

TWO WORLDS OF HEALING



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Author: Sumea Ramadani

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Sumea Ramadani



About the Author

Sumea Ramadani is a Psychological Counsellor, Clinical Psychologist, and PhD candidate in Andragogy at the Institute of Pedagogy, Faculty of Philosophy, Ss. Cyril and Methodius University in Skopje and the Psychology Faculty of the Faculty of Humanities and Social Sciences at International Balkan University. She is a Teaching Assistant at the International Balkan University (IBU), Faculty of Humanities and Social Sciences, where she lectures in psychology and psychotherapy. Guided by the belief that “healing is not the end of the story but the beginning of a new one,” Sumea integrates scientific, cultural, and philosophical perspectives in this book about different worlds of healing.

*To everyone who dares to believe that healing is
never singular but found in the endless search for
new paths toward wholeness...*

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Preface

At a very early age, I began scribbling on paper. Perhaps it was a coping mechanism for me. Perhaps it was a talent. But it was most certainly my way of dealing with the world, with life itself. My mother had started reading my diaries. Because of this, I found my own method: I would only write the first letters of the words, feelings, and thoughts that came to mind. In this way, at least, I could pour things out of myself. I could put my imagination onto paper, and no one else could understand it, not even me, after a while. As I grew older, I started being aware of an unwritten rule: Do not write until it flows from you. Do not write until you truly cannot hold it inside you. Still, when it came to writing my master's thesis, and later this book, I tried to postpone, to delay as much as possible, but one moment the words simply spilled out of me, and I couldn't resist. Perhaps nothing I have written in this book is exactly as it was or as it is, and perhaps for everything I have written, there are details that could have been added, things that could have been told more fully. But this remains my first work,

my first attempt to offer the world my vision, my gift. And the first sin is always forgiven. There is no flaw on the first try. I didn't stumble into the topic of addiction by chance; I chose it with a quiet certainty. As a clinical psychologist, I was drawn to complexity, to the layers beneath human behavior, and I longed to work on something that carried within it the full map of psychological suffering. I wanted to study a phenomenon where trauma and depression, anxiety and loneliness, family ruptures and societal silence all intersected in one place. Addiction holds all of them. I remember that night vividly. I was walking alone along the Vardar River, all the city moving around me, but my thoughts were elsewhere. It was during one of those reflective walks, the kind where decisions surface from somewhere deeper than logic, that I realized: this would be the research topic of my master's thesis. It made perfect sense. Addiction wasn't just a clinical disorder, it was a mirror. A reflection of deeper wounds, of unmet needs, of unhealed pain. If I wanted to understand human suffering in its rawest form, this was the way in. But I didn't want to approach addiction through the lens of another country's reality. I didn't want to study recovery programs in Turkey, or policies in Switzerland, or treatment centers in the United States. I wanted to look inward to our own land, our own people, our own unspoken struggles. What does addiction look like in North Macedonia? Who suffers? Who helps them? Who listens? The most obvious answer was the psychiatric hospital. It's where treatment officially begins, where diagnoses are made, where charts are filled. But I knew there had to be something beyond institutional corridors. I felt a growing pull toward the unexplored, the unconventional. One

evening, while speaking with my husband, we recalled a place I had only heard about in passing: the Monastery of Saint Jovan Bigorski. He told me that it wasn't just a place of faith, it was also a sanctuary for those trying to recover from addiction. That spark was enough. We visited the monastery not long after. I wasn't planning to stay long. But the moment I stepped into its atmosphere, something shifted. There was a stillness there, a kind of sacred silence that didn't demand explanation. It just embraced you. The energy was different, grounded, warm, quietly powerful. Back home, I sat down and wrote a message to my mentor proposing the topic. It wasn't an easy sell. The academic world prefers clearly defined paths, measurable outcomes, and conventional methods. Many questioned my idea. Some dismissed it. But I couldn't let it go. The monastery had left a mark on me. Then, by what I can only call grace, I met Efrem. He had once been held in addiction's grip, but now, more than a decade later, he was living a different story, one of resilience, stillness, and deep inner transformation. He shared his journey with me, and something in his words lodged itself in my heart. They didn't sound like a case study or a recovery report. They sounded like the truth. That conversation opened the door. One by one, I met others at the monastery: priests, protégés, people whose stories often went unheard. And they trusted me. They allowed me to listen, to ask, to wonder. That's how my research truly began, not in a library, but in a moment of human connection. This study may have started as a thesis, but it quickly became something else: a pilgrimage into the human condition. Into the many meanings of suffering and the surprising shapes of healing. It's a journey that led me

to hospitals and monasteries, to scientific interviews and sacred rituals, to data sets and deep conversations. But more than anything, it led me deeper into what it means to be human and how, even in the darkest of places, something inside us still longs to be whole.

Sumea Ramadani
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Chapter 1

The Illness, the Disorder, the Problem

Addiction is a chronic, relapsing brain disorder characterized by compulsive substance seeking and use or engagement in a behavior, despite harmful consequences. It involves complex interactions between brain circuits, genetics, environment, and life experiences, and it can affect both substance use and non-substance-related activities like gambling or eating. The World Health Organization (WHO) states that addiction impairs self-control, reward, motivation, judgment, and memory, leading to a powerful, often uncontrollable urge to continue the addictive behavior. Addiction to psychoactive substances is a multifaceted phenomenon encompassing biological, psychological, and social dimensions. Recognized by the WHO, it manifests through a constellation of cognitive, behavioral, and physiological symptoms that intensify with repeated drug consumption. Individuals grappling with addiction often experience an overwhelming urge to consume substances, coupled with challenges in regulating their usage. Despite adverse repercussions, they persist in substance use, often