

## Preface

My interest in recovery can be traced back to my own youth, in which I witnessed someone close to me struggling with psychological vulnerabilities and alcohol problems. However, I also experienced the hope of recovery and how certain resources can facilitate recovery. When I was six years old, my father migrated to another country for a few years, which enabled me to travel more than most children my age. This probably triggered my love for traveling and interest in the rest of the world later on, but it also came with feelings of loss every time I had to leave one of my parents behind. My decision to study Special Needs Education was undoubtedly related to an attempt to understand the intense emotions I had felt and witnessed in my environment as a child.

The self-proposed topic of my master's thesis explored the role of a creative workspace in the recovery processes of five women with psychological vulnerabilities. The same year, my passion for exploring the world and grasping different worldviews led me to India for my internship. While this was an amazing experience, it also came with challenges. Adapting to an unfamiliar culture, in an unknown country with an unknown language, was not easy, and I was grateful for the resources that gave me comfort in this process, such as a supportive school and network as well as a financially stable situation that enabled me to be physically comfortable. This made me reflect on the challenging aspects of a migration experience and when a vacancy opened up to scientifically explore recovery among persons with a migration background and ethnic minorities from the perspective of lived experiences, I did not hesitate. However, throughout the research process, it became clear that conducting research on a topic as sensitive as this one poses its own set of challenges; for me, for the persons whom it concerns, and for conducting research. This PhD process has been quite a ride. It has

been a continuous search for doing good, personally, socially and scientifically. While, at times, my hesitations, doubts, and continuous search slowed me down, they also proved useful, allowing me to take in different perspectives, take a reflective stance, and embody a critical position.

My own experiences that shaped me into the person I am today may have had an impact on how I conducted this research, increasing and decreasing spontaneous understanding of certain experiences participants told me about. However, I aimed to truly listen to the narratives of participants and document these in way that is true to their stories. Thanks to the stories of persons with first-hand lived experiences, this dissertation provides a comprehensive understanding of how persons with a migration background and ethnic minorities experience substance use recovery and what helps and hinders them in that process. Their narratives touched me in more ways than I ever deemed possible. Within this thesis, I hope to offer readers a glimpse into these experiences and my research process from a scientific point of view.

First, the general introduction delineates the most important concepts, research questions, and methodological considerations. Chapters 2 to 5 are based on scientific papers: a systematic review of first-person perspectives of recovery capital among persons with a migration background and ethnic minorities (MEM) (Chapter 2), an analysis of lived experiences of MEM in substance use recovery in Flanders (Chapters 3 and 4), and a co-creative case study with an expert-by-experience concerning problem substance use and recovery among persons with an Islamic background (Chapter 5). As these chapters are based on four independent papers originating from different stages of the research process, there may be some overlap in content across the chapters. The thesis concludes with a general discussion that synthesises the most important findings and translates them into recommendations for practice, policy, and research. It offers insight into possible recovery resources and barriers for MEM, aiming to inspire researchers, policymakers, and practitioners to be aware of the limitations of their own reference, policy, and practice framework and the possibilities to support recovery among MEM.