
- Dumbili, E. W. (2015a). A review of substance use among secondary school students in Nigeria: Implications for policies. *Drugs: Education, Prevention and Policy*, 22, 387-399.
- Dumbili, E. W. (2015b). ‘What a man can do, a woman can do better’: gendered alcohol consumption and (de)construction of social identity among young Nigerians. *BMC Public Health* 15, 167.
- Dumbili, E. W. (2016). Intoxicating entertainment? The influence of “Star Music Trek” on the drinking practices of Nigerian students. *Contemporary Drug Problems*, 43(1), 62-78.
Reprints and permission: sagepub.com/journalsPermission.nav Doi: 10.1177/0091450916637936 cdx.sagepub.com
- Dumbili, E. W., & William, C. (2017). Drinking game participation, gender performance and normalization of intoxication among Nigerian university students. *Elsevier Addictive Behavior Report* 5, 1-8.
- Durand, O. (2001). *The Jewish language*. Brescia, Italy: Paideia Publishing.

Edinger, E. F. (1992). *Ego & archetype: Individuation and the religious function of the psyche*.

Boulder, Colorado: Shambhala Publications, INC.

Eidelson, L. (Editor). (1968). *Encyclopedia of psychoanalysis*. New York, NY: The Free Press.

Ejizu, C. I. (1994). African traditional religious ritual and symbols. *Pro dialogue* 87, 243-58.

Esan O., Makanjuola, V., Oladeji, B., & Gureje O. (2013). Determinants of transition across the spectrum of alcohol use and misuse in Nigeria. *Elsevier*, 47, 249-255.

<http://www.alcoholjournal.org/>.

Escotado, A. (1999). *A brief history of drugs*. Rochester, VT: Park Street Press.

Ezeanya, S. N. (1979). The contribution of African traditional religion to nation building.

Nigerian Dialogue 3, 13-19

Fede, S. J., Abrahao, K. P., Cortes, C. R., Grodin, E. N., Schwandt, M. L., & George, D. T.

(2020, March 26). Alcohol effects on globus pallidus connectivity: Impulsivity and binge drinking. *PLoS One*, 15(3). Doi: <http://dx.doi.org/10.1371/journal.pone.0224906>

Fenichel, O. (1945). *The psychoanalytic theory of neurosis*. New York, NY: W. W. Norton.

(Reprinted in 1972)

Fonagy, P. & Target, M. (1995). Dissociation and trauma. *Current opinion in psychiatry*, 8(3), 161-166.

Freud, A. (1936). *The writings of Anna Freud, vol. 2: The Ego and the mechanism of defense*.

New York NY: International University Press.

Freud, S. (1893a). On the psychical mechanism of hysterical phenomena: A lecture. *S.E.* 3: 25-41. London: Hogarth Press.

Freud, S. (1905a). *Three essays on the theory of sexuality*. (Standard edition, volume 7, pp 125-245). London: Hogarth Press.

Freud, S. (1914c). *On narcissism: An introduction*. (Standard edition, vol. 14, pp. 67-102).

London: Hogarth Press.

Freud, S. (1925). *Some psychical consequences of the anatomical distinction between the sexes*.

(Standard edition, vol. 19, pp. 243-260). London: Hogarth Press.

Freud, S. (1953b). The three essays on the theory of sexuality. In J. Strachey. (Editor & trans.).

The standard edition of the complete psychological works of Sigmund Freud. (Vol. 7, pp. 153-243). London: Hogarth Press.

Freud, S. (1957). On narcissism: An introduction. In J. Strachey. (Editor & trans.). *The standard edition of the complete psychological works of Sigmund Freud*. (Vol. 14, pp. 73-102).

London: Hogarth Press.

Freud, S. (1961b). Some psychical consequences of the anatomical distinction between the sexes.

In J. Strachey. (Editor & trans.). *The sedition of the complete psychological works of Sigmund Freud*. (Vol. 19, pp. 248-258). London: Hogarth Press.

Friedman, R. A. (2014, June 29). Why teenagers act crazy. *The New York Times*.

<http://www.nytimes.com/2014/06/29/opinion/sunday/why-teenagers-act-crazy.html?emc=eta1>

Goldman, D. (2016). "A queer kind of truth" Winnicott and the use of dissociation. In E. F.,

Howell, & S. Itzkowitz. (Editors). *The dissociative mind in psychoanalysis:*

Understanding and working with trauma. New York, NY: Routledge.

Gruner, O. C. (1930). *A treatise on the canon of medicine of Avicenna*. London: Luzac and Company.

Harington, J. (1920). *The school of Salerno: Government health Salerno*. New York: Paul B. Hoeber.

- Heap, S. (1994-95). Alcohol in Africa: A supplementary list of post-1875 literature. *A current bibliography on African Affairs*, 26(1), 1-14.
- Heap, S. (1995). The liquor trade and the Nigerian economy, 1880-1939. [Ph.D., dissertation University of Ibadan].
- Heap, S. (1996). Before “Star”: The import substitution of western-style alcohol in Nigeria, 1870-1970. *African Economic History*, 24, 69-89.
- Heap, S. (1999). The Quality of Liquor in Nigeria during the Colonial Era. *Itinerario*. 23(2), 29 – 47.
- Heap, S. (2002). Living in the proceeds of a grog shop: Liquor revenue in Nigeria. In D. F. Bryceson, (editor). *Alcohol in Africa: Mixing business, pleasure and politics*. Portsmouth, NH: Heinemann.
- Heine, P. (1980). *Wine in the Islamic Middle Ages*. Wiesbaden: Society for the History of Wine.
- Hellman, E. (1948). *Rooiyard: A sociological survey of an urban native slumyard*. Capetown: Oxford University Press.
- Herman, J. (1992). *Trauma and recovery: The aftermath of violence from domestic abuse to political terror*. New York: Basic Books.
- Herman, J. (2015). *Trauma and recovery: The aftermath of violence—domestic abuse to political terror*. New York, NY: Basic Books.
- Holmes, J., & Slade, A. (2018). *Attachment in therapeutic practice*. Washington DC: Sage Publishing.
- Howell, E. F., & Itzkowitz, S. (2016). The everywhere-ness of trauma and the dissociative structuring of the mind. In E. F., Howell, & S. Itzkowitz. (Editors). *The dissociative mind in psychoanalysis: Understanding and working with trauma*. New York, NY: Routledge.

- Humphreys, K., Wing, S., McCarthy, D., Chappel, J., Gallant, L., Haberle, B., Horvath, A. T., Kaskutas, L. A., Kirk, T., Kivlahan, D., Laudet, A., McCrady, B. S., McLellan, A. T. Morgenstern, J., Townsend, M., & Weiss, R. (2004). Self-help organizations for alcohol and drug problems: Toward evidence-based practice and policy. *Journal of Substance Abuse Treatment*, 26(3), 151-158.
- Idowu, E. B. (1975). *African traditional religion: A definition*. Maryknoll, NY: Orbis Books.
- Idowu, E. B. (1996). *Olódùmarè: God in Yoruba belief*. Ikeja: Longman Nigeria Plc.
- Ikusan, B. A. (1994). Drinking problems and the position of women in Nigeria. *Addiction*, 89, 941-944.
- Jewett, B. E., & Sharma, S. (2020, August 29). Physiology, GABA. *NCBI Bookshelf*. StatPearls Publishing.
- Johnson, H. (1990). *A world history of wine from antiquity to the present day*. Paris: Hacette.
- Increase, M. (1673). *Wo to drunkards*. Boston: Timothy Green.
- Johnpaul II. (1994). *Crossing the threshold of hope*. New York: Alfred A. Knopf.
- Johnpaul II. (2000). *Catechism of the Catholic Church*. (Second edition). Vatican, Rome: Libreria Publications.
- Joseph, B. (1982). Addiction to near death. *International Journal of Psychoanalysis*, 63, 449-456.
- Kalsched, D. (2013). *Trauma and the soul: A psycho-spiritual approach to human development and its interruption*. New York, NY: Routledge, Tailor & Francis Group.
- Kalsched, D. (2015). Uncovering the secrets of the traumatized psyche: The life saving inner protector who is also a persecutor. In D. F., Sieff. *Understanding and healing emotional*

- trauma: Conversations with pioneering clinicians and researchers*. New York, NY: Tailor and Francis Group.
- Kahr, B. (2007). Infanticidal attachment. *Attachment: New Directions in Psychotherapy and Relational Psychoanalysis*, 1(2), 117-132.
- Karp, I. (1980). Beer drinking and social experience in an African society: An essay in formal sociology. In I. Karp and C.S. Bird (Eds.), *Exploration in African systems of thought*. (pp.83 – 119). Bloomington: Indiana University Press,
- Kasomo, D.W. (2010). *African traditional culture and religion is alive and dynamic: African tradition is alive and dynamic*. USA: Lap Lambert Academic Publishing.
- Kernberg, O. (1967). Borderline personality organization. *Journal of the American Psychoanalytic Association*, 14, 641-685.
- Klein, M. (1930). The importance of symbol-formation in the development of the ego. *International Journal of Psychoanalysis*, 11, 24-39.
- Klein, M. (1932). *The psycho-analysis of children*. London: Hogarth Press.
- Koenig, H. G., McCullough, M. E., & Larsen D. B. (2001). *Handbook of religion and health*. New York, NY: Oxford University Press.
- Kohut, H. (1971). *The analysis of the self*. New York, NY: International University Press.
- Krystal, H., & Raskin H. (1970). *Drug dependence: Aspects of Ego function*. Detroit, MI: Wayne, State University Press.
- Lammens, H. (1922). *The Arab city of Tâif on the eve of the Hejira*. Beirut: Catholic Printing Office.
- Laplanche, J., & Pontalis, J-B. (1973). *The language of psychoanalysis*. (D. Nicholson-Smith, trans.). New York: W. W. Norton.

- Laszloffy, T. A. (2016). Alcohol problems and the life cycle. In M. McGoldrick, N. G. Preto, & B. Carter. *The expanding family life cycle: Individual, family, and social perspectives*. (5th edition, chapter 24). New York, NY: Pearson Education, Inc.
- Laudet, A. B. (2008). The impact of alcoholics anonymous on other substance abuse related twelve step program. In M. Galanter & L. A. Kaskutas. (Editors). (2008a). *Alcoholism research: Alcoholics anonymous and spirituality* 18. New York: Kluwer Academic/Plenum.
- Le Dare, B., & Gicquel, T., (2019, July 31). Therapeutic application of ethanol: A review. *J Pharm Pharm Sci*. 22, 525-535. www.cspsCanada.org
- Lender, M. E., & Martin, J. K., (1987). *Drinking in America: A history*. (The revised and expanded edition). New York, NY: The Free Press.
- Letsela, L., Weiner, R., Gafos, M., & Fritz K. (2019). Alcohol availability, marketing, and sexual health risk amongst urban and rural youth in South Africa. *Aids and Behavior*, 23, 175-189. <https://doi.org/10.1007/s10461-018-2250-y>.
- Levin, Jerome. (1987). *Treatment of alcoholism and other addictions: A self-psychology approach*. Northvale, NJ: Jason Aronson.
- Ling, W., Wesson, D. R., & Smith, D. E. (2005). Prescription opiate abuse. In J. H. Lowinson, P. Ruiz, R. B. Millman & J. G. Langrod, (editors). *Substance abuse: A comprehensive textbook*. (4th edition). Philadelphia, PA: Lippincott, Williams, and Wilkins.
- Liotti, G. (1992). Disorganized/disoriented attachment in the etiology of the dissociative disorders. *Dissociation*, 5(4), 196-204.
- Liotti, G. (2004). Trauma, dissociation and disorganized attachment: Three strands of a single braid. *Psychotherapy: Theory, Research, Practice, Training*, 41(4), 472-486.

- Liotti, G. (2006). A model of dissociation based on attachment theory and research. *Journal of Trauma and Dissociation*, 7(4), 55-73.
- Lloyd, J. B. (2015). Return from exile: Beyond self-alienation, shame, and addiction to reconnect with ourselves. In D. F. Sieff. *Understanding and healing emotional trauma: Conversations with pioneering clinicians and researchers*. New York, NY: Tailor and Francis Group.
- Lo Jacono, C. (October, 20-21, 2000). On avoiding the consumption of fermented beverages: In wine, divine mystery. *Proceedings of the Congress*. Rome.
- Lurker, M. (1990). *Dictionary of the images and of the symbols*. Cinisello Balsamo: Pauline Publishing.
- Lutz, H. F. (1922). *Viticulture and brewing in the ancient Orient*. Leipzig, Germany: J. C. Hinrich, Publishing.
- Lynne All-Northcott, (2012). Substance abuse. In S. Ahmed & S. S. Amer (editors). *Counseling Muslims: Handbook of mental health issues and interventions*. New York, NY: Routledge, Taylor and Francis Group.
- Maddox, G. L., (1962). Teenage drinking in the United States. In D. J. Pittman & C. R. Snyder, (editors). *Society, culture, and drinking patterns*. New York, NY: John Wiley & Sons, Inc.
- Mahler, M. (1968). *On human symbiosis and the vicissitudes of individuation, (vol. 1): Infantile psychosis*. New York, NY: International University Press.
- Maier, J, & Schäfer, P. (1985). *Small Jewish encyclopedia*. Casale Monferrato, Italy: Marietti.
- Mancall, P. C. (2004). Alcohol and narcotics in American context. "I was addicted to drinking rum": Four centuries of alcohol consumption in Indian country. In S. W. Tracey & C. J.

- Acker, (editors). *Altering American consciousness: History of alcohol and drug use in the United States, 1800-2000*. USA: University of Massachusetts Press.
- Manaresi, M. (2011). *Wine and interculturality: Judaism, Christianity, and Islam*. (G. Forlivesi Heywood Trans.). Ravena, Italy: Angelo Long Publishing.
- Mandukani, J. (1981). The bad habit of drinking. In A. Heilmann. *The theology of the Fathers. Texts of some Latin, Greek, Oriental Fathers sorted in terms*. (Volume 1 pp 331-332). God-creation-man-sin, Italy, Rome: Città Nuova Publishing.
- Mbiti, J. S. (1988/1989). God, sin, and salvation in African religion. *The Journal of the Interdenominational Theological Center*, 16, 59-86.
- Mbiti, J. S. (1997). *African religions and philosophy*. (2nd edition). Oxford, England: Heinemann Educational Publishers.
- Mbiti, J. S. (2015). *Introduction to African Religion*. (2nd edition). Long Grove, Illinois: Waveland Press Inc.
- McCarthy, R. G. (1963). *Drinking and intoxication*. New Haven, CT: New College and University Press.
- McDevitt-Murphy, M. E., Murphy, J. G., Monahan, C. J., Flood, A. M., & Weathers, F. W. (2010). Unique patterns of substance misuse associated with PTSD, depression, and social phobia. *Journal of Dual Diagnosis*, 6(2), 94-110. Doi: 10.1080/15504261003701445. <https://doi.org/10.1080/15504261003701445>
- McGoldrick, M., Preto, N. G., & Carter, B. (2016). *Expanding family life cycle: Individual, family, and social perspectives*. (5th edition). New York, NY: Pearson Education, Inc.
- Mcveigh, M. J. (1974). *God in Africa*. Hartford: Claude Stark Inc.

- McWilliams, N. (2011). *Psychoanalytic diagnosis: Understanding personality structure in the clinical process*. (2nd edition). New York, NY: The Guilford Press.
- Miller, W. R. (1998). Researching the spiritual dimensions of alcohol and other drug problems. *Addiction*, 93, 979-990.
- Moonat, S., & Pandey, S. C. (2012). Stress, Epigenetics and Alcoholism. *Alcohol Res*, 34(4): 495-505.
- Moos, R. H. (2003). Addictive disorders in context: Principles and puzzles of effective treatment and recovery. *Psychology of Addictive Behavior*, 17, 3-12.
- Morewood, S. (2013). *The history of alcohol in Africa and Asia: Includes the Nubians, other African nations, the Turks, the Persians, the Tartars, the people of India and the Javanese*. Britain: Red Book Ltd.
- Morris, H., Larsen, J., Catterall, E., Moss, A. C., & Dombrowski, S. U. (2020). Peer pressure and alcohol consumption in adults living in the UK: A systematic qualitative review. *BMC Public Health*, 20, 1014. <https://doi.org/10.1186/s12889-020-09060-2>
- Morrison, A. P. (1989). *Shame: The underside of narcissism*. Hillsdale, NJ: Analytic Press.
- Nelson, N. (1982). Women must help each other: The operation of personal networks among Buzaa Beer Breweries. In P. Caplan, & J. Bujra (eds.). *Women united, women divided*. Bloomington: Indiana University Press. 77-98.
- Nwagu, E. N., Dibia, S. I. C., & Odo, A. N. (October, 2017). Socio-cultural norms and roles in the use and abuse of alcohol among members of a rural community in the Southeast Nigeria. *Health Education Research*, 32(5): Pp.423-436.
<https://doi.org/10.1093/her/cyx058>

- Obot, I. S. (2000). The measurement of drinking patterns and alcohol problem in Nigeria. *Journal of Substance Abuse* 12, 169-181.
- Obot, I. S. (2006). Alcohol use and related problems in sub-Saharan Africa. *African Journal of Drug and alcohol studies*, 5, 17-26.
- Odejide, A. O. (1993). "Drug abuse in Nigeria: Nature, extent, policy formulation and the role of the national drug law enforcement agency (NDLEA)." In I. S. Obot, (editor). *Epidemiology and control of substance abuse in Nigeria*. Jos, Nigeria: CRISA, 167.
- Okonkwo, U. U. (2017). *We drank palm wine until they arrive: A socio-economic history of alcohol in Southeastern Nigeria*. New Jersey: Goldline and Jacobs Publishing.
- Olaniyan, R. (1982). African and external contacts. In R. Olaniyan, (editor). *African history and culture*. Lagos, Nigeria: Longman.
- Olitzky, K. M., & Copans, S. A. (2009). *Twelve Jewish steps to recovery: A personal guide to turning from alcoholism and other addictions*. Woodstock, VT: Jewish Lights Publishing.
- Omkarappa, D., & Rentala, S. (2019). Anxiety, depression, self-esteem among children of alcoholic and nonalcoholic parents. *Journal of Family Medicine and Primary Care*, 8(2).
- Oso, S. O. (1979). *Lectures on west African tradition religion*. Ado-Ekiti: Bimboye & Co Press (Nig.) Ltd.
- Paul VI. (1968, September 28). *To the president of Niger*. Rome.
- Petrucelli, J. (2016). Who moved my "swiss" cheese? Eating disorders and the use of dissociation as an attempt to fill in the "whole." In E. F., Howell, & S. Itzkowitz. (Editors). *The dissociative mind in psychoanalysis: Understanding and working with trauma*. New York, NY: Routledge.
- Pine, F. (1990). *Drive, Ego, Object, and Self: A synthesis for clinical work*. USA: Basic Books.

- Piers, G., & Singer, A. (1953). *Shame and guilt*. Springfield, IL: Thomas.
- Putnam, F. W. (1997). *Dissociation in children and adults*. New York: Guilford Press.
- Rado, S. (1926). The psychic effects of intoxicants: An attempt to evolve psychoanalytical theory of morbid cravings. *International Journal of Psychoanalysis*, 7, 396-413.
- Rado, S. (1933). The psychoanalysis of pharmacothymia (drug addiction). *Psychoanalytic Quarterly*, 2, 1-23.
- Rehan, W., Antfolk, J., Johansson, A., Jern, P., & Santtila, P. (2017, May 8). Experiences of severe childhood maltreatment, depression, anxiety and alcohol abuse among adults in Finland. *PLoS One*, 12(5), Doi: <http://dx.doi.org/10.1371/journal.pone.0177252>
- Rorabaugh, W. (1979). *The Alcoholic Republic: An American tradition*. Oxford: Oxford University Press.
- Rossano, P., & Ravasi, G. (1988). *New dictionary of biblical theology*. (pp. 525-526). Milan: Pauline Press.
- Rose, M. E., & Cherpitel, C. J. (2011) *Alcohol: Its history, pharmacology, and treatment*. Minnesota, USA: Hazelden Foundations,
- Rosenthal, F. (1975). *Gambling in Islam*. Leiden, Netherlands: Brill.
- Rotty, M. (1988). *Wine in the Quran: In the sacred texts and Mediterranean cultures*. Paris: OIV.
- Rothschild, D. (2010). Partners in treatment: Relational psychoanalysis and harm reduction therapy. *Journal of Clinical Psychology: In Session*, 66(2), 136-149.
www.interscience.wiley.com Doi: 10.1002/jclp.20670
- Rycroft, C. (1972). *A critical dictionary of psychoanalysis*. London: Penguin Books

- Sachs, A. (2007). Infanticidal attachment: Symbolic and concrete. *Attachment: New Directions in Psychotherapy and Relational Psychoanalysis*, 1(3), 297-304.
- Sandler, M., & Roger, P. (2003). *Wine: A scientific exploration*. London: Taylor & Francis.
- Saint, Augustine. (1968). *Commentary on the Gospel and on the first Epistle of Saint John*. (E. Gandolfo, Trans.; part III, Diacorsi, vol. 24). Rome: Citta Nuova Editrice. (Original work publication, n.d.).
- Sawyer, H. (1969). "Sacrifice" in *Biblical revelation and African beliefs*. (Dickson and Ellingworth, editors). Maryknoll: Orbis.
- Schaff, P. (Editor). (1886). *Nicene and post-Nicene Fathers*. (Series 1. Volume, 9). Chrysostom J.: On the priesthood, ascetic treatises, select homilies and letters, homilies on the statues. New York, NY: Christian Literature Publishing Co.
- Schaff, P. (Editor). (2007). *Nicene and post-Nicen Fathers, Chrysostom: Homilies on Gospel of St John and the Epistle to the Hebrews*. (1st Series. Volume XIV). New York, NY: Cosmo Inc.
- Shapiro, F. (2001). *Eye movement desensitization and reprocessing: Basic principles, protocols and procedures*. (2nd edition). New York, NY: Guilford Press.
- Serfass, C. (1909). *Wine in the Bible*. Neuchâtel, Switzerland: Attinger Frères Press.
- Shengold, L. (1989). *Soul murder: The effects of childhood abuse and deprivation*. New Haven, CT: Yale University Press.
- Sherratt, A. (1995). Alcohol and its alternatives: Symbol and substance in pre-industrial cultures. In J. Goodman, P. E. Lovejoy, & A. Sherratt. (Editors). *Consuming habits*. London: Routledge.
- Simmel, E. (1948). Alcoholism and addiction. *Psychoanalytic Quarterly*, 17, 6-31.

- Sinason, V. (1992). *Mental handicap and the human condition: New approaches from the Tavistock*. London: Free Association Books.
- Sinason, V. (Editor) (1994). *Treating survivors of Satanist abuse*. London: Routledge.
- Sinason, V. (2016). The seeming absence of children with DID. In E. F., Howell, & S. Itzkowitz. (Editors). *The dissociative mind in psychoanalysis: Understanding and working with trauma*. New York, NY: Routledge.
- Sieff, D. F. (2015). *Understanding and healing emotional trauma: Conversation with pioneering clinicians and researchers*. New York, NY: Tailor and Francis Group.
- Silberberg, N. (Retrieved 2021, June 24). *What sort of fruit tree was the tree of knowledge?*
https://www.chabad.org/article_cdo>aid>jewish
- Snyder, C. R. (1962). Culture and Jewish sobriety: The ingroup-outgroup factor. In D. J. Pittman & C. R. Snyder. (Editors). *Society, culture, and drinking patterns*. New York, NY: John Wiley & Sons, Inc.
- Somé, M. P. (1997). *Ritual: Power, healing, and community*. USA: Penguin Groups.
- Spiegel, D. (1990). Trauma, dissociation, and hypnosis. In R. Kluft. (Editor). *Incest-related syndromes of adult psychopathology*, (pp. 247-262). Washington, DC: American Psychiatric Press.
- Steinberg, P. (2014). *Recovery, the 12 steps and Jewish spirituality: Reclaiming hope, courage and wholeness*. Woodstock, VT: Jewish Lights Publishing.
- Steinsapir, C. (1983). *The ante-bellum temperance movement at the local level: A case study of Schenectady*, New York. [Ph.D. Dissertation: Rutgers University].
- Stern, D. N. (1985). *The interpersonal world of the infant: A view from the psychoanalysis and developmental psychology*. New York, NY: Basic Books

- Syed, I. (2002). Islamic medicine: 100 years ahead of its time. *JISHIM*. Volume 2.
- Tangney, J., & Dearing, R. (2004). *Shame and guilt*. USA: The Guilford Press.
- Tanzarn, N. B. (2002). Liquid gold of a lost kingdom: The rise of Warangi production in Kibale district, Uganda. In D. F. Bryceson, (editor). *Alcohol in Africa: Mixing business, pleasure, and politics*. Portsmouth, NH: Heinemann.
- Taub, S. (2011). *God of our understanding: Jewish spirituality and recovery from addiction*. Jersey City, NJ: Ktav Publishing House Inc.
- The Code of Canon Law*. (2011). Sidney, Australia: Collins Liturgical Publications.
- The new American Bible*. (2010). Wichita, Kansas: Fireside Catholic Publishing.
- The Qur'an*. (N. J. Dawood, trans.). (1993). London: Penguin Book.
- The Qur'an* (P. Branca, trans.). (2001). Bologna: The Mulino.
- Thomas, D. E. (2015). *African traditional religion in the modern world*. (2nd edition). Jefferson, North Carolina: McFarland & Company, Inc., Publishers.
- Thompson, R. F. (1983). *Flash of the spirit: African and Afro-American art and philosophy*. New York: Vintage.
- Tracey, S. W., & Acker, C. J. (Editors). (2004). *Altering American consciousness: The history of alcohol and drug use in the United States, 1800 – 2000*. USA: University of Massachusetts Press.
- Twerski, A. J. (1990). *Addictive thinking: Why do we lie to ourselves? Why others believe us?* USA: Hazelden Foundation.
- Unwin, T. (1996). *History of the wine: Geography, culture and myths of antiquity to our time*. Rome: Donzelli Press.
- Vallee, B. (1998). Alcohol in the Western World. *Scientific American*, 278(6), 80-84.

- Van der Kolk, B. A. (1996). Trauma and memory. In B. A. Van der Kolk, A. C. McFarlane, and L. Weisaeth. (Editors). *Traumatic stress: The effects of overwhelming experience on mind, body and society*. (pp. 279-302). New York, NY: Guilford Press.
- Volney, C. F. (1792). *Travels through Syria and Egypt*. (Volume 1). Paris: H. Garriod.
- Walton, S., & Glover, B. (1999). *The ultimate encyclopedia of wine, beer, spirits, and liqueurs*. Leicester, England: Hermes House.
- Waska, R. (2006). Addictions and the quest to control the object. *American Journal of Psychoanalysis*, 66, 43-62.
- Westphal, V. K., Worth, L. M., & Tonigan J. S. (2003). Nature and stability of AA participation over a 10year period in project MATCH. *Alcoholism: Clinical and Experimental Research*. 26 (5 supplement) 652A (Abstract).
- White, W. L. (1999). A history of adolescent alcohol, tobacco and other drug use in America. *Student Assistant Journal*, 11(5), 16-22.
- White, W. L., Kurtz, E., & Sanders, M. (2006). Recovery management. Chicago, IL: Great Lakes. *Addiction Technology Transfer Center (ATTC) Network*.
www.nattc.org/recoveryresource/docs/RecMgmt.pdf.
- Winnicott, D. W. (1960b). Ego distortion in terms of true and false self (pp. 140-152). In *maturational processes and facilitating environment: Studies in the theory of emotional development*. London: Hogarth Press.
- Wilson, B. (1944). Basic concepts of alcoholic anonymous. Presentation to the medical society of the State of New York. *In alcoholic anonymous world service Inc*.
- Winnicott, D. W. (1965). *Maturational processes and the facilitating environment: Studies in the theory of emotional development*. London: Hogarth Press.

- Witbrodt, J. & Kaskutas, L. A. (2005). Does diagnosis matter? Differential effects of twelve step participation and social networks on abstinence. *American Journal of Drugs and Alcohol Abuse*, 31, 685-707.
- World Health Organization. (2002). *Alcohol in developing societies: Summary*. Geneva.
- World Health Organization. (2004). *Global status report: Alcohol policy*. Geneva.
- World Health Organization (2009). Toward a global strategy to reduce harmful use of alcohol-discussion paper for regional technical consultation on harmful use of alcohol. *Technical Report*. Geneva, Switzerland: Department of Mental and Substance Abuse.
- Yu Yu, Hu Mi, Liu Zi-wei, Liu Hui-ming, Yang, J. P., & Zhou, L. (2016, April 6). Recognition of depression, anxiety, and alcohol abuse in Chinese rural sample: A cross-sectional study. *BMC Psychiatry*, 16(94). Doi: <http://dx.doi.org/10.1186/s12888-016-0802-0>
- Zinberg, N. (1975). Addiction and Ego function. *Psychoanalytic study of the child*, 30, 567-588.
- Xavier, L. (1965). *Dictionary of biblical theology*. Turin, Italy: Marietti.

Appendix A: Invitation to Participate

85-92 148th Street

Briarwood, NY 11435

December 28, 2021

Dear Friends,

As you may know, in the Fall of 2017, with the full support of the Archbishop, I was admitted to Hebrew Union College, New York University as a part of their Interfaith Doctor of Ministry Program for education in pastoral care. I am now conducting a study to better understand perceptions about alcohol use in Nigerian culture. This study is in partial fulfillment for the Doctor of Ministry degree. I am writing to invite you to assist me with my research by filling out the survey which can be found at the following link:

<https://www.surveymonkey.com/r/X9C8GBQ> . The survey will take approximately 9-10 minutes to complete, and will be available for completion from Tuesday, December 28, 2021, until Tuesday, January 10th, 2022.

The survey collects information on one individual at a time. Other members of your household (age 18 and older) can also complete their own questionnaire. Survey participants' identities will be kept strictly confidential. Participation in the survey is voluntary.

If you have any questions or concerns, please feel free to reach out to me at alexagbata3@aol.com

Thank you, for your assistance and consideration of this important matter.

Sincerely,

Fr. Alex

APPENDIX B: The Consent Agreement Introduction

Thank you for consenting to participate in this survey study. This is a survey study being conducted by Fr. Alex Agbata in collaboration with Fr. Luke Ibeh, the chaplain of the Nigerian Roman Catholic Community in the Bronx, New York City. The survey is intended to identify the stressors that families with problem drinkers experience in the Nigerian society.

Fr. Alex, the investigator, and Fr. Luke will guard the information collected and the identities of all the participants will be kept anonymous. All materials will be anonymous and be held in confidence by this investigator. Please be as truthful as possible. Your participation in this survey is completely voluntary.

This study is a requirement for the Doctor of Ministry degree and is done under the supervision of Hebrew Union College-Jewish Institute of Religion, Interfaith Doctor of Ministry Program, New York University. The investigator, Fr. Alexander S. U. N. Agbata, can be reached at (347) 477-8069, or at alexagbata3@aol.com. Information gathered will be used by the investigator to better understand the perception of alcohol abuse issues in Nigerian culture especially the nature of problem drinkers' families suffering. By participating in this survey, you are electronically consenting to your responses being used as described above and acknowledge that your participation is voluntary and that you have read and understood the above information. Thank you.

Name of participant (print) _____

Signature

Date

Code # _____

Appendix C: The Questionnaire

Sometimes the survey will show a green OK button, please press it to continue. You may also see a green NEXT button, if you see the OK button click it first then click the NEXT button. If you just see a NEXT button, please click it to get to the next question. Once you reach the END PAGE of the survey, please close your browser. Thank you.

1. Please indicate your age:

Under 18	45-54
18-24	55-64
25-34	65+
35-44	

2. Which gender identity do you most identify:

- | | |
|---------------|-----------------------|
| a. Male | d. Transgender Male |
| b. Female | e. Transgender Female |
| c. Non-Binary | f. Not Listed |

3. Which of the following describes your relationship status?

- | | |
|--------------|-------------|
| a. Single | d. Divorced |
| b. Married | e. Widowed |
| c. Partnered | |

4. What is the highest level of education you have completed?

- Did not complete 8th grade
- Currently attending High School
- Currently attending High School Vocational certification
- Associate Degree

- e. Bachelor's degree or equivalent
 - f. Master's Degree or equivalent
 - g. Doctorate or equivalent
5. Are you a Catholic?
- Yes
- No
6. I have been a member of the Catholic faith:
- a. Since infancy
 - b. 6-10 years
 - c. 11+ years
 - d. I am a former Roman Catholic
 - e. I have never been a Roman Catholic
7. My religious affiliation prior to becoming Roman Catholic is best described as:
- a. I was a protestant Christian
 - b. I was a follower of a non-Christian or non-Catholic faith
 - c. I was spiritual, but not religious
 - d. I was a non-believer
 - e. None of the above
8. Please select the statement that best describes you
- a. I am actively preparing for conversion to the Catholic faith
 - b. I am not Catholic myself, but I identify as Christian
 - c. I am spiritual but not identified with any faith
 - d. I follow another faith
 - e. None of the above
9. Do you believe alcohol is a problem in your community?
- Yes
- No

10. Have you ever used alcohol?

Yes

No

11. Have you used AA or Al-Anon to help you with your use of alcohol?

a. Yes, and I still do use them

b. Yes, but I don't use them now

c. No, I have never used them to help me with my use of alcohol

12. What is your history of alcohol use? Check the one that most applies:

a. I no longer use alcohol

d. I use it weekly

b. I use it yearly

e. I use it daily

c. I use it monthly

13. If you drink or have drunk alcohol, state what age, you began drinking?

a. Before the age of 10

e. 26-30

b. 10-15

f. 31-40

c. 16-20

g. 41-50

d. 21-25

h. None of the above

14. When or with whom did you have your first experience with alcohol?

a. At the time of first communion

e. With others my age

b. By myself, I was alone

f. With others not my age

c. With a family member

g. None of the above

d. With a friend

15. Have you ever used any of these drugs?

a. Caffein

j. Barbiturates

- | | |
|--------------------|----------------------|
| b. Nicotine | k. Benzodiazepine |
| c. Marijuana | l. Opiates |
| d. Cocaine | n. OxyContin |
| e. Crack | o. Adderall |
| f. Methamphetamine | p. Xanax |
| g. Ketamine | q. Other |
| h. Heroin | r. None of the above |
| i. Fentanyl | |

16. Have you used any drugs together with alcohol?

Yes

No.

Other (if you answered "Yes" above, please also state which drugs you used most often with alcohol)-----

17. How do you behave when you are drinking? Or check all that apply:

- a. I withdraw from others
- b. I can become angry
- c. I can become aggressive
- d. I become hyperactive
- e. I become talkative
- f. I become high spirited
- g. Other (please specify) -----

18. Do you feel that you have a drinking problem?

- a. Yes

- b. Not sure
- c. No

19. When drinking excessively or drunk I have: (check all that apply)

- a. Expressed angry feelings
- b. Used abusive words
- c. Hit others
- d. Lost consciousness – passed out
- e. Blacked out – lost memory of time and my behavior while drinking
- f. Withdrawn – needed to be alone
- g. Spent money recklessly
- h. Destroyed property
- i. Called out sick
- j. Been unable to go to work
- k. Been unable to childcare
- l. Done things without recall
- m. I was in school and had to drop-out at least for a while.
- n. Other (please specify) _____

20. Prior to the onset of my problem with drinking, my employment status was:

- a. Full time
- b. Part time
- c. Not working at the time
- d. Retired

21. Following the onset of my problem with drinking, my employment status is:

- a. Full time
- b. Part time
- c. Not working at the time
- d. Retired

22. Prior to my problem with drinking my level of participation in worship services was:

- a. Daily
- b. Weekly
- c. Monthly
- d. A few times throughout the year
- e. Only on Holy Days of obligation
- f. Never

23. Following the onset of my problem with drinking my level of participation in worship services became:

- a. Daily
- b. Weekly
- c. Monthly
- d. A few times throughout the year
- e. Only on Holidays of Obligation
- f. Never

24. Prior to the onset of my problem with drinking, my faith was:

- a. One of the most important parts of my life
- b. Only a moderate part of my identity
- c. Not particularly important to me

25. Which of the following best describes your relationship with God, prior to having a problem with drinking?

- a. I did not believe in God
- b. I was actively struggling with believing in God
- c. I believed in God

26. Following the onset of my problem with drinking, which of the following best describes my belief in God?

- a. I do not believe in God
- b. I am actively struggling with believing in God
- c. I believe in God

27. Which of the following best describes your feelings towards God now, as compared to prior to your problem with drinking?

- a. I feel less angry with God now than I used to
- b. I feel angrier with God now than I used to
- c. I have never been angry with God

28. Does a family member have problem with drinking? Check all that apply:

- a. Yes
- b. No

29. Which family members have a problem with drinking? Check all that apply:

- | | |
|------------|----------------|
| a. Mother | f. Aunt |
| b. Father | g. Cousin |
| c. Brother | h. Grandmother |
| d. Sister | i. Grandfather |
| e. Uncle | |

Other (please specify) _____

30. How do your family members generally behave when they are drinking? Check all that apply:

- a. They withdraw from others

- b. They can become angry
- c. They can become aggressive
- d. They become hyperactive

Other (please specify) _____

None of the above

31. Choose the family member who has the most serious problem with drinking? Use that choice to answer the next several questions:

- a. Mother
- b. Father
- c. Brother
- d. Sister
- e. Uncle
- f. Aunt
- g. Grandmother
- h. Grandfather

Other (please specify) _____

32. When drinking or drunk has the family member who has the most serious problem with drinking ever: (check all that apply)

- | | |
|--|------------------------------|
| a. Expressed angry feelings | g. Spent money recklessly |
| b. Used abusive words | h. Destroyed property |
| c. Hit others | i. called out sick |
| d. Lost consciousness – passed out | j. Been unable to go to work |
| e. Blacked out – lost memory of time and my behavior | k. Been unable to childcare |

f. Withdrawn – needed to be alone

Other (please specify) _____

None of the above

33. When did you know the selected family member had a problem with alcohol?

a. Age 3-5

d. Age 16-20

b. Age 6-10

e. Age 21-26

c. Age 11-15

f. 27+

34. Prior to the onset of their drinking, the family member who has the most serious problem with drinking, their employment status generally was:

a. Full time

b. Part time

c. Not working at the time

d. Retired

35. Following the onset of their drinking, the family member who has the most serious problem with drinking, their employment status generally was:

a. Full time

b. Part time

c. Not working at the time

d. Retired

36. Prior to the drinking by the family member with the most serious problem with drinking, my level of participation in worship services was:

a. Daily

d. A few times throughout the year

b. Weekly

e. Only on Holy Days of Obligation

- c. Monthly
- f. Never

37. Following the onset of drinking by the family member with the most serious problem with drinking, my level of participation in worship services has been:

- a. Daily
- d. A few times throughout the year
- b. Weekly
- e. Only on Holy Days of Obligation
- c. Monthly
- f. Never

38. Prior to the onset of drinking by the family member with the most serious problem with drinking, my faith was:

- a. One of the most important parts of my life
- b. Only a moderate part of my identity
- c. Not particularly important to me

39. Prior to the family member's drinking who has the most problem with drinking, which of the following best describes your relationship with God?

- a. I do not believe in God
- b. I am actively struggling with believing in God
- c. I believe in God

40. Following the onset of the family member's drinking by the one with the most problem with their drinking, which of the following best describes your belief in God:

- a. I do not believe in God
- b. I am actively struggling with believing in God
- c. I believe in God

41. Which of the following best describes your feelings toward God now, as compared to the prior to the family member's drinking by the one with the most problem with their drinking?

- a. I feel less angry with God now than I used to
- b. I feel angry with God now than I used to
- c. I have never been angry with God

42. Have you experienced the loss of connection to someone other than a relative as a result of that person's problem with drinking?

- a. Yes
- b. No

43. Following the loss of connection with that person, which of the following best describes your relationship with God:

- a. I do not believe in God
- b. I am actively struggling with believing in God
- c. I believe in God

44. I will describe my typical amount of anxiety as:

- a. None at all
- b. A small amount
- c. A moderate amount
- d. A significant amount
- e. An overwhelming amount

45. I am feeling isolated:

- a. None of the time
- b. A little bit of the time
- c. Some of the time
- d. Most of the time
- e. All of the time

46. I am happy:

- | | |
|-----------------------------|---------------------|
| a. None of the time | d. most of the time |
| b. A little bit of the time | e. All of the time |
| c. Some of the time | |

47. I am feeling alone:

- | | |
|-----------------------------|---------------------|
| a. None of the time | d. most of the time |
| b. A little bit of the time | e. All of the time |
| c. Some of the time | |

48. Should religious institutions play a part in helping individuals recover from their problems with drinking?

- | | |
|-------------------------|-------------------|
| a. Do not agree | d. Slightly agree |
| b. Moderately agree | e. Strongly agree |
| c. Very strongly agree. | |